Dear Colleagues,

As you receive this issue of KIDney Notes, many will be finalizing travel and presentation plans for the ASN's 2014 Kidney Week Scientific Meeting in Philadelphia (November 11-16). ASPN member Elaine Kamil has served on the Postgraduate Education Committee and has continued to encourage the inclusion of topics of specific interest to pediatric nephrologists. In addition to the breadth of science we expect from the ASN meeting, there are two sessions this year that may be of special interest to ASPN members: “Pediatric Nephrology: 2014 Update” on Thursday will review the newest developments in the study of vesicoureteral reflux, in the assessment of the hypertensive child, and in the special burden of renal risk in the preterm and small-birth-weight infant while “Cystic Kidney Disease in Children: Beyond Polycystic” on Friday will describe new entities in nephronophthisis, genetic and clinical findings in Bardet-Biedl syndrome, discuss the pathology of cystic diseases and the pathogenesis of cyst formation.

As usual, the ASPN will host many committee meetings during Kidney Week and I encourage everyone to participate. Committee meetings are open to all members of the society, and this is a great opportunity to “test drive” a committee if you think you would like to become involved. I would like to especially encourage interested members to participate in the Member Education Committee that will be held Thursday, 11/13 from 12:45-1:45 in the Marriott, Franklin Hall, Salon 6. ASPN would like to significantly broaden the educational offering of our society beyond the current on-site meetings, but we need your input regarding what and how you learn best, and what you would like to know most, and very importantly, we need members interested in education to participate in the design and implementation of new platforms. If you are unable to attend the meeting, please contact Stuart Goldstein at stuart.goldstein@cchmc.org with your interest.

And of course, we will hold a business meeting (Thursday, 11/13 from 6:45-8:45 pm in the Marriott, Grand Ballroom, Salon E). We must discuss the budget for the coming year and work together to understand the best ways to finance the growing desires and objectives of the society. We will also discuss the development of ASPN’s new tax-exempt foundation and the goals of the member education committee. We would like to especially thank the Division of Nephrology at the Children’s Hospital of Philadelphia who will kindly sponsor a reception to occur with our business meeting. Please join us – this is YOUR society, and we need your voice.

I look forward to seeing many of you in Philadelphia, and to those of you who will stay home to “man the trenches”, we promise to bring home some wonderful pearls and new approaches. Safe travels!

Victoria F. Norwood, MD
President
vfn6t@virginia.edu
KIDNEY HEALTH INITIATIVE UPDATE

The KHI (Kidney Health Initiative) has just announced new opportunities for participation in its workgroups for its next phase of projects. Opportunities include Advancing Technologies to Facilitate Remote Management of Patient Self-Care in Renal Replacement Therapy (RRT), Regulatory Policies and Positions Affecting Device Approval in the US: Tools to Assess the Process and Foster Device Development for Patients with Kidney Disease, and Workshop on the Design and Implementation of Pragmatic Trials in Nephrology. ASPN invites all members with interest and expertise in these areas to let us know of your desire to participate. Details on these opportunities and the ongoing efforts of the KHI are available at [http://www.aspneph.com/announcements/KHI-Update2.pdf](http://www.aspneph.com/announcements/KHI-Update2.pdf).

ASPAN SAN DIEGO APRIL 25-28 2015: CASE SUBMISSION CONTEST FOR PEDIATRIC NEPHROLOGY FELLOWS

The ASPN will be holding a case-based workshop in San Diego during Sunday morning April 26 2015 entitled, “Challenges and Ethics in Transition.” On behalf of the workshop leaders, Drs. Mahan and Ferris, the ASPN Program Committee requests that Pediatric Nephrology Fellows submit interesting cases that highlight challenging medical, psychosocial, and ethical dilemmas in transitions of care from pediatric to adult nephrology. Three cases will be chosen by the workshop leaders and program committee, and the chosen cases will be organized into a fellow presentation and facilitated discussion for the workshop. The fellows submitting three winning cases will be awarded $250 for their efforts. Submissions are requested by 11 pm EST Tues December 16, 2015. Fellows are requested to limit their submission to one case each and address their case to Lisa Thompson at lthompson@aspneph.com.

