Dear Colleagues,

As a new year begins, it is a good time to be grateful for family, friends and colleagues. It is also traditional to make resolutions for positive change.

Our pediatric nephrology community was challenged by 3 hurricanes over the last 6 months. I was amazed, albeit not surprised, by the dedication of those who confronted these natural disasters. You may have read about the herculean work of Michael Braun and Rita Swinford during Hurricane Harvey (click here to read). These types of efforts were replicated in Florida and Puerto Rico, where great challenges remain months after Hurricane Irma.

Many of you helped the affected patients from afar. This included taking care of displaced patients and making financial donations. ASPN tried to provide support during these hurricanes in a number of ways (e.g., facilitating care of displaced patients and coordinating donations). There are clearly opportunities to do better with the next disaster. Michael Braun and Marta Suarez-Rivera have agreed to lead an ASPN “Disaster Preparedness Task Force.”

Over the last 18 months, as your representative to IPNA’s executive committee, I have seen the dedication of pediatric nephrologists throughout the world, with many facing challenging obstacles to providing optimal patient care. Many of you are committed to global health, but ASPN has not had a forum for you to exchange ideas and work together. The new ASPN “Global Health Committee” will have its first meeting via conference call in early January.

I am so appreciative of the members of ASPN; you inspire me with your dedication to improving the care of our patients. I believe ASPN efforts in disaster preparedness and global health will be positive changes in 2018.

Larry Greenbaum, MD, PhD
President
lgreen6@emory.edu
News and Announcements

Member of the Month (October, November, December 2017)

Congratulations to our Members of the Month for their service to ASPN. Send nominations for those who have gone above and beyond to Michelle Rheault (rheau002@umn.edu):

**OCTOBER**

Daryl Okamura, MD
Seattle Children’s Hospital
Chair Research Committee

**NOVEMBER**

Kirtida Mistry, MBBCCh, DCH, MRCPCH
Children’s National Health System
Chair Training and Certification Committee

**DECEMBER**

David Sas, DO
Mayo Clinic
Chair Clinical Affairs Committee

Please send us (info@aspneph.org) photos of pediatric nephrologists receiving awards or giving important lectures so we can share them in *KidneyNotes*.

ASPN Corporate Liaison Board

[Logos of corporate sponsors]

Medtronic
Why do I support ASPN?
To give back while paying forward to the next generation of pediatric nephrologists!

As we advance in our careers, it is important to remember the early days when we were at the beginning of our journey in medicine. Individually, our mentors and educators gave us their time and knowledge to teach us the art of medicine. As a group, they created the foundations of what is now ASPN, where new generations of pediatric nephrologists can be supported through research and educational programs in the field of Pediatric Nephrology.

When I was a trainee, I was fortunate to be the recipient of multiple ASPN travel grants which allowed me to attend national meetings, network with leaders in our field, and more deeply explore pediatric nephrology. These experiences cemented my decision to become a member of ASPN’s professional Pediatric Nephrology community.

I encourage all ASPN members to join in the mission of ASPN. Share your time and knowledge in educational programs, serve on an ASPN committee, and advocate and support ASPN with tax-free donations. As we know from our own experiences, it is through giving that we receive much more in return.

Ibrahim F. Shatat, MD, MSCR
2018 marks 50 years since the founding of the ASPN. In 1968 a small group of individuals, all with an interest in the care of children and most with interests in renal physiology and pathophysiology, fluid and electrolyte issues or the emerging field of kidney immunology, started our society. This was six years before the first certification exam in pediatric nephrology. The ASPN then developed educational programming, starting with 1/2 day lectures before the APS/SPR meetings which evolved into our annual meeting. ASPN later joined up with the PAS to develop extensive continuing educational programming throughout the PAS and later in stand-alone forms. The society has developed a national platform for our members and the issues important to our field and our patients. The ASPN has advocated for research funding, training grants, developed advocacy programming and leadership training and has consistently worked with other nephrology and pediatric advocacy groups such as the ASN, NKF, RPA, AAP and others.

The ASPN’s evolution into the organization of today is a tribute to its founders and the many who have worked as volunteers to help its growth and maturation. The history project is meant to give today’s members not just a glimpse into the past, but an understanding of whence we came and how we developed so as to inform the future and keep the vision of its founders alive and well.

