



# PULSE

THE QUARTERLY PUBLICATION OF THE AMERICAN COLLEGE OF OSTEOPATHIC PEDIATRICIANS

Spring • 2012

## AOA President to Deliver the James M. Watson Memorial Lecture at the 2012 Spring Conference In Memphis

Martin S. Levine, DO, MPH, FACOFP, President of the American Osteopathic Association, will deliver the ACOP James M. Watson Memorial Lecture at 1:30 pm on Saturday, March 24th, at the ACOP 2012 Spring Conference in Memphis.

Dr. Levine qualifies for an AOA version of “In Their Footsteps”. His father, Howard M. Levine, DO, served as president of the AOA from 1997 to 1998. There are almost 20 osteopathic physicians in his family. He served on the AOA Board of Trustees since 2000 and has chaired multiple AOA committees. He has been a contributing member of the American College of Osteopathic Family Physicians and the American Academy of Osteopathy.

In addition to his family practice in New Jersey, he is the associate dean for edu-



cational development at the Touro College of Osteopathic Medicine in the Harlem neighborhood of New York City and Chief of Family Medicine for University of New England College of Osteopathic Medicine’s New Jersey Clinical Campus, based at Seton Hall University School of Health and Medical Sciences.

Dr. Levine earned his osteopathic medical degree from what is now the Kirksville (MO) College of Osteopathic Medicine–A.T. Still University and completed his internship and residency training at Kennedy Memorial Hospital in Stratford, NJ, where he served as chief resident. Dr. Levine has been the recipient of many honors and awards, including being named to

the Best Doctor listing in *New York Magazine* every year since 1999 and *NJAOPS* Physician of the Year. Dr. Levine has served as a sports medicine physician for Boston and New York Marathons for more than 25 years, as well as for Olympic and professional sports teams.

The ACOP welcomes Dr. Levine to its 2012 Spring Conference in Memphis. One more good reason to attend!

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### Is There an App for That?

19+ 1-A Category Credit Hours coming your way from the grand city of Memphis, TN. Join the ACOP on March 22-25 for the 2012 Spring Conference. The focus of the conference will be on technology in the outpatient office. Great opportunities to catch up with friends, learn, explore one of America’s great cities and earn CME.

See page 15 for the full brochure or [CLICK HERE](#) to visit ACOP’s website for more information.





## President's Message

James E. Foy, DO, FACOP  
ACOP President

### Happy New Year!

As we leave 2011 behind and venture into 2012, let me take this opportunity to wish you all the best in 2012. I would also like to comment on some of the recent changes that will impact our practice milieu and that of the ACOP in the coming year.

On the clinical side, 2011 brought new recommendations concerning lipid screening in children. Now, per the recommendations of the National Heart, Lung and Blood Institute, rather than screening high-risk children only, we will be screening all children at 9-11 years of age. This recommendation was made due to the pediatric obesity epidemic, our increasing knowledge of the relationship between lipid disorders and the severity of atherosclerosis in children and studies that have shown that screening high-risk children will not identify 30-60% of children with lipid abnormalities. Another new screening recommendation involves the application of pulse oximetry screening of all neonates in our hospital nurseries. Recommended by the Federal government for inclusion in all state screening programs, if not already taking place at your hospital, look for it to come. Easy to perform, noninvasive and inexpensive, only time will tell if screening pulse oximetry proves to be a valuable tool in the early detection of neonates with congenital heart disease.

2011 also brought new vaccine recommendations, including the recommendation to administer the HPV vaccine to males at 11-12 years of age. This was a warranted change, and brings the U.S. in line with other developed nations, including the U.K. and Australia. Additionally, a MCV4 booster is now recommended at 16 years of age for those that received the initial dose at 11-12 years of age, and sometime after 16 years of age for those that were delayed in receiving the initial dose. Finally, a new immunization delivery system debuted in the U.S. in 2011. The Intradermal Fluzone vaccine, which uses a 1.8 mm needle, was approved in May 2011 for adults. This vaccine de-

livery method should reduce health care worker needle stick injuries, and prove popular with those patients that have needle phobia, as well as children and their parents. Look for this delivery system to be approved for children in the future.

2011 also brought the continuing accreditation of new colleges of osteopathic medicine, as well as a potential threat to the postgraduate educational opportunities available to our students from the Accreditation Council on Graduate Medical Education (ACGME). The ACGME threat takes the form of a proposal that would eliminate credit for an AOA-accredited internship for those D.O.s that are entering an ACGME residency and would eliminate the ability for a D.O. who completed an AOA-accredited



James E. Foy, DO,  
FACOP

residency to enter an ACGME-accredited fellowship. The comment period for this proposal has ended, and a decision should be forthcoming in 2012. If the proposal is implemented, it will have a profound effect on osteopathic postgraduate medical education.

2012 will undoubtedly bring further medical advances, and other changes that we cannot anticipate. However, for 2012, you can count on two superb ACOP CME conferences. The first will take place March 23 - 25 in Memphis and be hosted at the venerable Peabody Hotel. In addition to experiencing the famous Peabody duck walk, you will be treated to up-to-date presentations on ICD10, dermatology, pediatric EMR and imaging (including point of care ultrasound), amongst other topics. Our Watson Memorial Lecture in Memphis will be delivered by our current AOA President, Martin S. Levine, D.O. Then, in October, we will be off to sunny San Diego for our CME event held in conjunction with OMED 2012. This event (Oct. 7 - 11) will focus on Prevention and Immunization, with stellar speakers delivering presentations sure to be useful in your professional life. I hope to see you at one or more of our 2012 CME courses.



### Keep your eyes open for the April *eJournal* focusing on Newborn Care.

- Ed Spitzmiller, DO, will review optimizing discharge nutrition for NICU graduates.
- Robert Locke, DO, MPH, and Steven Snyder, DO, will discuss breastfeeding as a preventative medicine strategy.
- Stan Grogg, DO, will get you caught up on the catch-up immunization schedule for NICU graduates.
- Get helpful sport medicine tips from the Sideline.
- Outmatch Dr. Marshall in his corner of picture questions.
- Great articles, free CME.

### Did you miss seeing the last issue of the *eJournal*?

It is still available at [ACOP Website](http://www.acoped.org/ejournalarchive.iphtml) at  
<http://www.acoped.org/ejournalarchive.iphtml>



# MELNICK at large

By Arnold Melnick, DO, FACOP

## Drowning and Prevention

In the last issue of PULSE, I offered some suggestions about leaving children alone, and suggested that pediatricians use such material as handouts. This is a follow-up emphasized recently by some pediatricians.

A large number of pediatricians in Broward County, Florida, have taken to writing prescriptions about water safety for small children, because it is such a horrendous problem in the Sunshine State. In that county alone, they average 10 drowning deaths in small children every year – and 88 percent of them are in backyard pools. The adjacent county, Miami-Dade, can easily match those numbers and there is still the rest of South Florida.

What better place for anticipatory guidance? True, the numbers may be greater in this semi-tropical climate, but the advice (and the value of prevention) make it most worthwhile.

It raises a number of “Why’s”:

- Why doesn't the ACOP or AAP provide a one sheet handout on drowning – a

single sheet -- brief, uncomplicated and easy and quick to read (and save), as opposed to a comprehensive brochure?

- Why don't they provide such a sheet for school bullying?
- Why don't they provide such a sheet for leaving children alone?
- Why don't they provide such sheets for a number of important locally-endemic problems as well as universal ones?

Such informational sheets could be sold as pads with space for the physician to sign-- or presented electronically so the physician could add his name and print out the finished product.

And, while we're at it, since anticipatory guidance is such an important part of pediatric care (and takes additional time), why not a moderate additional compensation for this special service (upon proof) – in addition to the history, physical examination and treatment.

Why? Why? Why?

## By THE NUMBERS

### Childhood Obesity

By Robert G. Locke, DO, MPH, FACOP

7.5	Hours/day spent on electronic activity by children (50% of awake hours).
39%	Obese children with two or more cardiovascular risk factors when presenting to your office.
3.2	Odds ratio of being an obese child if one parent is obese.
87%	Chance of being an obese adult if an obese teenager
80%	Children who consume a sugary drink in a day.
+1000 kcal	Average energy gap (intake vs expenditures) overweight teens.
50%	Schools that allow advertising of less healthy foods to children.
0	States that regulate the nutritional intake or physical activities of the >12 million children receiving child care services.
18%	School-aged children who engage in the recommended 1 hour of physical activity/day
50%	Decrease in children who became overweight in Philadelphia schools with a nutrition intervention program compared to control schools
\$3 billion	Annual cost of childhood obesity
4.7%	Return on each dollar (ROI) spent on nutritional, anti-smoking and physical activity programs in Texas

## Historical Highlights

A new annual meeting developed in 1959, when the ACOP held its first joint meeting with the American College of Obstetricians and Gynecologists and met away from the AOA. The idea had been circulating for a few years. Harold Finkel, DO, FACOP, had developed skills in selling exhibit space at conventions and he was put in charge of that for the new convention. Arnold Melnick, DO, FACOP, served as the initial program chair. The partnership lasted for five years.

## Obesity Epidemic

By Robert Locke, DO, MPH  
Editor, PULSE

Obesity/overweight is touted the #1 public health issue. Though some would argue that economic security and earning a living wage remain the most powerful underlying common factor for the majority of public health issues facing the United States, there is no denying the devastating impact that weight-related disorders are having on pediatric health status.