NEPTUNE TRAINING PROGRAM

The NIH-sponsored NEPTUNE observational study was recently renewed for a second five-year cycle. With this, a career development fellowship has been established. The NEPTUNE Career Development program is designed to support advanced post-doctoral and junior faculty trainees, or established investigators interested in redirecting their investigational focus, who are preparing to become independent investigators in clinical and translational research in human glomerular disease. Read more: [http://www.rarediseasesnetwork.org/NEPTUNE/professional/fellowship/](http://www.rarediseasesnetwork.org/NEPTUNE/professional/fellowship/)

The International Society of Nephrology recently launched its “0by25” initiative (zero preventable deaths due to acute kidney injury by 2025). As a first step, a call has just gone out to conduct a world-wide snapshot of the incidence of AKI during a 6-week period. It is important that pediatric patients are captured in these data. We encourage each pediatric centre to participate in the Global AKI Snapshot that can be accessed via the following link: [http://www.0by25.org/](http://www.0by25.org/)

In Memoriam

Ira Greifer, MD

Ira Greifer passed away on September 17, 2017. Dr Greifer made innumerable contributions to the field of Pediatric Nephrology, including serving as the Secretary General of IPNA. A summary of his career achievements is available on the In Memoriam section of the ASPN website.

In Recognition

The ASPN congratulates Prasad Devarajan, MD, for his recognition by Thomson-Reuters as “One of the World’s Most Influential Scientific Minds” in their 2014 publication. According to Thomson Reuters, “These highly-cited researchers were determined by analyzing citation data over the last 11 years to identify those who published the highest impact work (2002—2012 and 2012—2013). These individuals are influencing the future direction of their fields, and of the world.” Dr. Devarajan was the only pediatric nephrologist to receive this recognition.

Drs. Sangeeta Hingorani, David Askenazi, Patrick Brophy and Stuart Goldstein received funding from NIDDK for their multi-PI project “Recombinant Erythropoietin for Protection of Infant Renal Disease (REPAIRReD)”, which will be the first study to systematically assess for long-term effects of acute kidney injury and development of chronic kidney disease in premature infants.
ASPN Leadership Development Program

Background: Leaders of professional societies such as the ASPN need a specific skill set to be able to negotiate the complex tasks of program development, personnel supervision, and dealing with outside constituencies and other organizations. These skills are also applicable to many other aspects of academic medicine and are commonly acquired after years of experience, perhaps also by specific training, or through trial and error. We believe that it is possible to intentionally develop future leaders of our Society by offering a leadership development curriculum. This program will not only assist the ASPN in development of future leaders, but will also give the participants important skills that they will be able to utilize at their home institutions.

Proposal: A comprehensive leadership development program to be awarded on a competitive basis to 12-15 ASPN members. The entire program will be completed over an approximately one-year period. The curriculum will be spread out over 3 full-day sessions to take place in conjunction with scheduled meetings as follows:

- 2015 PAS, San Diego CA. Specific date: Friday, April 24, 2014.
- 2016 PAS, Baltimore MD. Specific date: April 29, 2016.

The proposed curriculum is outlined in the attached document. The May 2015 session will consist of a kickoff seminar led by a past president of the ASPN, followed by a 4-5 hour session on individual leadership practices as defined by 360° multisource assessment. The remaining topics will be covered over the two final day-long sessions. Outside speakers from both industry and academia will be utilized as faculty for the sessions.

Eligibility: The successful applicant will be an ASPN member in good standing, with an established record of ongoing service to the ASPN. Roughly one half of the awards will be made to junior faculty within 5-10 years of completion of fellowship training, and one half made to mid-level and senior faculty. The Leadership Development Program Steering Committee, consisting of John Mahan, Joseph Flynn, Craig Porter and Barbara Fivush will select the awardees. It is expected that awardees will be selected from a diverse group of institutions, geographic locations, and backgrounds.

If selected, applicants must agree to participate in all elements of the Leadership Development Program (3 full days of training sessions and appropriate additional preparatory time), and must commit to serve the ASPN as an active member of an ASPN Committee, Task Force, or Council. Finally, there is a one time, nonrefundable participation fee of $100.00 that must be paid once the applicant is selected for the program.