We need your financial support to ensure this project continues. Contributions can be made at the following link: http://www.aspneph.org/Foundation/oral_history.cfm.

If you would like to become involved in the ASPN History Project, please contact connie@aspneph.org.

Thank you and happy holidays -
Aaron Friedman

The ASPNF’s history project is progressing nicely. We have growing numbers of interviews from members and are collecting and organizing knowledge and artifacts of the past of our society and field.

In order to advance the project and to assist with ASPN’s exciting 50th Anniversary Celebration in May in Toronto, we are asking for help in collecting, digitizing, and annotating photographs of pediatric nephrologists, their activities, their equipment, their accomplishments, and (please!) their antics. The photos will be archived and used in print and web-based publications, so please be cognizant of any privacy concerns of which you may be aware. We can assist with digitization if needed. Please forward any photos that you are willing to share to Connie at connie@aspneph.org. PLEASE BE SURE TO PROVIDE NAMES, DATES, LOCATIONS AND OTHER CAPTIONS AS APPROPRIATE. Accurate annotation of the photographs is critical to provide information for captions and to accurately archive the work.

Thank you for helping our historical journey and for providing additional joy for our upcoming celebration. If you would like to participate in additional ways (interviews, creation of web/print items, etc), please contact either of us.

Vicky Norwood (vfn6t@virginia.edu) and Rick Kaskel (Frederick.kaskel@einstein.yu.edu)
John E. Lewy Foundation (JELF) Scholars Update

“Advocacy is a marathon, not a sprint.”

Fighting against dialysis reimbursement limits: In November, with the Public Policy Committee, JELF Scholars worked with Erika Miller to advocate against proposed reimbursement limits for dialysis care. We are awaiting the response from the Medicare Administrative Contractors (MACs) who proposed this legislation.

8th JELF Advocacy Scholars Program Class to be announced January 2018: Members of the 2018-2020 class will be announced in January 2018 and will hit the ground running as members of the Public Policy Committee.

Learning how to influence legislation with American Academy of Pediatrics (AAP): JELF Scholars will participate in the AAP Legislative Conference, April 7-10, 2018 in Washington, DC. We look forward to gaining new skills and developing collaborations to improve advocacy efficacy for our community and patients.

JELFing while Tweeting and Facebooking: JELF Scholars are collaborating with the ASPN Social Media and Communications Committee to strategize how to best utilize social media to inform our community about relevant advocacy issues. Stay tuned on how you can re-tweet and follow us for larger impact, or contact us if you have strategies on how to help.

SUPPORT ASPN ADVOCACY through your annual dues renewal: Giving Tuesday has passed, but ‘tis always the season to support advocacy efforts. Remember: You can contribute to the Perlman Program for Perpetual Participation and the John E. Lewy Fund through your annual dues renewal. The JELF program is 100% funded by the generosity of the ASPN membership and we are so grateful for your support. More than ever, our patients need our voices to be heard, and your contributions help ensure our visibility where it matters. To donate directly, click here: https://aspneph.org/JohnELewyFoundation/howtodonate.cfm. For questions about the JELF program, contact David Hains at dhains@iu.edu.

Thanks, as always, to the experienced, informed, and level-headed Erika Miller, who continues to guide the JELF Scholars and Public Policy Committee in what has been an extremely labor-intensive season of activity on the Hill. She has taught us well that advocacy is a marathon, and not a sprint. We also want to express our sincere appreciation to all of our advocacy mentors and supporters of the JELF program. Your experience, insight, and endurance inspire us.

Patty Seo-Mayer, MD
Inova Children’s Hospital and Pediatric Specialists of Virginia
Committee Updates

Training Program Directors Committee Update

Pediatric Nephrology Match Results/Fellow Numbers (from Dec 2017 Match)
This month’s ASPN TPD column focuses on the recent Match results for the class to begin in July 2018. We will present the status of our present Fellow enrollment, based on the best source we have, the ASPN Fellowship PD survey completed every Fall, in a later column.

This year’s Match numbers offer some improvement in our results from last year

Our US NRMP Match numbers were up again (3 years in a row!) with 36 matched candidates, up from 27 matched candidates in Dec 2015 and 32 matched candidates in Dec 2016. The total number of Fellows who start in July 2018 will likely be higher (due to ‘late-deciders’). We can be sure that PDs will continue to try to sign up more qualified Fellows to start in July 2018, with 22 unfilled positions out there.