Weight-related disorders are trans-generational. Pregnancies complicated by weight-related illness are more likely to lead to complicated pregnancies and altering fetal-newborn outcomes. Offspring of mothers with obesity are more likely to become obese and have pediatric-related metabolic and health-related disorders. Weight-related health disorders during the pediatric time period are more likely to result in a woman who during her childbearing years will have a complicated pregnancy. Physicians are important mediators of obesity prevention and treatment. A truly successful strategy will require a national comprehensive public health approach that can reach far beyond the limitations of a single health care provider.

Many federal agencies have taken on the obesity problem. Michelle Obama's Let's Move Campaign (**Let's Move!**) is the most prominent and has made significant strides. Many resources at

Let's Move are designed to help at the local level. The IOM Committee on Childhood Obesity remains active (**IOM - Childhood Obesity**). The CDC has many programs and wonderful interactive resources (**CDC-Childhood Obesity**). You can locate your local food deserts, areas of the United States that have limited access to healthy foods, through the USDA at **Food Desert**.

In this issue of the PULSE, Arnold Melnick, DO, writes about former members of the US military's report "Too Fat to Fight". "Too Fat to Fight" is an eye-opener. Read Dr. Melnick's article. The Book Reviews section features the *Hungry Gene*, a page-turning story behind the science of how and why we are where we are. It is a great read that will help you understand obesity more than any other single source. In the most recent issue of the ACOP's *eJournal*, the positive preventative strategy of breastfeeding on overweight/obesity is discussed. Visit <http://www.acopeds.org/ejournalarchive.iphtml> to read the latest *eJournal*.

Many of our own health systems have placed weight-related disorders as a priority. Highlighted in this issue are the activities being undertaken by Nemours, which several of our ACOP members are employed and work. The PULSE is interested in sharing what you are doing in your office, your student club or your state. Share your story with the PULSE at [acopublications@gmail.com](mailto:acopublications@gmail.com).

## Review: Too Fat to Fight

By Arnold Melnick, DO

Just imagine this: Ten years from now a 5-star general tells a television interviewer, "We have to eliminate two or three divisions of our armed forces because we cannot get enough able-bodied personnel."

It's easy to imagine after you read *Too Fat to Fight*, a 2010 report from Mission: Readiness-- Military Leaders for Kids. One of the basic facts put forth is the Department of Defense data that 75% of all Americans 17 to 24 years of age are unable to join the military because they failed to graduate high school, have criminal records, or are physically unfit. And the greatest cause of physical unfitness is obesity.

The Mission is made up of more than 100 retired top-notch military personnel, all with ranks of Brigadier General (or Admiral) or higher, all concerned about today's youth and tomorrow's military personnel. It is a plea for getting "junk food out of America's schools". And presents startling statistical proof of that need.

In effect, it warns Congress that "at least nine million 17-year-olds in the United States are too fat to serve in the military. That is 27 percent of all young adults"

They further point out that "obesity rates among children and young adults have increased so dramatically that they threaten not only the overall health of America but also the future strength of our military."

The report also cites the CDC statistic that "Over a ten-year period, the number of states with 40 percent or more of their young

adults who were overweight or obese went from 1 to 39."

This brilliant and impressive brochure should be required reading for every physician (especially pediatricians) and health worker!

The report is jam-packed with mind-boggling statistics, including obesity rates by states, weight loss of all young people needed to reach normal weight (by states) and cost by states for obesity medical expenditure (the total for the U.S. is an amazing \$75 billion (that's "b" not "m").

While it contains many good suggestions, I was impressed

by their recommendations about food in the schools:

- Get the junk food and high-calorie beverages out of our schools.

- Increase funding for the school lunch program.

- Support the development,

testing and deployment of proven public-health interventions.

Other suggestions and examples of effective programs are included.

This monograph blew my mind. While I was aware that "obesity is a problem" I was not as thoroughly understanding of its relationship to schools, to education, to the military and to the general well-being of America. I strongly recommend it to all of our ACOP membership.

*(Too Fat to Fight can be readily downloaded at Google: Too Fat to Fight/Mission: Readiness.)*

***Since 1995, the proportion of recruits who failed their physical exams because they were overweight has risen by nearly 70 percent.***

Gen. John M. Shalikashvili  
Former Chairman, Joint Chiefs of Staff

## Nemours Addresses Obesity

Childhood obesity is being addressed by a variety of public and private organizations. The following outlines how Nemours, one of the largest pediatric providers in the US, is approaching childhood obesity prevention.

**Clinical Care:** Nemours operates a hospital-based obesity clinic in Delaware, a dedicated “Healthy Choices Clinic” in Florida and weight management programs and services at all locations. Teams of dedicated childhood obesity experts work with families to develop personalized treatment plans that integrate the latest research and most advanced clinical care.

**Research:** The Nemours Center for Integrative Pediatric Obesity Care conducts research to identify promising interventions for the health and care of children at every stage.

**Education:** Nemours’ KidsHealth.org is the world’s most visited website for children’s health information. With nearly one million hits each day, KidsHealth offers parents, kids and teens a wide range of information, perspectives and advice on the physical, emotional and behavioral issues that affect children and teens, including obesity.

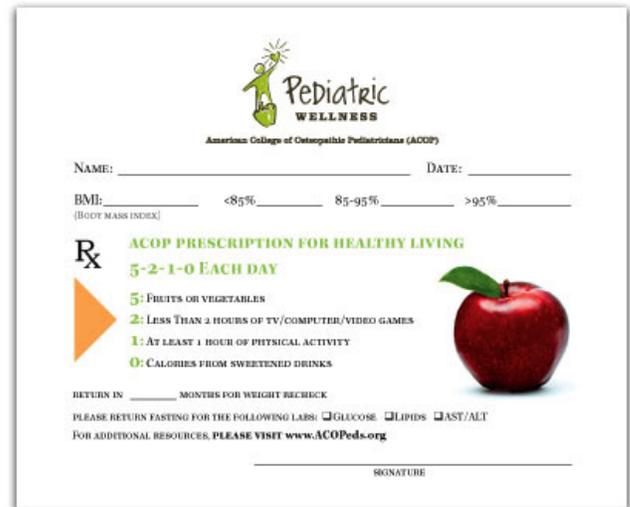
**Advocacy and Prevention:** Nemours Health and Prevention Services focuses on health promotion and obesity prevention in the places where children live, learn, and play. Nemours Florida Prevention Initiative, in Central Florida, partners with childcare centers to provide information and tools to teach healthy habits early. A centerpiece of these efforts is the promotion of the 5-2-1-Almost None healthy lifestyle message.

For more information regarding Nemours’ approach visit [nemours.org](http://nemours.org).

If you wish to share how your organization, clinic practice or pediatric student club is approaching childhood obesity, contact the PULSE at [acopublications@gmail.com](mailto:acopublications@gmail.com)

## Prescription Pads are Available to ACOP Members

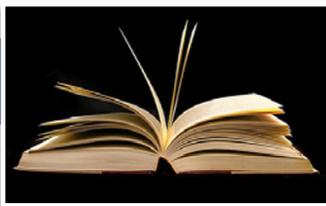
These prescription pads can be used to deliver clear, consistent messages to your patients during the well child exam. This simple tool can help you get your patients and families to start making changes. You can help educate, motivate and encourage all patients to live healthy lifestyles.



The image shows a prescription pad from the American College of Osteopathic Pediatricians (ACOP). At the top, it features the logo for "Pediatric WELLNESS" and the text "American College of Osteopathic Pediatricians (ACOP)". Below the logo, there are fields for "NAME:" and "DATE:". Underneath, there are BMI categories: "<85%", "85-95%", and ">95%", with "(BODY MASS INDEX)" written below. The main heading is "Rx ACOP PRESCRIPTION FOR HEALTHY LIVING" followed by "5-2-1-0 EACH DAY". To the right of this heading is an image of a red apple. Below the heading are four numbered items: "5: FRUITS OR VEGETABLES", "2: LESS THAN 2 HOURS OF TV/COMPUTER/VIDEO GAMES", "1: AT LEAST 1 HOUR OF PHYSICAL ACTIVITY", and "0: CALORIES FROM SWEETENED DRINKS". There is a section for "RETURN IN \_\_\_\_\_ MONTHS FOR WEIGHT RECHECK". At the bottom, it says "PLEASE RETURN FASTING FOR THE FOLLOWING LABS:  GLUCOSE  LIPIDS  AST/ALT" and "FOR ADDITIONAL RESOURCES, PLEASE VISIT [www.ACOPeds.org](http://www.ACOPeds.org)". There is also a "SIGNATURE" line.