Application process: Applicants must submit a completed application that includes:

- Application form
- Current CV
- Personal statement (maximum 2 pages) that addresses the following:
  - How did you become interested in working with the ASPN?
  - Please comment specifically on previous ASPN committee work.
  - What skills and knowledge do you hope to obtain as a result of this opportunity?
  - How will this experience enhance your professional development and career?
  - Have you completed a similar formal leadership skills training program in the past? If so, please describe.
- Letter of support from your Division Chief or Department Chair as appropriate that addresses the following:
  - Interest and promise of the applicant in terms of leadership potential.
  - Commitment to provide the applicant, if successful, protected time to participate in the program and requisite post-program ASPN activities.

Submit your completed application package by email to: lthompson@aspneph.com
Nephrotic Syndrome Education Collaboration in Vietnam

ASPN member Rick Kaskel, MD participated in an exciting partnership between an Australian based Non-Government Organization (NGO) called CLAN (Caring & Living As Neighbors), which is dedicated to assist children and their families who are living with chronic health conditions including diabetes, congenital adrenal hyperplasia, osteogenesis imperfecta, and Nephrotic Syndrome, and NephCure, the advocacy organization for patients with nephrotic syndrome (http://nephcure.org/).

Dr. Kate Armstrong, President of CLAN, assisted by Dr. Elisabeth Hodson, both from the University of Sydney, the Children’s Hospital at Westmead, have been visiting the major Children’s Hospitals in Viet Nam for the past 8-10 years. They were joined this year by Rick, Henry Brehm, Chief Executive Officer of NephCure, Dr. Laun Throng, Renal Pathologist at Methodist Hospital, Houston, Texas, and two medical students from Albert Einstein College of Medicine.

A total of eighteen CME presentations were given to pediatricians and nephrologists on nephrotic syndrome, systemic lupus erythematosus, acute glomerulonephritis, acute kidney injury and urinary tract infections at Hue Central Hospital, Children’s Hospitals 1 & 2 in Ho Chi Minh City, and National Hospital of Pediatrics, in Hanoi and Thai Binh Province as well as six Nephrotic Syndrome Club lectures aimed at patients and families. Professional audiences exceeded two hundred participants and over five hundred families and children attended the interactive meetings. A newsletter and other educational resources were shared with families, and opportunities for future long-term collaboration amongst health professionals and families in Vietnam, the USA and Australia were explored.

The project was presented at the United Nations Department of Public Information/NGO Conference in August. It is hoped that this unique partnership will continue in the upcoming year and volunteers are needed. If you are interested, please contact Rick Kaskel: frederick.kaskel@einstein.yu.edu

NePhrotic SyNDrome eDuCAtioN CollAboRAtioN iN VietNam

The John E. Lewy Foundation for Children’s Health and the American Society of Pediatric Nephrology are pleased to announce the 5th Advocacy Scholar’s Program. The purpose of this “mini-fellowship” program is to develop a pipeline for the next generation of leaders in pediatric nephrology with specific expertise in governmental processes affecting children’s health care by educating future leaders in the conduct and application of advocacy.

Please take a few minutes to peruse the information and application form. We look forward to receiving numerous applications and the continued growth of this program in the future. The deadline for the simple application is Friday, November 14, 2014.

INformation and Application: http://www.aspneph.com/JohnELewyFoundation/Scholars/ScholarsMain.asp
On October 20 and 21 the John E Lewy Foundation for Children’s Health 2013 and 2014 Advocacy Scholars visited Washington, D.C. as part of their advocacy training. Monday found the group meeting with representatives of kidney patient organizations including the National Kidney Foundation, American Kidney Fund, Dialysis Patient Citizens and NephCure, following by meetings with staff of the Renal Physicians Association and the American Society of Nephrology’s Federal Affairs team. The unique opportunity allowed ASPN members to hear about the work of these groups in Washington and to have a discussion about areas of mutual interest. Those areas include support for NIH research and immunosuppressive drug coverage.

These very productive meetings allowed the scholars to understand the different advocacy activities within the kidney community as well as the strength of our own collaborations in moving key policy initiatives forward.