Finally, we improved this year relative to other pediatric deficits with only the 4th lowest rate of filled position (62%), better than Child Abuse (52%), Peds Rheumatology (54%) and Peds ID (56%) among the 12 Pediatric Specialty disciplines in the fall match. Hopefully our starting numbers in July 2018 will be even better!

Pediatric Nephrology Match Report [Dec 2017]
1. Pediatric Nephrology Match Results: For Class starting July 1, 2018

Key Points:
1. 36 matched applicants (from pool of 39), up now 3 years in a row and nicely up from our all-time low of 21 in Dec 2014.
2. Pediatric Nephrology slots available in Match at 58 (compared to 59 in 2016 and 62 in 2015); the total number of incoming slots has been very consistent over the last 5 years.
3. Pediatric Nephrology continues to lag behind many of the other Fall Pediatric Specialty disciplines in the percentage of positions filled through the Match (only 62% of positions filled).

Of 41 ACGME accredited programs, 40 participated in the Match with the one that did not participate doing so because of funding issues with their Fellowship spots.

21 programs filled (52.5%); 19 did not completely fill (47.5%).
36 positions filled (62.1%); 22 positions were not filled (37.9%).
58 first year positions were offered through the Match.

<table>
<thead>
<tr>
<th>Pediatric Nephrology Fellowship Match Results</th>
<th>For 2018</th>
<th>%</th>
<th>For 2017</th>
<th>%</th>
<th>For 2016</th>
<th>%</th>
<th>For 2015</th>
<th>%</th>
<th>For 2014</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Matched Applicants</td>
<td>36</td>
<td></td>
<td>32</td>
<td></td>
<td>27</td>
<td></td>
<td>21</td>
<td></td>
<td>33</td>
<td></td>
</tr>
<tr>
<td>AMG</td>
<td>28</td>
<td></td>
<td>78</td>
<td></td>
<td>56</td>
<td></td>
<td>32</td>
<td></td>
<td>59</td>
<td></td>
</tr>
<tr>
<td>US Foreign</td>
<td>1</td>
<td></td>
<td>3</td>
<td></td>
<td>4</td>
<td></td>
<td>1</td>
<td></td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Osteopath</td>
<td>2</td>
<td></td>
<td>6</td>
<td></td>
<td>9</td>
<td></td>
<td>1</td>
<td></td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>IMG</td>
<td>5</td>
<td></td>
<td>14</td>
<td></td>
<td>7</td>
<td></td>
<td>22</td>
<td></td>
<td>33</td>
<td></td>
</tr>
<tr>
<td>Matched</td>
<td>36</td>
<td>92</td>
<td>32</td>
<td>97</td>
<td>27</td>
<td>96</td>
<td>21</td>
<td>91</td>
<td>33</td>
<td>89</td>
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<tr>
<td>Unmatched</td>
<td>3</td>
<td></td>
<td>8</td>
<td></td>
<td>1</td>
<td></td>
<td>3</td>
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<tr>
<td>Positions</td>
<td>58</td>
<td></td>
<td>59</td>
<td></td>
<td>62</td>
<td></td>
<td>58</td>
<td></td>
<td>61</td>
<td></td>
</tr>
<tr>
<td>Matched/Total Positions</td>
<td>36/58</td>
<td>62</td>
<td>32/59</td>
<td>54</td>
<td>27/62</td>
<td>44</td>
<td>21/58</td>
<td>36</td>
<td>33/61</td>
<td>54</td>
</tr>
</tbody>
</table>

The Communications Committee is looking for a volunteer to manage and grow the ASPN LinkedIn page. Contact Michelle Rheault (rheau002@umn.edu) or Daniel Ranch (ranch@uthscsa.edu).
2. Pediatric Nephrology Match Analysis:

- There were no substantiated Match irregularities reported to us during the interview season.
- All Pediatric Nephrology programs with available funded positions were in the match.
- There were 36 matched applicants this year compared to 32 matched applicants for 2017. This is 3 years of improvement – a positive trend.
- At 58 positions in the Match this year, this is roughly the same over the last 5 years; with 36 matched applicants the percentage of filled positions (62.1%) is up a bit again from the Matches for 2015, 2016 and 2017.