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## BOOK REVIEW

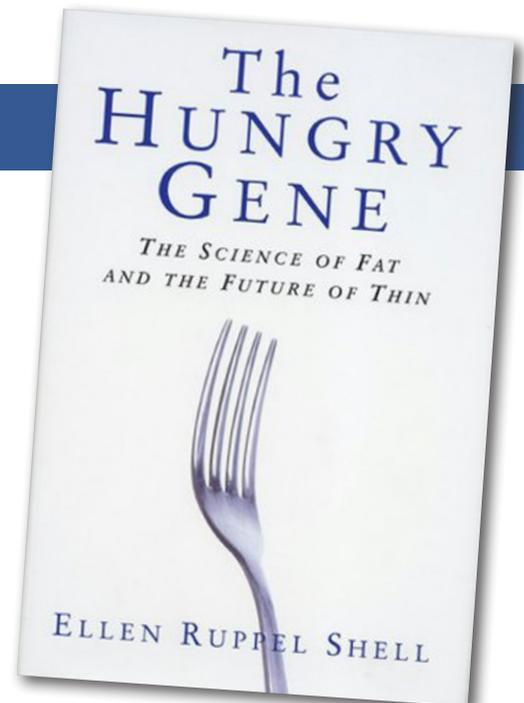
By Robert Locke, DO, MPH, FACOP

### The Hungry Gene

Author: Ellen Shell

**“Obesity represents the triumph of instinct over reason.”**

We are wired to eat. Our system is engineered to survive periods of food shortages. There are multiple interactive genes, peptides-hormones and complex redundant pathways driving our bodies to eat. Interruption of one pathway or engagement of a strategy to reduce intake has, as the literature suggests, a difficult task for sustained success. Counteracting this force to intake food, there is a paucity of pathways to stop – to achieve satiety. Tracing the obesity epidemic from the conditions of the ice age when food was scarce to the modern world advertising, food industry and processed food designed to tap into the evolutionary drive to eat, the acclaimed science journalist, Ellen Shell, takes us on a fascinating behind-the-scenes journey of cut-throat science, fascinating medicine, money, ego and how food trumps sex. The Hungry Gene is single stop shop to understand the complex medicine behind the obesity epidemic, politics, public health strategies, and will give you a greater sympathetic understanding of your patients. If you want to understand obesity and your obese patients, read the Hungry Gene. Though written a few years ago, for medical students and practicing pediatricians there is no greater meaningful and fascinating read on obesity.



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# THE EDITOR COMMENTS

*This feature is contributed by the ACOP PULSE Editor, Robert G. Locke, DO, MPH, FACOP, to bring attention to feature articles that have caught his eye. Any comments or suggestions are welcome and can be sent to [acopublications@gmail.com](mailto:acopublications@gmail.com).*

## Article: The Medical Benefits of Male Circumcision

by Aaron Tobian, MD, PhD and Ronald Gray, MD MSc  
in *JAMA* 2011;306(13):1479-80

*"If a vaccine were available that reduced HIV by 60%, genital herpes risk by 30% and HR-HPV risk by 35, the medical community would rally behind the immunization and it would be promoted as a game-changing public health intervention."*

– Tobian and Gray

**Commentary:** Male circumcision has both individual and society beneficial effect. Recent studies in Africa have demonstrated a reduction of 50-60% in acquisition of HIV with male circumcision. Reduction in other sexually transmitted disease states follows similar patterns. The benefits are not only for international communities, but also here in the US. Circumcision at birth has the greatest health benefit with the lowest risk of complications. Uncircumcised males who do not use condoms and have multiple sex partners carry an elevated risk for the acquisition of STI and transmission to their partners. As any practicing pediatrician knows, sexual relations are common among teenagers and condom use remains low. Heterosexual transmission of HIV remains problematic. STIs are common among men and women. There is also a health disparity issue. Medicaid is cutting back coverage of circumcision. This will decrease health outcomes in an already vulnerable population and increase overall societal health costs. Male circumcision remains a cost-effective, low-risk method of improving health outcomes.

## Article: Folic Acid Supplements in Pregnancy and Severe Language Delay in Children

by Christine Roth, MSc, ClinPsyD, et al in *JAMA* 2011;306(14):1566-1573

**Commentary:** Preconceptional use of folic acid has been associated with multiple health benefits. Folic acid is associated with neural tube defects as well as a variety of neuronal cell integrity factors including CNS cell repair, epigenetic expression, and neuronal cell proliferation. In this large prospective study of 38,954 children, maternal use of folic acid supplements from 4 weeks before to 8 weeks after conception was associated with an 81% reduction in severe language delay. This study adds to the growing epidemiologic literature of childhood cognitive and behavioral performance and periconceptual folic acid supplementation that complements the physiologic cell biology research. Long-term folic acid supplementation is associated with reduced risks for preterm delivery and miscarriage. Adherence to recommended folic acid supplementation guidelines by women of childbearing age remains suboptimal. Supplementation prior to pregnancy (planned or unplanned) remains a key component of this low-cost/high-benefit prevention strategy.

*Ed - These two articles were chosen because of their relevance to pediatrics and as a reminder that many adult medicine-oriented journals feature high-quality pediatric articles. An easy method to scan for pediatric articles is to sign up to receive a synopsis of the journal's articles by email (JAOA, among other journals do this). A growing number of journals (e.g. NEJM) will send you an email when they have a pediatric-based article. You can sign up for this service through the journal's website.*



## The Magens (Myron, Jed and Ned)

By Arnold Melnick, DO, FACOP

Not one, but two: two sons becoming DOs and following in his footsteps. The father: Myron S. Magen, DO, FACOP. The sons: Jed Magen, DO, and Ned Magen, DO, MS.

Myron, known as “Mike” to thousands of osteopathic physicians and educators, graduated from Des Moines College of Osteopathic Medicine in 1952 and trained in Pediatrics at that school. Following that, he went into private pediatric practice.

His activity in ACOP was notable. Besides serving as President in 1965, he became a Fellow in 1966. Among his activities, he was the first person ever to be invited twice to give the Watson Memorial Lecture – in 1970 and 1986.

Although very successful as a pediatrician, Mike soon found his real niche: osteopathic education. First, he became Dean of the then-new DO school in Pontiac, Michigan, and served from 1966 to 1970. Showing his usual insight, he soon brought the school under the wing of Michigan State University, the first time a DO school came under a publicly-funded major university. He remained as Dean until 1991.

He soon became the icon of osteopathic deans. Affable, helpful and always constructive, he was the go-to dean for everyone in osteopathic education, from other deans with problems to wannabe deans – and especially helpful to newly-appointed deans.

Mike’s leadership led to his election as President of the American Association of Osteopathic Colleges twice. He was the first DO elected to the prestigious Institute of Medicine, and to the Graduate Medical Education National Advisory Committee. In 2004, MSU awarded him an honorary Doctor of Science degree.

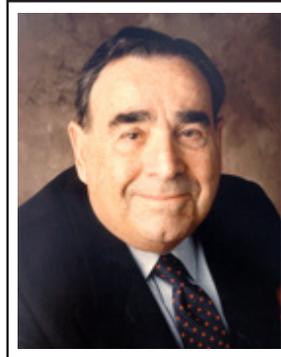
He developed friendships with many prominent people in



Ned Magen, DO, MS



Jed Magen, DO



Myron S. Magen, DO, FACOP

the medical arena, up to and including Surgeons-General, and he was the voice of osteopathic education in many national organizations. Mike died in 2008.

Jed commented, in discussing the influence of his father, “Our father was a clinical pediatrician who became a dean and an academic physician when there were almost none of these in the profession. We grew up with the establishment of MSUCOM and heard some very interesting conversations and saw a whole group of interesting people pass through our home. We could hardly not be influenced.”

Both sons graduated from their father’s alma mater: the Des Moines University College of Osteopathic Medicine, Jed (the elder son) in 1978 and Ned in 1981.

Jed remained at MSU and currently serves as Associate Professor and Chair of the Psychiatry Department there.

Among his many other achievements, Jed has been President of the American Osteopathic College of Neurology and Psychiatry, and Board Member of the American Association of Chairs of Departments of Psychiatry.

Ned, the younger son, who served in Alaska as a U.S. Public Health officer, now is a staff physician in the Emergency Department of Alaska’s Central Peninsula Hospital. He has served on the PALS national faculty.

Ned added, “Certainly my father was an inspiration for us to pursue medicine as a career and specifically osteopathic medicine.”

By any standard, Mike Magen gave his all for the osteopathic profession. Even his two sons, Jed and Ned, both now well-respected osteopathic physicians.

### 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](mailto:ACOPublications@gmail.com).

## MEMBERS IN PRINT

### *Optimizing Patient/Caregiver Satisfaction Through Quality of Communication in the Pediatric Emergency Department*

Robert Locke, DO, MPH – first author  
Pediatric Emergency Care. 27(11):1016-1021, November 2011.

Optimal patient/caregiver satisfaction scores were more dependent on the quality of the interpersonal interaction and communication of ED activities than wait time. Interpersonal communication and perceived quality of care being delivered remain essential components of patient/care-giver/customer satisfaction in the pediatric ED setting.

# iPerch



**Reflections by Past Presidents  
of the ACOP**

By **Steven Snyder, DO, FACOP**

*Past President, 2002-2004*

I was asked by Arnold Melnick, DO, and Robert Locke, DO, to be the editor of a new series for the Pulse. The focus of the series is to have past presidents reflect on the College from their viewpoint. In this techno-savvy world, I decided to call the series *iPerch*. Over the next several years, past ACOP presidents will reflect on their major stresses, struggles, opportunities, triumphs and failures.



*Steven Snyder, DO, FACOP*

Many of the past presidents were outstanding clinicians and teachers who reached a plateau that most members of the College never see. They were, and still are, dedicated busy pediatricians who accepted a challenge to make the college better. We all struggled to tie the past with the future. We all put in more time and energy than we were told it would take. Each of us had a vision, albeit different, that we tried to steer the College toward. The waters were not always calm and our egos sometimes got in the way.