On Tuesday, the scholars were joined by recently-graduated scholars Dr. David Hains and Dr. John David Spencer for visits with representatives of the National Institutes of Health (NIH). Three meetings took place starting with the Deputy Director of the National Institute for Diabetes, Digestive and Kidney Diseases (NIDDK). There are many exciting initiatives housed at NIDDK and of great interest to the ASPN as most of our members who receive federal research dollars get it from the NIDDK. Following the NIDDK, the scholars met with the National Heart Lung and Blood Institute’s (NHLBI) Cardiovascular Division Director followed by the National Center for Advancing Translational Sciences’ (NCATS) Office of Policy, Communications and Strategic Alliances Director. These meetings helped solidify already strong relationships with NIH, but also allowed the Advocacy Scholars to better understand the Society’s partnership with key policymakers.

The current Advocacy Scholar call for applications is out, with a November deadline. Please contact Lisa Thompson for more information if you are interested in applying to be a 2015 Advocacy Scholar.

WASHINGTON UPDATE CONTINUED ON PAGE 9

**ASPN Ancillary Meeting Schedule at ASN Kidney Week**

<table>
<thead>
<tr>
<th>Meeting Name</th>
<th>Day/Date</th>
<th>Time</th>
<th>Marriott Downtown</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Chronologically listed</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Council</td>
<td>Wednesday, 11/12</td>
<td>8:00am-6:00pm</td>
<td>Room 403/404</td>
</tr>
<tr>
<td>Corporate Liaison Board</td>
<td>Wednesday, 11/12</td>
<td>8:00am-10:00am</td>
<td>Room 403/404</td>
</tr>
<tr>
<td>Membership Committee</td>
<td>Thursday, 11/13</td>
<td>12:45pm-1:45pm</td>
<td>Franklin Hall, Salon 3</td>
</tr>
<tr>
<td>Member Education Committee</td>
<td>Thursday, 11/13</td>
<td>12:45pm-1:45pm</td>
<td>Franklin Hall, Salon 6</td>
</tr>
<tr>
<td>Public Policy – Quality &amp; Payment Committees (joint meeting)</td>
<td>Thursday, 11/13</td>
<td>12:45pm-1:45pm</td>
<td>Franklin Hall, Salon 4</td>
</tr>
<tr>
<td>Communications Committee</td>
<td>Thursday, 11/13</td>
<td>12:45pm-1:45pm</td>
<td>Franklin Hall, Salon 5</td>
</tr>
<tr>
<td>ASPN Business Meeting</td>
<td>Thursday, 11/13</td>
<td>6:45pm-8:45pm</td>
<td>Grand Ballroom, Salon E</td>
</tr>
<tr>
<td>Clinical Affairs Committee</td>
<td>Friday, 11/14</td>
<td>6:45am-7:45am</td>
<td>Franklin Hall, Salon 3</td>
</tr>
<tr>
<td>Research Committee</td>
<td>Friday, 11/14</td>
<td>6:45am-7:45am</td>
<td>Franklin Hall, Salon 4</td>
</tr>
<tr>
<td>Workforce Committee <strong>Time &amp; Room Change</strong></td>
<td>Friday, 11/14</td>
<td>6:45pm-7:45pm</td>
<td>Franklin Hall, Salon 5</td>
</tr>
<tr>
<td>ASPN Foundation Planning</td>
<td>Friday, 11/14</td>
<td>12:45pm-1:45pm</td>
<td>Franklin Hall, Salon 4</td>
</tr>
<tr>
<td>Mentorship Program Meeting</td>
<td>Friday, 11/14</td>
<td>6:45pm-8:15pm</td>
<td>Franklin Hall, Salon 4</td>
</tr>
<tr>
<td>Therapeutic Development Committee <strong>Time Change</strong></td>
<td>Saturday, 11/15</td>
<td>6:45am-7:45am</td>
<td>Franklin Hall, Salon 3</td>
</tr>
<tr>
<td>pFeNa Social Event</td>
<td>Saturday, 11/15</td>
<td>7:00pm</td>
<td>Tavern on Broad</td>
</tr>
<tr>
<td>Training Program Directors Committee</td>
<td>Saturday, 11/15</td>
<td>6:45am-7:45am</td>
<td>Franklin Hall, Salon 4</td>
</tr>
<tr>
<td>Guidelines Task Force <strong>Cancelled</strong></td>
<td>Saturday, 11/15</td>
<td>12:45pm-1:45pm</td>
<td>Franklin Hall, Salon 3</td>
</tr>
<tr>
<td>Training and Certification Committee <strong>Cancelled</strong></td>
<td>Saturday, 11/15</td>
<td>6:45pm-7:45pm</td>
<td>Franklin Hall, Salon 3</td>
</tr>
</tbody>
</table>
Well, this fiscal year started with much less drama than last – i.e. no government shutdown! However, we don’t have a final FY15 budget yet, and are operating under a Continuing Resolution (CR). What does this mean? It means we’re to carry on business as if our budget is the same as FY14. Those of you who have continuing grants will note that any award notices going out while we’re under the CR will show a budget at about 90% of what you anticipated based on your Notice of Award (NoA) last year. This is a conservative measure that is taken in the event that when we do receive a final budget for FY15, it is actually less than FY14. Once we have a final budget, if it is not reduced, you will receive a revised award notice restoring the funds to your grant. You should carefully read your NoA, and contact your Program Officer if you have questions.