3. Fall Pediatric Subspecialty 2017 Match Results (for Classes starting in July 2018)

<table>
<thead>
<tr>
<th>Programs</th>
<th>Child Abuse</th>
<th>Dev-Behav</th>
<th>Neonatal</th>
<th>Peds Crit Care</th>
<th>Peds EM</th>
<th>Peds Endo</th>
<th>Peds GI</th>
<th>Peds Hosp Med</th>
<th>Peds ID</th>
<th>Peds Neph</th>
<th>Peds Pulm</th>
<th>Peds Rhem</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>25</td>
<td>35</td>
<td>96</td>
<td>65</td>
<td>52</td>
<td>64</td>
<td>59</td>
<td>35</td>
<td>52</td>
<td>40</td>
<td>46</td>
<td>31</td>
</tr>
<tr>
<td>Programs filled in Match (%)</td>
<td>12 (48)*</td>
<td>21 (60)</td>
<td>74 (77)</td>
<td>59 (91)</td>
<td>51 (98)</td>
<td>35 (55)</td>
<td>52 (88)</td>
<td>33 (94)</td>
<td>27 (52)</td>
<td>21 (53)</td>
<td>25 (54)</td>
<td>14 (45)</td>
</tr>
<tr>
<td>Positions in match</td>
<td>27</td>
<td>46</td>
<td>263</td>
<td>184</td>
<td>130</td>
<td>96</td>
<td>104</td>
<td>50</td>
<td>72</td>
<td>58</td>
<td>69</td>
<td>41</td>
</tr>
<tr>
<td>Positions Filled (%)</td>
<td>14 (52)</td>
<td>33 (67)</td>
<td>229 (87)</td>
<td>177 (96)</td>
<td>129 (99)</td>
<td>64 (67)</td>
<td>97 (93)</td>
<td>48 (96)</td>
<td>40 (56)</td>
<td>36 (62)</td>
<td>47 (68)</td>
<td>22 (54)</td>
</tr>
<tr>
<td>Positions Unfilled (%)</td>
<td>13 (48)</td>
<td>16 (33)</td>
<td>34 (13)</td>
<td>7 (4)</td>
<td>1 (1)</td>
<td>32 (33)</td>
<td>7 (7)</td>
<td>2 (4)</td>
<td>32 (44)</td>
<td>22 (38)</td>
<td>22 (32)</td>
<td>19 (46)</td>
</tr>
<tr>
<td>Matched Applicants</td>
<td>14</td>
<td>33</td>
<td>229</td>
<td>177</td>
<td>129</td>
<td>64</td>
<td>97</td>
<td>48</td>
<td>40</td>
<td>36</td>
<td>47</td>
<td>22</td>
</tr>
<tr>
<td>US Grads (%)</td>
<td>12 (86)</td>
<td>20 (61)</td>
<td>163 (71)</td>
<td>127 (72)</td>
<td>108 (84)</td>
<td>46 (72)</td>
<td>77 (79)</td>
<td>42 (58)</td>
<td>29 (73)</td>
<td>30 (84)</td>
<td>22 (57)</td>
<td>19 (86)</td>
</tr>
<tr>
<td>Int Grads (%)</td>
<td>2 (14)</td>
<td>13 (37)</td>
<td>66 (29)</td>
<td>50 (28)</td>
<td>21 (16)</td>
<td>18 (28)</td>
<td>20 (11)</td>
<td>6 (12)</td>
<td>11 (27)</td>
<td>6 (16)</td>
<td>20 (43)</td>
<td>3 (14)</td>
</tr>
<tr>
<td>Applicants Preferring this Specialty</td>
<td>17</td>
<td>37</td>
<td>237</td>
<td>201</td>
<td>176</td>
<td>65</td>
<td>100</td>
<td>65</td>
<td>43</td>
<td>39</td>
<td>48</td>
<td>23</td>
</tr>
</tbody>
</table>

* = %

- Pediatric Nephrology (for 2018) had the 4th lowest % of available positions filled through the Match (62%) of the 12 Fall Pediatric Subspecialties.
- Last year (for 2017) we had the 2nd lowest % of available positions filled through the Match (54%) of the 11 Fall Match Pediatric Specialties.