Despite all the trials and tribulations, the College is strong and doing better than ever. Our College has traveled to the brink of extinction several times but was rescued by the Presidents and their hard working Boards. I have been involved with our Board and other Boards of Trustees for numerous organizations over the years. I am always cognizant of the fact that we are all volunteers putting in extra time and energy that wasn't available to our practices or our families.

The Past Presidents will be asked to comment on the State of the College, osteopathic medicine and our relationship with the AOA, AAP and other specialty Colleges. I want them to tell what they wanted to do, what they did, what they wished they could do, what frustrated them and how they would like to be remembered. The final question for them is how they think they can help the College now if they were asked; that then becomes the challenge for our current Board.

This column is dedicated to our past leaders who gave so much of themselves to ensure that Osteopathic Pediatricians have a voice in our profession and the communities we serve.



We would like to thank our

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FOR MEMBER INFORMATION!

## Research Committee Update

By Erik Langenau, DO, FAAP, FACOP  
Chair, ACOP Research Committee

During the 2011 AOA/ACOP Fall Annual Meeting in Orlando, Florida, 14 research abstracts were presented as posters by students, residents, faculty and program directors. With two pediatrics club posters, 10 case reports, and two original research projects, the volume and quality of research continues to increase every year.

### Research Abstracts and Awards

Students, residents and faculty should be congratulated for their efforts on putting together such great projects, and their faculty advisors deserve special recognition as they mentor, cultivate and motivate young researchers.



Ron Marino, DO, MPH, accepts the “Best Poster” award from Eric Langenau, DO, FAAP, FACOP, on behalf of the investigators from Winthrop-University Hospital.

With many quality projects and submissions, the selection committee struggled with selecting one clear winner. Because of this project’s topic, clarity, organization, and design, the following project was awarded first place for the competition:

### What can I do to ensure that residents give out books for Reach Out and Read?

Authors: William Bryson-Brockmann, PhD; Christina Eng, BS; Robert Lee, DO  
Affiliation: Winthrop-University Hospital, Mineola, New York

The objective of the study was to evaluate the frequency of books distributed during health supervision visits by pediatric residents, identify strategies for improving distribution rates, and evaluate outcomes after adopting the new strategies. After obtaining baseline distribution rates, five interventions

were evaluated: placing books in a visible location, attaching reminder stickers on well-child patient encounter forms, placing posters in patient areas and precepting rooms, receiving announcements and reminders from the Reach Out And Read Coordinator, and receiving announcements and reminders from faculty at grand rounds. Over an 8 month period of implementation, the most successful intervention was found to be placing books in a more easily viewed area. Results suggest that visibility is the most important factor when considering how to improve book distribution rates during health supervision visits.

The project was selected for “best poster” because of its simplicity, relevance to pediatric care, and generalizability to all pediatricians who see children for routine health maintenance. Reach Out and Read is great tool for promoting literacy and reading enjoyment among patients and families.<sup>1</sup> The program is not only used within residency training programs, but also pediatric and family medicine practices throughout the United States. Because the program is widely known to those health-care providers who care for children, conclusions drawn from this study are particularly valuable and relevant. Unfortunately, the investigators were unable to participate in the awards ceremony, but Ron Marino, DO, MPH (Associate Chairman of Pediatrics at Winthrop University Hospital) graciously accepted the award for “Best Poster” at this year’s ACOP Fall Meeting Awards Ceremony on behalf of Student Doctor Eng and Doctors Bryson-Brockman and Lee.

### Reference:

1. Klass P, Dreyer BP, Mendelsohn AL. Reach out and read: literacy promotion in pediatric primary care. *Adv Pediatr.* 2009; 56:11-27.

### ACOP Poster Presentation at the Upcoming AOA Meetings

Research abstracts and presentations occur with most ACOP meetings. Abstract submission information and instructions can be found at <http://www.acoped.org> or by emailing Kim Battle at [kim@ACOPeds.org](mailto:kim@ACOPeds.org).

### ACOP Research Grants for Young Researchers

For residents and fellows looking for clinical research funding, the ACOP is here to help. The ACOP is pledging three grants at the value of \$500 each for projects related to clinical pediatrics. Special attention will be placed on projects involving nutrition, obesity, identification and prevention of high risk behaviors in pediatrics, suicide, alcohol abuse, cutting, STIs and teen pregnancy. Grant applications will require a statement of purpose, a research plan, and a proposed time

*Continued on page 10*

# CATCHING UP WITH...

...Cyril Blavo, DO, MPH and TM, FACOP



Service was always the watchword of Cyril Blavo, DO, MPH and TM, FACOP. Whatever he did

or accomplished, he always considered “service” as part of his work ethic.

When he entered osteopathic medicine, his goal was to complete his medical training and give something back to his home country of Ghana. Ghana produced his father, a one-time Diplomat for the UNHCR (UN High Commissioner for Refugees) that won a Nobel Prize in 1981, and his mother, an outstanding leader in nursing education in Ghana.

Throughout his medical career his aim was there – when he attended and received his DO degree from the Texas College of Osteopathic Medicine (1984), when he took time out to earn a Public Health degree at Tulane University and when he served a Pediatric Residency in Oklahoma. He moved to Florida where his accomplishments continued at Nova Southeastern University Health Professions Division and its predecessor, including among other things, serving as Chairman and Professor of Pediatrics, Acting Dean of the College of Osteopathic Medicine, and now Professor and Director of the Master of Public Health Program in the NSUCOM. In addition to activity on several ACOP committees, he

served as a member of the ACOP Board of Trustees.

Carrying a full load of academic and clinical responsibilities, he still manages to take part in community functions that support children’s needs and to produce and direct African performing and cultural arts in South Florida – and even finds time to play a little soccer, another love of his.

His most recent service project and a fulfillment of his “promise” was the establishment of International Health Initiatives. This incorporated and tax-exempt organization was founded to provide service to underserved communities around the globe. Dr. Blavo was the spark plug in forming this group and he has enlisted several other osteopathic physicians, as well as a number of lay people from the community.

The official objectives of the IHI are to promote health and wellness, disease prevention and meet the needs of medically underserved areas internationally.

IHI has already raised funds and built a seven room clinic in Tafi Atone, a poor rural town in Ghana, created a tetanus vaccination program for poor women in Ghana to reduce the high rate of death from the disease in native child-bearers, and organized an initiative to control the spread of cholera in a town in Haiti.

An outstanding pediatrician, splendid teacher and clinician, Dr. Blavo now has expanded his scope of service – to the underserved around the world.

The ACOP salutes and congratulates Dr. Blavo!

*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.

## Committee Spotlight

Continued from page 9

line of completion. Upon completion of the projects, findings will be presented at ACOP’s Semi-Annual Conference. Recognition of this accomplishment will also occur in the *eJournal* and PULSE. The grant application can be found at [www.acoped.org](http://www.acoped.org) or by emailing Kim Battle at [kim@ACOPeds.org](mailto:kim@ACOPeds.org).

## How the ACOP Can Help Researchers?

Members of the ACOP Research Committee are eager to help. We look forward to promoting collaborative projects and osteopathic pediatric research. Please feel free to contact Erik Langenau, DO, FAAP, FACOP (Chair, ACOP Research Committee) at 610-825-6551 for:

- Advice or research support
- Opportunities for collaboration (such as multi-center projects)
- Volunteer opportunities to participate on the ACOP Research Committee

Best of luck with your research projects and please let us know how the ACOP can assist you.

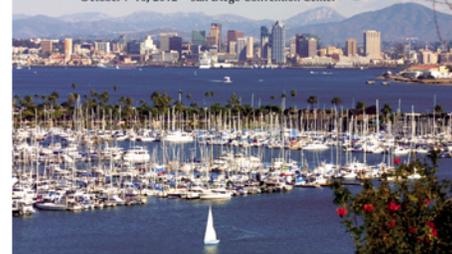
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## ATTENTION! ALL RESIDENTS & STUDENTS!

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

Visit [www.ACOPeds.org](http://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.

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

## Meckel's Diverticulum

An occasional Sacculation or appendage of the ileum, derived from an unobliterated yolk sac.

### Johann Friedrich Meckel (1781-1833)

Meckel was born in Halle, Prussia to a family of well-known anatomists and physicians. Meckel originally resisted attempts by his family to influence his career choice, whose goal was that he too would become an anatomist and physician. His father, who was professor of anatomy and surgical obstetrics at the University of Halle, invited him to help perform dissections in his youth in an attempt to influence his career choice. His grandfather had previously held the same prestigious chair position at the University. Meckel's younger brother was a professor of anatomy and forensic medicine at the University of Bonn.

Ultimately, Meckel began his studies at the University of Halle and then transferred in 1801 to the University of Göttingen. When he was 21, Meckel received his medical doctorate in 1802 at Halle, and wrote a doctorate thesis on cardiac malformations. Afterwards, he continued his medical education in Würzburg, before returning to Halle to be appointed to an academic position. Napoleon's occupation of his home town resulted in the university being dissolved. Napoleon actually occupied Meckel's home as a headquarters. Meckel's grandfather and father had collected a large and varied anatomical collection which they had preserved in the home.

In 1808, he was appointed as a full professor of normal and pathological anatomy, surgery and obstetrics at Halle, and ultimately became dean of the school.