**FUNDING OPPORTUNITIES OF INTEREST**

Innovative Research in HIV in Kidney, Urology and Hematology (R01) - [http://grants.nih.gov/grants/guide/rfa-files/RFA-DK-14-020.html](http://grants.nih.gov/grants/guide/rfa-files/RFA-DK-14-020.html) - This Funding Opportunity Announcement (FOA) invites applications for innovative research projects examining the basic and clinical aspects of HIV infection, treatment, and long-term sequelae as they relate to the mission of the Division of Kidney, Urologic and Hematologic Diseases within NIDDK (KUH/NIDDK).

Advancing Interventions to Improve Medication Adherence (R01) - [http://grants.nih.gov/grants/guide/pa-files/PA-14-334.html](http://grants.nih.gov/grants/guide/pa-files/PA-14-334.html) - This FOA seeks applications that propose interventions to significantly improve medication adherence in individuals.


Prevention of Lower Urinary Tract Symptoms in Women: Bladder Health Clinical Centers (PLUS-CCs) (U01) - [http://grants.nih.gov/grants/guide/rfa-files/RFA-DK-14-004.html](http://grants.nih.gov/grants/guide/rfa-files/RFA-DK-14-004.html) - The consortium will develop the evidence base for normal or healthy bladder function and to identify behavioral and other risk factors for conditions associated with LUTS. The Consortium will focus on a broad age range from adolescent girls to older non-institutionalized women to set the stage for future research in prevention of lower urinary tract symptoms and conditions with a particular focus on symptoms that are associated with the diagnosis of bladder infections, urinary incontinence, voiding dysfunction, overactive bladder and interstitial cystitis/bladder pain syndrome will be a multidisciplinary perspective on the medical needs of this population.

**NIH**

Valeriya Feygina, MD
Geisinger Medical Center

Michael Freeman, MD
Penn State College of Medicine

Neena Gupta, MD
University of Massachusetts

Mathieu Lemaire, MD
University of Toronto

Pamela Meiring, RN
Nationwide Children’s Hospital

Pornroong Prutthiphongsit, MD
Bumrungrad International Hospital

Izhar Qamar, MB, BS
University of Chicago

Aaron Wightman, MD
University of Wisconsin

**NIH…Turning Discovery Into Health®**
CLINICAL AFFAIRS COMMITTEE

The new OPTN/UNOS kidney allocation system will begin on December 4th. Are you ready? Multiple resources are available to help you and your team prepare as well as how to help educate families.

• AST webinar “Kidney Allocation System Changes: Strategies to Improve Recipient Readiness and Reduce Disparities”
  ◦ Tuesday, November 4, 2:00 - 3:00 pm EST but available any time after that in the archives.
  ◦ Just go to www.myAST.org/T3 and click on the webinar to register.
  ◦ Free for AST members, $25 for non-members


• OPTN/UNOS policy language regarding the updated kidney allocation system (KAS). http://optn.transplant.hrsa.gov/ContentDocuments/Policy8_Update_KAS_12-2014.pdf


Feel free to reach out to us at ASPN (put “new kidney allocation system” in the subject line) if you have any questions.

Jodi Smith, Seattle Children’s Hospital

WORKFORCE COMMITTEE

It’s time again for the ASPN Workforce Committee to share ideas for generating interest in our field among future physicians and pediatricians. More and more, it seems the initial spark that eventually leads to the decision on which field to pursue occurs earlier in training, very often during medical school. Therefore exposing medical students to pediatric nephrology before they decide on their path is critical.