Submitted by: John D Mahan MD, Shamir Tuchman MD, and Susan M. Halbach MD 12.19.17

New Committee on Global Health

ASPN Council has approved formation of the Global Health Committee. The first meeting will be via conference call at 12pm Eastern on January 9th. If you are interested in joining, please contact connie@aspneph.org.

Looking for content experts

The member education committee is looking for help for their monthly webinars. During each webinar, there is a content expert who delivers a 10-15min powerpoint presentation on the topic with a few multiple choice questions. This webinar is for physician learners at all levels of experience from fellows to experienced full professor faculty so we are looking for innovative and updated information on the topics. These conferences are typically held on the first Monday of every month at 3PM EST. There is usually one practice session one week before the conference. Below are the next few topics for both pathology and radiology. If you are interested in being a content expert, please email me at Joann.Carlson@rutgers.edu.

Next Pathology webinars will cover HSP, transplant, and obesity related glomerulopathy.

Next Radiology webinars will cover ADPKD/tuberous sclerosis, nephrocalcinosis and renal tumors.
Committee Updates

Workforce Committee Update

The Workforce Committee sponsored the 3rd Annual Speed Mentoring Workshop and Job Fair at the annual ASN meeting in New Orleans on November 3, 2017. We had many fellows and faculty in attendance to discuss a wide range of topics related to career development, such as CV preparation, job search strategies and what to expect from the interview process. Many thanks to Patty Seo-Mayer for her continued leadership in making this event a success! Our next workshop will be held in Toronto at the ASPN Annual Meeting - stay tuned for more details. If you are faculty and have an interest in participating or have an open job position, please contact Patty (pseo-mayer@inova.org).

Are you a faculty or fellow interested in sharing your love of nephrology with trainees at the ASPN Annual Meeting in Toronto? We are recruiting faculty and fellow volunteers for the ASPN Resident-Student Program. Activities will kick off with a networking breakfast, where residents and students will be grouped with 2 mentors (faculty/fellow) to explore the meeting in a more personal way. Groups will also do a mentored poster walk and attend an invited science session or workshop. Residents and students who attend the meeting as recipients of the ASPN travel grant will be invited to join, but if you know of a trainee attending the meeting outside of the travel grant, please let Adam Weinstein know so they can be included. (adam.r.weinstein@hitchcock.org)

Research Committee Update

Enhancing publication success
To enhance successful review and acceptance of pediatric nephrology manuscripts, we wanted to provide a few resources for those involved with clinical studies. Prior to submission, consider reviewing these checklists that ensure your manuscript will have all the relevant tables and information. Resources that are available include:

1) the CONSORT Checklist for Clinical Trials (http://www.consort-statement.org/) for randomized controlled trials
2) the Prisma checklist http://prisma-statement.org/PRISMAStatement/Checklist.aspx for systemic reviews, and

PAS Abstracts
As a reminder, Pediatric Academic Societies abstracts are due January 3. Please remember that travel awards are available for trainees interested in pediatric nephrology. (http://www.aspneph.org/Awards/TravelAward.cfm).

Celebrating Research Accomplishments
We would like to celebrate the success of all our new grant awardees by announcing it in Kidney Notes. Please send information on new grants to the Research Committee co-chairs, Erum Hartung (hartunge@email.chop.edu), Scott Wenderfer (sewender@texaschildrens.org), and Tammy Brady (tbrady8@jhmi.edu).