In 1815 Meckel became the editor of *Archiv für Anatomie und Physiologie* where in the very first volume of his writing stressed the need that actual science and experimental observations would be the only items he would accept for publication. His final writings were focused on congenital malformations of cardio-pulmonary and vascular etiologies.

Meckel's was the first comprehensive writings describing birth defects as scientific embryologic developments, which in prior descriptions, had been looked upon less seriously. Among his most lasting and impressive contributions was the study of the abnormalities occurring during the embryological development. The diverticulum for which he is most notably remembered, is a vestigial remnant of the omphalomesenteric duct and is the most frequent malformation of the gastrointestinal tract.

As a young physician, he was outgoing and socially interactive with his peers. As he aged, he became more of workaholic setting very long working hours for himself. He did not participate in the customary social activities that other physicians and teachers enjoyed. He felt surrounded instead by mediocrity. His colleagues and friends respected him as an accomplished academician, but described him as intolerant and impulsive. He retired at the age of 50 years and spent the last two years of his life as a recluse. He died at age 52.

-John Graneto, DO, FACOP

## MEMBERS ...in the News!

### Melnick Receives IHI Lifetime Award

Past President Arnold Melnick, DO, FACOP, was recently honored with the Lifetime Achievement Award of the International Health Initiatives, Inc. (IHI) – his eighteenth such award.

Presented by Cyril Blavo, DO, FACOP, president of the group, it recognized Dr. Melnick's activities in pediatrics, public health and medical education.

The IHI was founded by Dr. Blavo to provide service to underserved communities in the United States and abroad. They currently have several service projects in operation.

### Avila Honored By Hospital

David Avila, DO, FACOP, was recently honored by Holy Family Hospital in Methuen, MA, with its St. Luke's Award.

This is the first time the award has been given to a living physician and the first DO ever. The hospital honors staff members who, during their lifetime, have shown a special commitment to the highest ideals of the healing profession, to the value and dignity of life and service to the community.

A major institution in New England, Holy Family is a 261-bed institution, serving Merrimack Valley and southern New Hampshire.

Dr. Avila is a 1976 graduate of Des Moines University College of Osteopathic Medicine and took his pediatrics residency at Martin Place Hospital in Michigan.



## 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](mailto:ACOPublications@gmail.com).



## An Interview with Dr. Gary N. McAbee

By Robert Locke, DO MPH

*Gary N. McAbee, DO, JD, FACOP, FCLM is a pediatric neurologist and a lawyer. He is a Professor of Pediatrics at UMDNJ Robert Wood Johnson School of Medicine, was the past Chair of the AAP Section on Medical Liability and Risk Management, book editor and research author and medical champion of the initiative behind a medical-legal partnership supporting children with autism.*

### What attracted you to neurology?

Several months after I started osteopathic medical school my mother went into a coma and sustained a relapsing and remitting severe neurological syndrome that resulted in her death six months before graduation. My interest in the neurosciences burgeoned from there. I thought working with children with neurological disorders would be more rewarding than with adult and geriatric patients and found my way in child neurology.

### What motivated you to become a lawyer?

Many of my friends are lawyers and I had always been interested in the law especially criminal law and so I decided to try law school. Once enrolled, I knew it was for me. I concentrated on those things in law school that had a medicolegal or policy component.

### How has having a law degree changed the way you practice?

Knowing the legal process makes you a little paranoid, but it does make you more careful, especially relating to documentation and how you speak to parents and patients – with humility and no guarantees. I used the legal training to write about many medicolegal issues, especially relating to the process such as the expert witness issue.

My colleague, Dave Annunziato, MD, from NY was on the Board of Directors of the American Academy of Pediatrics and he encouraged me to become an advocate. He nominated me to the AAP Committee of Medical Liability & Risk Management

on, which I served as a member from 2000-2004 and as Chair from 2004-2008. Because of the latter I was asked to co-edit the AAP 7th edition of *Medicolegal Issues in Pediatrics* published in 2011. Being chair of the committee was incredibly time consuming, as you are the point person nationally for pediatric medicolegal issues, but it was very rewarding.

### Are there similarities in how lawyers and physicians think?

Lawyers and physicians think very differently – lawyers should be very analytical, but the actual practice of law requires them to think very practical. Physicians have to be more analytical about diseases, especially in neurology where they can be rather complex.

### Medical-Legal Partnerships hold great promise to mitigating the social determinants adverse affects on health care. Why do you think that this has not become a routine part of health care?

Medicolegal partnerships are 21st century medicine. They not only provide a valuable and needed adjunct to patient care, but they have also been recuperating lost revenue to the organizations where they operate. We are starting one at my current institution, which will also envelope an Autism Law Center – believed to be the nation's first to address the medical and legal issues relating to the autistic population from childhood to adulthood.

### What four pieces of advice would you give to an audience of physicians and lawyers in the same room to improve the process of medical malpractice?

I do not know any advice to attorneys to improve the malpractice issue. It is my belief that the process' adversarial nature with a contingency component of remuneration does not make it particularly susceptible to changes. For physicians, they should simply be sincere in the way they practice, be competent as a minimum and above all document, document and document.

### Do other physicians treat you different once they know you have a law degree?

Physicians often approach me about legal issues. I am a member of the NJ and NY bar, but I am careful to tell them that I cannot give a legal opinion, but can help them think through the issue and how they should approach it.

### If a PULSE's medical student reader were interested in obtaining a JD after receiving her DO, what would you advise her?

If not cost prohibitive, I would never discourage a physician from attaining a law degree. But don't do it thinking it is a ticket to riches – it is not. But it can be a very valuable aspect of a medical career – either in academics or from an administrative standpoint.

## 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](mailto:ACOPublications@gmail.com).

# Welcome to our New Members!

## Fellow in Training

Julie K. Sterbank, DO ..... Westlake, OH  
 Kathryn A. Ziegler, DO ..... Ambler, PA

## Resident

Cerissa Key, DO ..... Sapulpa, OK  
 Nicole Willis, DO ..... Collinsville, OK

## Pediatric Student Club

Frances Adkins ..... Painesville, OH  
 Jessica Aguilar ..... City, OH  
 Hira Ahmed ..... East Elmhurst, NY  
 Trent Ainsworth ..... Biddeford Pool, ME  
 Amanda Albanese ..... Biddeford, ME  
 Elizabeth Albright ..... Lansing, MI  
 Shannon Alexa ..... Biddeford Pool, ME  
 Emily Allex ..... Biddeford, ME  
 Ali Farahnaz Amina ..... Okemos, MI  
 Chelsea Anderson ..... Athens, OH  
 Caitlin Antonio ..... Erie, PA  
 Theresa Apoznanski ..... Glen Cove, NY  
 Jeremy Baker ..... Athens, OH  
 Nicole Barbera ..... Claremont, CA  
 Theresa Baumstark ..... Kansas City, MO  
 Katie Beauregard ..... Davison, MI  
 Craig Becker ..... Kansas City, MO  
 Jodi Bender ..... Northville, MI  
 Heather Berman ..... Roslyn Heights, NY  
 Jacob Bernstein ..... Kansas City, MO  
 Kerry Bertke ..... Bellbrook, OH  
 Rebecca Bilyeu ..... Kansas City, MO  
 Whitney Blevins ..... Grand Blanc, MI  
 Brittany Bolduc ..... Lyman, ME  
 Ashley Bonheur ..... Island Park, NY  
 Alison Bracken ..... Lansing, MI  
 Monica Brahmhatt ..... Kansas City, MO  
 Rachael Brashears ..... Kansas City, MO  
 Kristin Brown ..... Biddeford, ME  
 Anastasia Buerger ..... Diamond Bar, CA  
 Jonathon Burton ..... Kansas City, MO  
 Vincent Caicco ..... Erie, PA  
 Heather Carrell ..... Liberty, MO  
 Keri Childers ..... Athens, OH  
 Tiffany Chritz ..... Okemos, MI  
 Laura Clark ..... Richmond, VA  
 Abigail Cocco ..... Erie, PA  
 Maura Conway ..... Biddeford, ME  
 Andrew Cox ..... Kansas City, MO  
 Julie Creighton ..... Erie, PA  
 Katrina D'Amore ..... Farmingdale, NY  
 Kristen Davis ..... Athens, OH  
 Zachary DeCant ..... Saco, ME  
 Michelle DiBlasi ..... Biddeford, ME  
 Kathleen DiMaiuta ..... Glen Cove, NY  
 Rebecca Domalski ..... Victor, NY  
 Kimberly Downes ..... Erie, PA  
 Jeffrey Dutremble ..... Biddeford, ME  
 Christina Edgerly ..... Biddeford, ME  
 Jennifer Enos ..... Kansas City, MO  
 Hilda Enriquez ..... Erie, PA