Our medical school has a program for students to engage in a summer research project between their first and second year. Our division has hosted a number of students under this program, in both clinical and bench/translational research. In addition to the research exposure, exposing the students to the clinical side with shadowing opportunities is something that the students really value. This can be their first exposure to a subspecialty field (adult or pediatric) which can potentially create a lasting impression. Of course, it helps to show our enthusiasm for what we do while interacting with the students!

For additional ideas on how to engage medical students and pediatric residents, there are Tool Kits available within the members-only area of the ASPN website (go to ASPN Tools, then to Workforce Toolbox).

Hiren Patel, Nationwide Children's Hospital

RESEARCH COMMITTEE

Congratulations to our own Dr. Friedhelm Hildebrandt, Professor at Boston Children’s Hospital; Harvard Medical School; Howard Hughes Medical Institute who will be presented with the 2014 Homer W. Smith Award at ASN’s Kidney Week. This prestigious award, established in 1964, is presented annually to an individual who has made outstanding contributions which have fundamentally affected the science of nephrology. Dr. Hildebrandt’s research focusing on identification of recessive single-gene causes of kidney diseases in children has identified over 20 novel genes. Also, congratulations to Dr. Mary Leonard, Professor at Stanford School of Medicine, who has been chosen to give the Robert W. Schrier, MD, Endowed Lecture in honor of her research contributions to the “bone-muscle connection” in CKD. There are many excellent research talks and abstracts to be presented at Kidney Week this year by pediatric nephrologists. Please come to the poster sessions and support our colleagues and trainees.

We wish to remind ASPN members about the Student Research Program of the Society for Pediatric Research (SPR) and the American Pediatric Society (APS). The gifted medical students selected for the program can choose or are assigned to leading research laboratories/groups at institutions OTHER than their own medical school. To sign up or update your contact information, the link to the program and details can be found at: https://www.aps-spr.org/get-involved/student-research/.

There are also some new funding opportunities for research of which we would like everyone to be aware. One new opportunity from the NIH is: RFA-DK-14-010, (Re)Building a Kidney: Cells to Organ (UH2/UH3), which invites new research project applications to participate in the NIDDK’s (Re)Building a Kidney Consortium. Projects will be focused on the expansion of tools, resources, and knowledge that will guide studies on the in vivo regeneration of functional nephrons or in vitro generation of nephrons for kidney transplant. The initial 2 year UH2 phase will inform strategies for enhanced endogenous regenerative repair processes and generation of cell types important for the development of functional nephrons. The budget is expected to pay $200,000-$300,000 per year for direct costs (up to $500,000 total). The UH3 award is to provide a 3 year second phase for support for innovative exploratory and development research activities initiated under the UH2 mechanism. A letter of intent is due on December 14, 2014. See more at: http:// grants.nih.gov/grants/guide/rfa-files/RFA-DK-14-010.html.

The NIH-sponsored NEPTUNE study was recently renewed for a second five year cycle. Included in the budget is funding for a career development program that is not limited to NEPTUNE participants. For more information, contact Lawrence Holzman or go to: http://www.rarediseasesnetwork.org/NEPTUNE/professional/fellowship/ As always, you can find the latest information on funding opportunities at the ASPN website (http://www.aspneph.com/Awards/awards.asp). For members who have been awarded any extramural grants, please be encouraged to share with the Research Committee by sending the award information (title, PI, type of grant) or award notice to Jackie Ho (jacqueline.ho2@chp.edu). We would like to celebrate the research accomplishments of our ASPN members by publicly acknowledging their extramural funding awards.