Submitted by Kim Reidy and Rulan Parekh
# Pediatric Academic Societies Meeting

**May 5 – 8, 2018 | Toronto Canada**

American Society of Pediatric Nephrology (ASPN) PRELIMINARY Schedule at a Glance

**Abstract Submission Deadline: 1/3/18**

<table>
<thead>
<tr>
<th>Saturday, May 5</th>
<th>Sunday, May 6</th>
<th>Monday, May 7</th>
<th>Tuesday, May 8</th>
</tr>
</thead>
</table>
| **7:00am–8:00am**  
  Resident/Student Mentorship  
  Breakfast with Pediatric Nephrology Fellows and Faculty | **7:00am–8:00am**  
  Pediatric Nephrology in a Small Group Setting Breakfast | **7:00am–8:00am**  
  Meet the Professor Breakfast: Interactive Discussion about Home Hemodialysis - Dal Hothi | **7:30am–9:30am**  
  Poster Session IV |
| **8:00am–10:00am**  
  Invited Science: Honoring Russell Chesney - Advancing Understanding of UTI | **8:00am–10:00am**  
  Invited Science: IPHA Session | **8:00am–10:00am**  
  Original Science Abstracts  
  Hypertension (IPHA) | **9:30am–12:30pm**  
  Workshops |
| **10:00am–10:30am**  
  PAS Welcome Coffee Break | **10:00am–10:00am**  
  Invited Science: Pediatric Transplant - Past to Present to Future | **8:30am–10:30am**  
  Invited Science: It's Elementary, My Dear – Detecting the Defects in Tubulopathies | **9:45am–11:45pm**  
  Invited Science: Renal Impact of Congenital Heart Disease |
| **10:30am–12:00pm**  
  PAS Opening General Session  
  (Includes presentation of the Joseph St. Geme Leadership Award) | **10:15am – 11:45am**  
  APS Presidential Plenary and Awards | **10:15am–12:15pm**  
  SPR Presidential Plenary and Awards | **12:15pm–2:15pm**  
  Invited Science: Engaging Patients and Families to Improve Outcomes |
| **12:00pm–1:00pm**  
  PAS Opening Luncheon | **10:30am–12:30pm**  
  Workshop: The “Home Run” - Home Hemodialysis | | **EXTRA SESSION** |
| **12:15pm–1:30pm**  
  ASPN Awards Luncheon | **1:00pm–3:00pm**  
  Invited Science: Update on Diagnosis, Treatment and Interventions for Renovascular Hypertension - Jointly sponsored with IPHA | | **EXTERNAL TO PAS:**  
  Dialysis Simulation Workshop anticipated to be held at Sick Kids, proposed time 12:30-3:30pm |
| **1:30pm–2:45pm**  
  Poster Session I  
  & PAS Opening Reception | **3:00pm–4:30pm**  
  ASPN Presidential Address & Business Meeting | | |
| **3:00pm–4:30pm**  
  Original Science Abstracts  
  Nephrology I: Clinical Science | **3:45pm–5:45pm**  
  APA Membership Meeting  
  APA Debate | | |
| **5:00pm–6:30pm**  
  Workshop: Succeeding in the Real World – Insights for Fellows and Junior Faculty | **5:45pm–7:30pm**  
  Nephrology Posters II | | |
| **7:00pm–9:00pm**  
  ASPN Member Reception and 50th Anniversary Celebration, Ritz Carlton | | | |

**Exhibits Open**

<table>
<thead>
<tr>
<th>1:00pm–4:00pm</th>
<th>Networking/Exhibits Only</th>
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<tbody>
<tr>
<td>4:15pm–7:30pm</td>
<td>4:15pm–7:30pm</td>
</tr>
</tbody>
</table>

**Exhibits Open**

| 4:15pm–7:30pm |

**Posters Only (Exhibits Closed)**

| 7:00am–11:00am |
Before adjourning for the holidays, Congress passed “The Tax Cuts and Jobs Act,” a major tax-policy overhaul prioritized by the White House and Congressional Republicans. The bill passed on a partisan basis, 51-48 in the Senate and 224-201 in the House. Besides making sweeping changes to the tax system, the legislation also included several significant health provisions. The bill repeals the individual mandate starting in 2019, which may destabilize the health insurance market. It is important to remember that patient protections for insurance, like the bans on pre-existing conditions exclusions and lifetime and annual caps are maintained. The bill also allows individuals to deduct medical expenses that are more than 7.5% of their income, rather than the 10% under current law, for two years. An additional challenge is that the tax plan would trigger the “pay as you go”, or PAYGO, rule which requires Congress to offset each piece of legislation or trigger sequestered spending cuts. However, in separate legislation, Congress included language to waive the rule, averting $150 billion in cuts to domestic programs every year for the next ten years.

Congress also punted major decisions on spending and the Children’s Health Insurance Program (CHIP) into the new year. After finishing work on the tax bill, both the House and Senate passed a continuing resolution (CR) to fund the government through January 19, averting a government shutdown before the holidays. However, they do not appear close to reaching a deal to raise the budget caps, which must be done before funding levels for FY 2018 can be finalized. Republicans and Democrats disagree over whether there should be equal increases for the defense and nondefense discretionary spending caps with the Democrats in favor of maintaining parity between the two. At this point, it appears that these funding negotiations may stretch into February.