Emily Fauth ..... Kansas City, MO  
 SimonFraser ..... Upper Arlington, OH  
 Catherine Fusco ..... Philadelphia, PA  
 Martin Gagne ..... Westbury, NY  
 Richard Gandee ..... Athens, OH  
 Leanna Garbus ..... Biddeford, ME  
 Ashley Gerdeman ..... City, OH  
 Michelle Geyer ..... Kansas City, MO  
 Ipsita Ghose ..... Woodbury, NY  
 Elizabeth Giles ..... Canton, MI  
 Lisa Grady ..... Saco, ME  
 Tara Gramigna ..... Philadelphia, PA  
 Emily Gray ..... Philadelphia, PA  
 Chelsea Gray ..... Macomb, MI  
 Aimee Guy ..... Biddeford, ME  
 Kristina Gwinn ..... Okemos, MI  
 Kathleen Hagelin ..... Erie, PA  
 Matthew Hagge ..... Kansas City, MO  
 Michael Halko ..... Carrollton, OH  
 Catelyn Halusic ..... San Diego, CA  
 Miles Hang ..... Glen Cove, NY  
 Joshua Harbaugh ..... Kansas City, MO  
 Emily Harvey-Garcia ..... Hartford, ME  
 Alanna Heinen ..... Olathe, KS  
 Rachel Herdes ..... Kansas City, MO  
 Alicia Hill ..... Kansas City, MO  
 Napur Hiranandaney ..... Dix Hills, NY  
 Nigel ..... Hogan Athens, OH  
 Kristen Holler ..... Athens, OH  
 Christine Honer ..... Jackson, MI  
 Bridget Howard ..... Warren, MI  
 Sarah Hunt ..... Albany, OH  
 Paul Jakinovich ..... Floral Park, NY  
 Olivia Janssen ..... Sea Cliff, NY  
 Andrew Jersey ..... Floral Park, NY  
 Deanna Jewell ..... Okemos, MI  
 Shiel Jhaven ..... Philadelphia, PA  
 Tina K. Jumani ..... Biddeford, ME  
 Emily Justin ..... Kansas City, MO  
 Shuchi Kapoor ..... Champaign, IL  
 Elizabeth Karr ..... Biddeford Pool, ME  
 Gurpreet Kaur ..... Mahwah, NJ  
 Sara Keller ..... Athens, OH  
 Sally Khalifa ..... Lansing, MI  
 Tim King ..... North Kansas City, MO  
 Michael Kirk ..... Sea Cliff, NY  
 Emilia Kleinman ..... Philadelphia, PA  
 Jessica Kneib ..... Lee's Summit, MO  
 Kassie Kostecki ..... Kansas City, MO  
 Robert Kreikemeie ..... Kansas City, KS  
 Brittany Kuperavage ..... Philadelphia, PA  
 Kirsten LaFrance ..... Fraser, MI  
 Krystall Lee ..... Westbury, NY  
 Benjamin Lee ..... Erie, PA  
 Andrew LePorte ..... Athens, OH  
 Lorenzo Lim ..... East Lansing, MI  
 Colleen Little ..... Erie, PA  
 Taryn Liu ..... Chino Hills, CA  
 Mitchell Lopacki ..... Kennebunkport, ME  
 Richard Loynd ..... Erie, PA

# Welcome New Members!

Joshua Lupton.....	Biddeford, ME	Jonathan Sasenick.....	Erie, PA
Jennifer Lutz.....	Seaford, NY	Kasey Schaefer.....	Cleveland, OH
Lisa Luu.....	Monterey Park, CA	Barbara Schechter.....	Philadelphia, PA
Heba Tamer Mahmoud.....	Stevensville, MI	William Seydel.....	Royal Oak, MI
Danielle Maholtz.....	Philadelphia, PA	Shayna Shackford.....	Biddeford, ME
John Malta.....	Erie, PA	Anjali Shah.....	Westbury, NY
Keith Martin.....	Philadelphia, PA	Samer Shaja.....	West Bloomfield, MI
Amy Martin.....	Philadelphia, PA	Cory Shield.....	City, State
Erin Mason.....	Kansas City, MO	Alex Shin.....	Erie, PA
Kiera McKendrick.....	Narberth, PA	Sandra Shoukair.....	Northville, MI
Brianna McMahon.....	Philadelphia, PA	Ashley Shurts.....	Kansas City, MO
Kristin McMillan.....	Glen Cove, NY	Alyssa SICKEL.....	Kansas City, MO
Laura Meiler.....	Athens, OH	Andrew Smith.....	Athens, OH
Heather Merrit.....	Gladstone, MO	Sarah Spencer.....	Okemos, MI
Kristen Miller.....	Athens, OH	Ashley Steinginga.....	Erie, PA
Jessica Mitterholzer.....	Athens, OH	Kaitlin Strumph.....	Glen Cove, NY
Scott Moore.....	Grosse Pointe Woods, MI	Leah Sutton.....	Kansas City, MO
Alana Mouery.....	Montclair, CA	Anna Sverkunova.....	Staten Island, NY
Scott Mueller.....	Kansas City, MO	Courtney Swickard.....	Athens, OH
Eric Mull.....	Rochester, NY	Melissa.....	TacheEast Lansing, MI
Pedro Munoz.....	Pawling, NY	James Tasch.....	Kansas City, MO
Christopher Nofar.....	Troy, MI	Diana Tec.....	Athens, OH
Bret Nolan.....	Athens, OH	Morgan Thierer.....	Kansas City, MO
Lauren Orellana.....	Athens, OH	Lisa Thomas.....	New Hyde Park, NY
Marla Osborne.....	Philadelphia, PA	Chelsea Tibbetts.....	Kansas City, MO
Mandee Osterloh.....	Kansas City, MO	Amanda Timmel.....	Athens, OH
Tyler Padgett.....	Kansas City, MO	Kaitlin Tobash.....	Philadelphia, PA
Josh Palka.....	East Lansing, MI	Vanessa Uhr.....	Huntington Station, NY
Shrina Patel.....	Glen Cove, NY	Jennifer Valentice.....	Athens, OH
Asha Patel.....	Pomona, CA	Lauren Waible.....	Erie, PA
Regina Pestak.....	Athens, OH	Julianne Warren.....	Erie, PA
Michael Pham.....	Erie, PA	Caleb Wasser.....	Glen Cove, NY
Adam Ploegman.....	Kansas City, MO	Megan Wasz.....	Erie, PA
Elizabeth Polsinelli.....	Philadelphia, PA	Julia Weld.....	Erie, PA
Lyda Pung.....	Merriam, KS	Breanna Wheeler.....	Kansas City, MO
Angelica Radzioch.....	Macomb, MI	Tad White.....	Erie, PA
Gabriel Randall.....	Kansas City, MO	Adam Wiercinski.....	Athens, OH
Nicole Rennie.....	Royal Oak, MI	Jill Wildhaber.....	Kansas City, MO
Hannah Reynard.....	Erie, PA	Kailey Wilson.....	Lee's Summit, MO
Monica Rezk.....	New Castle, PA	Michelle Winston.....	Kansas City, MO
Adam Rhodes.....	Glen Cove, NY	Katelyn Wiseman.....	Haslett, MI
Sarah Richard.....	Harrison Townshi, MI	Darcy Wolcott.....	Biddeford, ME
Abigail Richeson.....	Lansing, MI	Aleksandr Yakubov.....	Brooklyn, NY
Meredith Riddle.....	Glendale, AZ	Casey Yarling.....	Marshall, MI
Kaitlin Riemann.....	Athens, OH	Lauren Young.....	Erie, PA
Matt Roesch.....	The Plains, OH	Rachel Young.....	Okemos, MI
Zachary Rosenberg.....	Erie, PA	Danielle Zageris.....	Philadelphia, PA
Quintavius Rover.....	Athens, OH	Nadia Zaman.....	Woodbury, NY
Corinne Salva.....	Athens, OH	Megan Zimmerly.....	Erie, PA

## For Membership Questions or to Join ACOP

Contact Greg Leasure  
[greg@ACOPeds.org](mailto:greg@ACOPeds.org) - (804) 565-6305



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## AMERICAN COLLEGE OF OSTEOPATHIC PEDIATRICIANS

# 2012 Spring Conference

## GENERAL INFORMATION

### WELCOME



It is with great excitement that the ACOP welcomes you to Memphis!!! The theme for this weekend is "Technology and Prevention in Pediatrics." The city of Memphis is ready to wow you with evening entertainment, and the program is ready to wow you with excellent content.

During this event, you will have an opportunity to learn how electronic medical records affect pediatric care:

- Immunization registries as a small example of the power of health information exchanges
- New uses of hand-held ultrasound in acute abdominal care
- Computer software involved with post-concussion care
- Radiologic advances in diagnostic pediatric care
- Many other topics

We hope you will enjoy the conference. Make and renew friendships, and be energized to continue the great care of pediatric patients that you are famous for doing!

Michael G. Hunt, DO, FACOP, FAAP  
*Program Chair*

Richard Magje, DO, FACOP  
*Program Co-Chair*

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

Ed Spitzmiller, DO, FACOP  
*Co-Chair, 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.

An 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

This program anticipates being approved for up to 20 AOA Category A-1 CME credit pending approval by the AOA Division of Continuing Medical Education Office.

Please contact ACOP at (804) 565-6333 or email [kim@ACOPeds.org](mailto:kim@ACOPeds.org) with questions regarding this conference. Registration can be made via fax at 804-282-0090 or by mail, using the form provided, to ACOP, 2209 Dickens Road, Richmond, VA 23230-2005. Registration will NOT be taken over the phone.