Scott E. Wenderfer, Texas Children’s Hospital

In the Market for New Position?
Visit the ASPN Market Place for information about the latest job openings in Pediatric Nephrology! http://aspneph.com/MktgPage/MktgPageMain.asp
1. Pediatric Nephrology Fellow Report
   a. Very stable numbers of first year fellows matched to PN (33 matched) and number of fellows who started in July 2014 (40 total, meaning 7 post match) noted
   b. In last 5 years:
      - Total number of first year spots offered in Match increased by 22% (50 to 61)
      - Total number of candidates in ERAS for first year spots increased by 6% (34 to 36)
      - Total number of candidates matched for first year spots increased by 6% (31 to 33)
   c. Total number of first year fellows starting in July of year (after adding post match fellows) decreased by 11% (45 to 40)
   d. Total number of fellows in training as of July of the year increased by 7% (119 to 127)
   e. Retention of fellows once in training programs appears to be improving (retention improved to 97% in the last year)

   Actions:
   The TPD group will propose to meet with Workforce Committee to further expand efforts to engage more candidates in pediatric nephrology fellowship training.
   The TPD will convene a Ped Neph Fellowship Best Practices Task Force to study practices of programs and generate a list of best practices to promote better recruitment and retention of resident into Ped Neph Fellowships.

2. Pediatric Nephrology Milestones work – faculty development strategies
   a. Multiple faculty development strategies used (Ettinger Milestones/CCC slide deck very useful).

3. Pediatric Nephrology EPAs – EPA study (sponsored by COPS) presently has p Ped Neph programs enlisted; more are welcome to participate

4. Future Workshop Topics – still enthusiastic about meeting every year; consider partnering every other year with ASN TPD meeting

5. ASPN Pediatric Nephrology Core Curriculum proposal – a Ped Neph Fellowship Education Methods/Activities Working Group to be convened to gather already available educational resources and post on ASPN web site.

6. Medical Education Topic – ‘Flipped Classroom Model’ to promote more active learner engagement presented and discussed

Alicia Neu, Johns Hopkins Children’s Hospital and John Mahan, Nationwide Children’s Hospital
NEW ASPN-ENDORSED LEGISLATION INTRODUCED TO PROTECT ORGAN DONORS

Bipartisan Bill Introduced to Protect Organ Donors

Congressman Jerrold Nadler (D-NY) and Congressman Michael Burgess (R-TX) recently introduced the Living Donor Protection Act to promote organ donation and protect the rights of living donors. “Rather than putting roadblocks in the way of living organ donation, Congress should encourage more individuals to become living donors and protect the rights of those donors to receive the insurance and medical leave they need” said

Click here to ask your Representative to cosponsor the bill. Read More>>

NIH TAKES CENTER STAGE

In the wake of Ebola in the U.S., continuing resolutions in Congress and an election year, the funding levels at the NIH have become a hot news topic. On September 18 the second Rally for Medical Research took place with organizations urging Congress to increase investments in the NIH. Then on September 24 NIH Director Francis Collins suggested that an Ebola vaccine might be further along with additional funding.

The Federation of American Societies for Experimental Biology also released new factsheets on federal research funding broken down by congressional district. These factsheets can be used during advocacy efforts in educating members of Congress on the value of NIH research and the current work being conducted within their constituencies. You can find more information and the factsheets here.

Finally, a new national, non-partisan effort called ACT for NIH has been launched in Washington, DC, specifically seeking a significant funding increase for the NIH. The effort is being lead by Pat White, President of ACT for NIH, who formerly served as Associate Director for Legislative Policy and Analysis at NIH. Per the organization’s announcement, “ACT for NIH is made possible through the vision and philanthropic support of Jed Manocherian, Founder and Chairman, who is a member of the MD Anderson Cancer Center’s Board of Visitors and is passionately committed to advancing the pace of progress and discovery in medical research. Greg Manocherian is Vice Chairman and a philanthropist with many charitable foundations. Jed and Greg Manocherian are real estate investors and developers.” You can learn more about this effort here.

FDA ISSUES GUIDANCE ON LABORATORY-DEVELOPED TESTS

The US Food and Drug Administration (FDA) released a framework for regulating what is known as laboratory-developed tests, and this new guidance could impact academic health centers and companies that make diagnostic products. The draft guidance asserts a path forward for FDA to regulate tests that previously have gone unregulated, previously used by doctors and pathologists who work in a single medical center. However, current technology and scientific advances – particularly in the field of genetics – has created a gray area in distinguishing between these tests developed in labs and used in small populations and other diagnostics that may be considered manufactured. According to reports, some in industry now market these medical tests nationally without FDA clearance. The draft guidance says that “together, these changes have resulted in a significant shift in the types of LDTs developed and the potential risks they pose to patients.”