The CR also included a short term extension for CHIP through the end of March, forcing Congress to address this issue next year. The program’s authorization expired on September 30, and several states were scheduled to exhaust their funds at the end of the year or in January. While both parties support reauthorizing this program, the disagreement has been over how to fund the extension.

What the CR did not include was two provisions designed to stabilize the Affordable Care Act (ACA) insurance markets. Senator Susan Collins (R-ME) had been promised that Alexander-Murray, the legislation that restores the ACA’s cost sharing reduction payments for two years, and legislation to create a temporary reinsurance program designed to lower premiums would be considered in return for her supporting the tax bill with its repeal of the individual mandate. At this time, Senate Majority Leader Mitch McConnell (R-KY) has said these will be considered next year.

Submitted by Erika Miller
Transplantation Update

Kidney Allocation System: Since implementation of the new Kidney Allocation System 2 years ago, our community has been concerned regarding the effects on children and their access to transplant. The Pediatric Committee of UNOS will be working closely with the Kidney Committee of UNOS to perform more in-depth analyses of the data thus far to see specifically how this allocation system has affected access of highly sensitized children, adequacy of the current KDPI scoring system to identify appropriate donor kidneys for children, the effect of multiorgan transplants on pediatric access and the access of minority children. More to follow.

UNOS held its BOD meeting in early December. As an FYI, there was passage of a policy that was many years in the making and that will impact allocation of deceased donor livers and will result in allocation related not only to DSA (donor service area), but by distance from the donor hospital. Details of the proposal can be found on the Transplant Pro website https://transplantpro.org. There was also a guidance document approved for dispersal that deals with the transplantation of non-A1/non-A1B (A2/A2B) donor kidneys into blood group B candidates. Currently there is underutilization of this policy, which is meant to provide increased access to blood group B recipients (peds or adults). Policies that were NOT PASSED that had potential negative impact on pediatric kidney transplants were related to loosening restrictions on blood type compatibility for kidney-pancreas transplants. As many of you may have experienced, if you are in a DSA with a very active kidney-pancreas transplant center, these kidneys tend to be excellent kidneys from young donors, but they are diverted from children to combined organ transplants, which have priority over children in the allocation sequence. The failure to pass this policy was in large part due to the concerns voiced by the pediatric community that passage would result in even more suitable kidneys being “lost” to allocation to adults receiving kidney-pancreas transplants.

The American Transplant Congress will be held in Seattle 6/2 thru 6/6/18. The Resident/Student ATC travel grants sponsored by AST will be available on a competitive basis to help the defray the cost of attendance at the meeting for those residents or students who have expressed an interest in (but have not committed to) a career focusing in transplantation. Details regarding the application process will be forthcoming from AST. For more information about the program, contact me at smbartosh@wisc.edu.

Respectfully submitted, Sharon M Bartosh MD

Announcements

ASPN – AAP Ongoing Partnership Continues To Provide Pediatric Nephrology Specific MOC Part 4 Projects

As a result of a partnership between the ASPN and the AAP, the ASPN certification committee is pleased to report that we are continuing to offer Pediatric Nephrology specific American Board of Pediatrics Maintenance of Certification part 4 projects during 2018. Building upon the success of a pilot project during the 2nd half of 2016, the ASPN certification announced in the fall of 2017 that Vicky Norwood and Allison Redpath will each lead another group of 20 participants though a MOC project that centers around the correct identification and staging of patients with chronic kidney disease in a patient’s electronic medical record problem list. In particular, the project will seek to identify patients with normal kidney function that would fall into the early stages of CKD due to urologic abnormalities or a solitary kidney. The project opened to enrollment in late October, and it reached full enrollment within a week. These QI projects will use the AAP’s Pedialink platform in which participants will log into a website to upload and analyze their data. Participants will also use the website to provide summaries of their findings and propose strategies to improve the rate at which CKD diagnoses are accurately captured on their patients’ electronic medical record problem lists. The project will include 3 data collection/analysis cycles and will be completed in time for the participants to receive 25 points towards their part 4 MOC requirements by the end of 2018.

Building on the success of this pilot project, the ASPN certification committee plans to offer these projects on an ongoing basis and we also plan to offer a similar project based upon the correct identification of patients who are over or underweight (based on body mass index). Look for emails with announcements about when these projects will be accepting applications for enrollment.