### 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 [bob@ACOPeds.org](mailto:bob@ACOPeds.org).

### Accommodations

#### About the Hotel

In the heart of "Blues City," you'll find The Peabody Memphis, a magnificent Forbes Four-Star, AAA Four-Diamond historic hotel. Our convenient downtown location is just blocks from Memphis attractions like Beale Street, the Memphis Rock N Soul Museum, Gibson Guitar Factory, Fed-Ex Forum, National Civil Rights Museum, Sun Studio, Orpheum Theatre, and the Memphis Cook Convention Center. The Peabody itself is also one of Memphis' most popular attractions. The Peabody Ducks march to and from the Grand Lobby daily at 11 a.m. and 5 p.m. in a time-honored tradition dating back to 1933. Legendary, charming, elegant and grand are adjectives that perfectly describe this luxury Memphis hotel. Whether visiting for business or leisure, our Southern hospitality is sure to exceed your expectations.

#### Accommodations

The American College of Osteopathic Pediatricians has arranged for special group rates during this conference. The rate per night for a single or double is \$175.00 plus 15.95% tax. There is also a hotel service fee of \$11.95 per room, per night, that includes wireless Internet access in your guestroom, unlimited local and toll-free calls, complimentary use of the health club, morning newspaper, overnight shoe shine and coffee and tea service in the Deli each morning (limited time frame). No charge for children under 18 sharing a room with an adult. For non-student members, please visit [www.acoped.org](http://www.acoped.org) and click on Hotel Reservations to make your hotel reservations. The hotel is located at 149 Union Avenue, Memphis, TN, 38103. If you prefer to make your reservations by telephone, please call The Peabody at 901-528-4000 or 800-PEABODY. You will need to give the group code ACOP and/or American College of Osteopathic Pediatricians 2012.

#### For Students Only

A limited student discounted rate (\$169.00 plus 15.95% Tax) may be obtained by contacting Kim Battle via telephone at 804-565-6333. You will need to provide your credit card information at that time. All student reservations will be made by the ACOP administrative office and confirmation numbers will be sent to you.

# AMERICAN COLLEGE OF OSTEOPATHIC PEDIATRICIANS



## 2012 Spring Conference

**March 23-25, 2012 • The Memphis Peabody • Memphis, TN**

Program Chair: Michael G. Hunt, DO, FACOP, FAAP  
Program Co-Chair: Richard Magie, DO, FACOP

### Faculty

#### Thursday, March 22, 2012

5:00 pm – 9:00 pm Board of Trustees Meeting/Dinner

#### Friday, March 23, 2012

6:30 am – 4:30 pm	<b>Registration</b>
6:30 am – 7:30 am	<b>Breakfast with Exhibitors</b>
7:00 am – 8:00 am	<b>DRG/Coding Assurance Using Clinical Language Understanding Solutions While Meeting ICD10 Challenges</b> James R. Flanagan, MD, PhD
8:00 am – 10:00 am	<b>Implementation of an EMR in a Pediatric Practice: What a Pediatrician Should Consider</b> Scott Cyrus, DO, FACOP; Michael Hunt, DO; Richard Magie, DO
10:00 am – 10:30 am	<b>Break with Exhibitors and Posters</b>
10:30 am – 11:30 am	<b>Maintenance of Certification</b> Fernando Gonzalez, DO, FACOP
11:30 am – 12:30 pm	<b>Legal Considerations for Transitioning into Adulthood</b> Cory Ellen Nourie, MSS, MLSP
12:30 pm – 1:30 pm	<b>Lunch</b>
12:30 pm – 1:30 pm	<b>Marshall's Corner – Resident and Student Session</b> James Marshall, DO, FACOP
1:30 pm – 2:30 pm	<b>Effective Healthcare Transition of Young Adults: Assessing Readiness, Promoting Autonomy, and Generating the "Portable Medical Record"</b> Jennifer M. LeComte, DO, FACOP
2:30 pm – 3:30 pm	<b>Image Gently</b> Mark S. Finkelstein, DO

**Michael Collins, PhD**  
Director  
University of Pittsburgh  
Medical Center (UPMC)  
Sports Concussion Program  
Pittsburgh, PA

**Scott Cyrus, DO, FACOP**  
Children & Adolescent  
Medical Service  
Tulsa, OK

**Mark S. Finkelstein, DO**  
Division of Pediatric Radiology,  
Department of Medical Imaging  
A.I. DuPont Hospital for Children  
Wilmington, DE

**James R. Flanagan, MD, PhD**  
Chief Medical Information Officer  
Nuance Communications

**Fernando Gonzalez, DO, FACOP**  
Chairman, American Osteopathic  
Board of Pediatrics  
Shannon Clinic  
San Angelo, TX

**Stanley E. Grogg, DO, FACOP**  
Oklahoma State University Center  
for Health Sciences  
Tulsa, OK

**Russ Horowitz, MD**  
Children's Memorial Hospital  
Chicago, IL

**Michael G. Hunt, DO, FACOP,  
FAAP**  
Chief Medical Information Officer  
- Ambulatory  
Sisters of Mercy Hospital System  
St. Louis, MO

- Continued -

- Continued -

3:30 pm – 4:30 pm	<b>Radiology of Pediatric Trauma</b> Mark Finkelstein, DO
4:30 pm – 5:30 pm	<b>Resident Meeting</b>
4:30 pm - 6:30 pm	<b>Student Meeting</b>
4:30 pm - 7:00 pm	<b>Committee Meetings</b>
6:30 pm – 8:00 pm	<b>Student Dinner</b>

## Saturday, March 24, 2012

6:00 am – 7:30 am	<b>Wellness Committee Second Annual Boot Camp</b>
6:30 am – 4:00 pm	<b>Registration</b>
7:00 am – 7:30 pm	<b>Breakfast with Exhibitors</b>
7:30 am – 9:30 am	<b>Bedside Baby Belly Ultrasound: Evaluating Pediatric Abdominal Pain with Point of Care Ultrasound</b> Russ Horowitz, MD
9:30 am – 10:00 am	<b>Break with Exhibitors and Poster</b>
10:00 am – 11:00 am	<b>Pediatric/Adolescent Immunization (Topic TBA)</b> TBD
11:00 am – 12:30 pm	<b>Practical Approach to Evaluation and Treatment of Concussion</b> Michael Collins, PhD
12:30 pm – 1:30 pm	<b>Members Lunch and Business Meeting</b>
1:30 pm – 2:30 pm	<b>2012 James M. Watson Memorial Lecture</b> Martin S. Levine, DO, AOA President
2:30 pm – 3:30 pm	<b>Teen Tobacco Use-Prevention and Treatment</b> Cynthia Jane Mears, DO, FAAP
3:30 pm – 4:30 pm	<b>Sexually Transmitted Infection Update/High Risk Sexual Behaviors</b> Cynthia Jane Mears, DO, FAAP
4:30 pm – 5:30 pm	<b>Awards Reception</b>
5:30 pm – 7:00 pm	<b>Committee Meetings</b>

## Sunday, March 25, 2012

7:00 am – 11:00 am	<b>Registration</b>
6:30 am – 7:30 am	<b>Continental Breakfast</b>
7:00 am – 8:00 am	<b>DOs of Immunizations</b> Stanley E. Grogg, DO, FACOP
8:00 am – 9:00 am	<b>Current State of Tennessee's Immunization Registry</b> Brian K. Moore
9:00 am – 10:00 am	<b>Dermatologic Interventions for High Risk Disorders: What Should the Pediatrician Do?</b> Joan Tamburro, DO
10:00 am – Noon	<b>Children's Oral Health: Pediatricians as Part of the Oral Health Team</b> Romer Ocanto, DDS, MS, Med
Noon	<b>Adjourn</b>

## Faculty

**Jennifer LeComte, DO, FACOP**  
Christian Care Health System  
Wilmington, DE

**Martin S. Levine, DO**  
AOA President  
Chicago, IL

**Richard Magie, DO, FACOP**  
Kansas City University of Medicine and Biosciences  
Kansas City, MO

**James Marshall, DO, FACOP**  
Abilene, TX

**Cynthia Mears, DO**  
Children's Memorial Hospital  
Chicago, IL

**Brian K. Moore**  
Immunization Registry Coordinator  
Tennessee Department of Health  
Nashville, TN

**Cory Ellen Nourie, MSS, MLSP**  
A.I. d uPont Hospital for Children  
Wilmington, DE

**Romer Ocanto, DDS, MS, Med**  
College of Dental Medicine  
Nova Southeastern University  
Fort Lauderdale, FL

**Joan Tamburro, DO**  
Director, Pediatric Dermatology  
Case Western Reserve University  
Cleveland, OH

# Speaker Objectives

**Friday, March 23, 2012**

## **DRG/Coding Assurance Using Clinical Language Understanding Solutions While Meeting ICD10 Challenges**

James R. Flanagan, MD, PhD

Upon completion of this lecture, the participant will:

- Know the technological tools to help the physician use CLU to assist with diagnostic assignment and regulatory coding.

## **Implementation of an EMR In A Pediatric Practice: What a Pediatrician Should Consider.**

Scott Cyrus, DO, FACOP; Michael Hunt, DO;

Richard Magie, DO

Upon completion of this lecture, the participant will be able to:

- Recognize an EMR that focuses on pediatric workflow.
- Identify the key questions to ask a vendor when considering an EMR purchase.
- Understand the considerations outside of the actual software to meet meaningful use in a private practice.

## **Legal Considerations for Transitioning into Adulthood**

Cory Ellen Nourie, MSS, MLSP

Upon completion of this lecture, the participant will:

- Recognize legal barriers in the process of transition from pediatrics to adult medicine.
- Identify resources that will support effective transition.