There has been some controversy both in the way in which FDA has released this framework and in its contents. They are receiving push back from those who make these types of tests and their partners. Meanwhile, the American Clinical Laboratory Association (ACLA) has argued that this new framework is a duplicative regulatory layer for products as, they claim, CMS already regulates these tests. More information can be found here. Public comments are due February 2, 2015.

Kathryn Schubert, Washington Representative

Special Thanks to our Corporate Liaison Board
**RE: EBOLA VIRUS**

Both ASN and the OPTN/UNOS have developed resources regarding the Ebola virus that we wanted to share with the pediatric nephrology community.

ASN has compiled resources and FAQs on their website ([http://www.asn-online.org/news/2014/1017-ebola.aspx](http://www.asn-online.org/news/2014/1017-ebola.aspx)). In addition, a special session on Ebola and Dialysis has been added to ASN Kidney Week 2014. This session will take place on Friday, November 14, at 10:30 a.m. EST. ASN is currently developing dialysis-specific information regarding Ebola, including FAQs for providing dialysis support to individuals infected with the virus.

The OPTN/UNOS Ad Hoc Disease Transmission Advisory Committee (DTAC), after careful review of information available from the Centers for Disease Control (CDC), offers the following information to transplant centers and OPOs in light of the first case of Ebola virus disease (EVD) identified in the United States: [http://transplantpro.org/guidance-regarding-ebola-virus-disease-evd/](http://transplantpro.org/guidance-regarding-ebola-virus-disease-evd/)

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**RE: EBOLA VIRUS AND DIALYSIS**

Here are the latest resources on dialysis and Ebola which can be found on the ASN website; [https://www.asn-online.org/news/2014/1017-ebola.aspx](https://www.asn-online.org/news/2014/1017-ebola.aspx).

- ASN, in collaboration with ASPN, has developed Frequently Asked Questions (FAQs) Regarding Ebola Virus Disease and Dialysis
- CDC has developed Recommendations for Safely Performing Acute Hemodialysis in Patients with Ebola Virus Disease in U.S. Hospitals
- At the ASN’s Kidney Week 2014, there will be an Ebola Special Session which will take place on Friday, November 14, at 10:30 a.m. EST.
- A podcast is available: ASN Manager of Policy and Government Affairs Rachel Meyer speaks with Dr. Harold Franch—who successfully dialyzed a patient with Ebola—and Dr. Sarah Faubel Chair of ASN’s Acute Kidney Injury Advisory Group, about Ebola’s effects on kidney function and considerations that nephrologists should take into account when treating a patient with Ebola, including steps to minimize threats to health care professionals administering dialysis.

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### A new comprehensive panel for pediatric Nephrotic Syndrome

**ClariFocus Panel: Nephrotic Syndrome**

A next-generation sequencing panel covering 28 genes that represent single-gene causes of pediatric nephrotic syndrome

**Indications:**
- Nephrotic-range proteinuria
- Negative sequencing results for one or more genes related to the NS phenotype

**Expected Detection Rates for Individuals with Nephrotic Syndrome**

<table>
<thead>
<tr>
<th>Standard of care</th>
<th>ClariFocus Panel: Nephrotic Syndrome</th>
</tr>
</thead>
<tbody>
<tr>
<td>NPHS2 testing</td>
<td>19% 68% 47% 25% 15% 10%</td>
</tr>
<tr>
<td>Newborn 0-3 months</td>
<td>Infant 4-12 months</td>
</tr>
</tbody>
</table>

*Sadowski C et al., JASN. In press, 2014.*  
*Lovric S et al., CJASN 2014; 9:1109-16.

**Order Now: www.claritasgenomics.com/CFP_NephroticSyndrome**

Also available: CYP24A1 Sequencing for Idiopathic Infantile Hypercalcemia

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More Information: http://pediatrics.med.miami.edu/nephrology/seminar

7TH INTERNATIONAL CONFERENCE ON CHILDREN’S BONE HEALTH
Salzburg, Austria
27-30 June 2015
Abstract deadline: 6 February 2015
Call for Abstracts

13TH INTERNATIONAL WORKSHOP ON DEVELOPMENTAL NEPHROLOGY
July 12-16, 2015 ~ Snowbird, UT
More information

2015 ASPN/PAS Meeting Important Dates

- PAS Registration and Housing Opens - Save the Date: December 3, 2014

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KIDney NOTES
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