The ASPN certification is also looking for members with QI experience (i.e., having already participated in successful QI efforts) to become QI leaders for these MOC QI projects. QI project leaders are also eligible to earn 25 part 4 MOC points. Please contact Neal Blatt (Neal.Blatt@beaumont.org), Vicky Norwood (VFN6T@hscmail.mcc.virginia.edu), or Allison Redpath (acredpath@pediatrics.wisc.edu) if you are interested in becoming a QI leader.
Dr. H. Jorge Baluarte, Professor of Pediatrics at Children’s Hospital of Philadelphia: For over 40 years, Dr. Baluarte has dedicated his career to both caring for children with CKD and training fellows who moved on to be pediatric nephrologists. His commitment to the field of pediatric nephrology is why Dr. Baluarte will be honored with the Excellence in Pediatric Care Award at the NKF Honors Awards Benefit, Thursday, March 8, 2018.

ASPN member Joseph Flynn, MD gave a plenary address introducing the new hypertension guidelines at the AAP NCE meeting in Chicago in October.

Photograph courtesy: Dr. Katherine Twombley, Medical University of South Carolina

Funded Grant Announcements

Pam Winterberg, MD, Emory University
“Role of T cells in Uremic Cardiomyopathy” (K08 DK111998) from NIDDK

EDITOR’S NOTE: Please let us know if you or someone in your division has received a research grant so we can list in KidneyNotes. Send announcements to info@aspneph.org.
HEMODIALYSIS (HD) SIMULATION WORKSHOP AT PAS
In conjunction with our 2018 annual meeting in Toronto, Canada, ASPN will offer an innovative learning experience, a special Hemodialysis (HD) Simulation Workshop. This workshop has been offered at other venues and been extremely well received. The workshop will be held on Tuesday, May 8, 2018 at the Hospital for Sick Children (~15 minute walk from the Toronto convention center) from 12:30-3:30 pm. Registration is limited. Click here for details.

ONLINE BOARD REVIEW COURSE - REGISTER NOW
Register now for the ASPN Online Board Review Course
https://www.aspneph.org/Meeting/Board_Review_Course.cfm

IPNA WORKSHOP ON DEVELOPMENTAL NEPHROLOGY APRIL 22-26, 2018
April 22-26, 2018
IPNA Workshop on Developmental Nephrology
The Dead Sea, Israel: https://iwdn.ipna-online.org/scientific-program-glance

ASPN PATHOLOGY WEBINAR – JANUARY 8
The next ASPN Pathology Webinar will be held on Monday, January 8th at 3pm ET.
Topic: 13yo Male with Elevated Blood Pressures

The ASPN Member Education Committee invites you to attend our monthly renal pathology interactive webinars/discussions. These will feature a new case each month with pathology presented by Dr. Patrick Walker of Nephropath and a content expert from the ASPN membership. The sessions will typically be the 1st Monday of each month at 3PM Eastern. To join the meeting click: http://aspn.adobeconnect.com/renalpath/

Adobe connect is easy to use and gives you the option of listening to the audio via your phone or your computer. You will be able to see the slides and ask questions via your computer. You can test out the link above now to make sure you have no problems connecting. For audio you can call in to the following number: US (Toll Free): 1-866-876-6756; you’ll need the Participant Code: 9576988798
When you become a member, you will have access to a special section on our website giving you access to useful and valuable resources and tools:

- Employment Center
- Practice Management resources
- Legislation, Regulation and Compliance information
- Patient Care resources and education

To join, visit www.renalmd.org.

Fellows can join RPA for FREE!

When you become a member, you will have access to a special section on our website giving you access to useful and valuable resources and tools:

- Employment Center
- Practice Management resources
- Legislation, Regulation and Compliance information
- Patient Care resources and education

To join, visit www.renalmd.org.

Fellows Travel Grant Applications Due December 31, 2017

https://pediatrics.med.miami.edu/nephrology/seminar

American Society of Pediatric Nephrology

SAVE THE DATE

45th MIAMI PEDIATRIC NEPHROLOGY SEMINAR and 5th Renal Pathology MARCH 8–11, 2018 ALEXANDER HOTEL MIAMI BEACH, FLORIDA

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KIDney NOTES
The Bi-Monthly Newsletter of the American Society of Pediatric Nephrology

ASPN Leadership