## **Effective Healthcare Transition of Young Adults: Assessing Readiness, Promoting Autonomy, and Generating the "Portable Medical Record"**

Jennifer M. LeComte, DO, FACOP

Upon completion of this lecture, the participant will:

- Discuss the transition process and assessing readiness.
- List barriers to effective transition.
- Discuss the collaborative nature of successful transition including promoting autonomy.
- Understand relevant healthcare transition literature.

## **Image Gently**

Mark S. Finkelstein, DO

Upon completion of this lecture, the participant will:

- Understand the risk of radiation exposure in the pediatric patient.
- Know how to minimize radiation exposure in pediatric patients.
- Identify alternative imaging modalities available to limit radiation exposure in pediatric patients.

## **Radiology in Pediatric Trauma**

Mark S. Finkelstein, DO

Upon completion of this lecture, the participant will:

- Understand the role of radiology in pediatric emergency trauma.
- Discuss the variety of imaging services available for pediatric emergency trauma.
- Identify appropriate selection of imaging studies in pediatric emergency trauma.

**Saturday, March 24, 2012**

## **Bedside Baby Belly Ultrasound: Evaluating Pediatric Abdominal Pain with Point of Care Ultrasound**

Russ Horowitz, MD

Upon completion of this lecture, the participant will:

- Understand how to use portable ultrasound technology to affect diagnosis and treatment of abdominal pain.
- Identify various clinical scenarios and appreciate how technology can be utilized to improve efficiency of healthcare.
  - Case-based scenarios will highlight pyloric stenosis, appendicitis, trauma, intussusception.

## **Sports Equipment: Design to Prevent Injury**

TBD

Upon completion of this lecture, the participant will:

- Understand sports equipment design using research data to prevent injury.
- Appreciate the methodology used to produce football helmets that attempt to minimize concussion.

## **Practical Approach to Evaluation and Treatment of Concussion**

Michael Collins, PhD

Upon completion of this lecture, the participant will:

- Identify several tools that improve a provider's ability to manage concussion.
  - Evidence-based data will be presented to improve understanding to patient specific treatment plan that includes a software technologic tool to assist with the management of concussion.
- Understand a wide-range toolset to evaluate, treat, and develop patient specific plans allowing return to school, work, and or sports.

## **2012 James M. Watson Memorial Lecture**

Martin S. Levine, DO

Upon completion of this lecture, the participant will:

- TBD

## **Teen Tobacco Use-Prevention and Treatment**

Cynthia Jane Mears, DO, FAAP

Upon completion of this lecture, the participant will be able to:

- Define the problem.
- Understand addiction.
- Identify the risk factors.
- Understand readiness for change.
- Develop and implement effective interventions.

# Speaker Objectives

Saturday, March 24, 2012

## Sexually Transmitted Infection Update/High Risk Sexual Behaviors

Cynthia Jane Mears, DO, FAAP

Upon completion of this lecture, the participant will:

- Understand strength based approach to getting an adolescent history.
- Recognize current trends in sexual behavior and STD risk factors for youth.
- Identify STD trends.
- Describe STD prevention strategies.
- Understand new PAP recommendations.

Sunday, March 25, 2012

## DOs of Immunizations

Stanley E. Grogg, DO, FACIOP

Upon completion of this lecture, the participant will:

- Understand current recommendations to the immunization schedule, controversies, and reimbursement issues.

## Current State of Tennessee's Immunization Registry

Brian K. Moore, Immunization Registry Coordinator, Tennessee Department of Health

Upon completion of this lecture, the participant will:

- Understand the current state of the registry, how pediatricians interact with the registry, and how the registry is planning to optimize in the future and participate with meaningful use.

## Dermatologic Interventions for High Risk Disorders: What should the Pediatrician Do?

Joan Tamburro, DO

Upon completion of this lecture, the participant will:

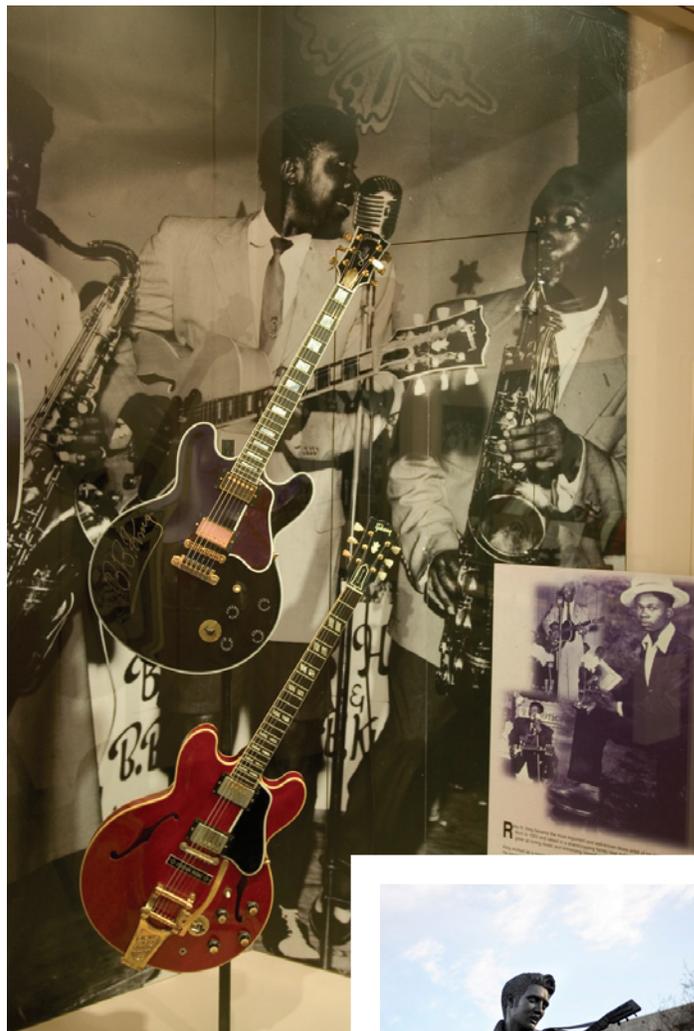
- Understand the most common pediatric high risk dermatologic issues and how the pediatrician should evaluate, diagnose and treat.

## Children's Oral Health: Pediatricians as Part of the Oral Health Team

Romer Ocanto, DDS, MS, Med

Upon completion of this lecture, the participant will:

- Understand the important role that oral health plays in the overall health of infant, child and adolescent patients
- Identify emergent and urgent oral health issues and appropriate management, including issues of growth and development affecting the oral cavity that are age-specific.



AMERICAN COLLEGE OF OSTEOPATHIC PEDIATRICIANS

# 2012 Spring Conference

March 23-25, 2012 • Memphis Peabody • Memphis, TN

## MEETING REGISTRATION

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Degree \_\_\_\_\_ AOA# \_\_\_\_\_

Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\*Email \_\_\_\_\_ \*Email required for registration confirmation.

Home Phone \_\_\_\_\_ Office Phone \_\_\_\_\_ Fax \_\_\_\_\_

\*Preferred method of contact.

	Through Feb. 20, 2012	After Feb. 20, 2012	Total Due
<b>ACOP Members</b>			
<input type="checkbox"/> Fellow, Associate or General Member	\$450	\$500	_____
<input type="checkbox"/> Emeritus Member	\$150	\$200	_____
<input type="checkbox"/> Candidate Member (Intern & Resident)	\$75	\$100	_____
<input type="checkbox"/> Osteopathic Medical Student**	\$25	\$30	_____
<b>Non Members</b>			
<input type="checkbox"/> DO - Member of Other Specialty College	\$500	\$600	_____
<input type="checkbox"/> Osteopathic Medical Student*	\$35	\$45	_____
<input type="checkbox"/> Resident/Intern*	\$95	\$105	_____
<input type="checkbox"/> Other Physicians	\$450	\$500	_____
<input type="checkbox"/> Allied Health Professional	\$250	\$300	_____
<input type="checkbox"/> Spouse/Guest Meal Ticket	\$95	\$95	_____
<i>Includes Breakfast Friday-Sunday</i>			
<input type="checkbox"/> Student Meeting Donation (to help the college subsidize students' attendance)			_____
<input type="checkbox"/> Yes! I will participate in the Boot Camp on March 24, 2012.			n/c _____
* Membership application available at <a href="http://www.ACOPeds.org">www.ACOPeds.org</a>			<b>Registration Total</b> \$ _____

**Payment**  Check (If paying by check, check must be made payable to ACOP and in US Funds.)

Credit Card Payment:  VISA  MasterCard  Discover  American Express

Credit Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV Security Code <sup>◇</sup> \_\_\_\_\_

Signature \_\_\_\_\_ Printed Name on Card \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_ Zip Code \_\_\_\_\_

<sup>◇</sup>CVV code is the three digit number on the back of VISA or MC or 4 digit number on the front of AMEX card above the account number.

**Mail registration/checks to:** American College of Osteopathic Pediatricians  
2209 Dickens Road • Richmond, Virginia 23230-2005

**Online registration available at [www.ACOPeds.org](http://www.ACOPeds.org).**

Cancellation Policy: Full refund through February 20, 2012. 50% refund February 20, 2012. No refunds after March 5, 2012. Refunds will be determined by the date written cancellation is received.