

Office of Faculty Development Newsletter

Leadership Named at New SLCH Specialty Care Center



Robert Rothbaum, MD, Centennial Professor of Pediatrics, has been named as the Department of Pediatrics' Medical Director at the new St. Louis Children's Specialty Care Center (aka OPAC), which will open in June 2015 in West County.

The St. Louis Children's Specialty Care Center will establish a new paradigm for delivering patient-centric, highly efficient care of the highest quality. This will differentiate SLCH and WUSM in the community and will be critical to the success of this new facility. As the Department of Pediatrics' Medical Director at the new facility, Dr. Rothbaum will be an important part of the leadership team that works towards this overall goal.

Dr. Rothbaum, a consummate clinician,

is a specialist in gastroenterology and highly regarded communicator with our primary care colleagues. As such, he will lead our Department of Pediatrics activities at the new center and he will serve as a member of the overall facility leadership team.

Ambulatory surgery is a key program in enabling us to achieve our goal at OPAC. To this end, we are pleased to announce that **Dr. Daniel Nieva** (Pediatric Anesthesiology) and **Dr. David Leonard** (Pediatric Otolaryngology) have been appointed Surgical Co-Directors to lead the perioperative and surgical services at the Specialty Care Center in partnership with SLCH. As Surgical Co-Directors Dr. Nieva and Dr. Leonard will work WUSM pediatric surgeons to optimize throughput of the operating rooms and related perioperative services.

Elward Appointed Associate Chief Medical Officer of SLCH

Alexis Elward, MD has been appointed the Associate Chief Medical Officer at SLCH. Dr. Elward was selected because of her experience in patient safety and clinical quality and her advanced training in process improvement and change management.

In this role Dr. Elward will spend 50% of her time providing physician leadership for the clinical quality and patient safety initiatives of SLCH. She will work closely with hospital and physician leaders, WUSM, and BJC Center for Clinical Effectiveness (CCE) to ensure high patient satisfaction,



safety, clinical quality, and cost effective care. Dr. Elward will report to F. Sessions Cole, MD, Chief Medical Officer.

Dr. Elward is currently an Associate Professor of Pediatrics at WUSM and the Medical Director of Infection Control at SLCH. She is board certified in pediatrics and has subspecialty certification in pediatric infectious diseases. Dr. Elward has served on the hospital infection control practice advisory committee and the advisory committee on immunization practices of the CDC and Prevention.

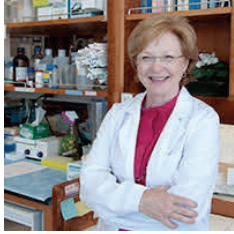
Office of Faculty Development

[Brian Hackett](#), MD, PhD, Director
[Bess Marshall](#), MD, Associate Director
[Janet Braun](#), Program Coordinator, 454-4952



Faculty News

Dinauer Named AAAS Fellow



Mary Dinauer, MD, the Fred M. Saigh Distinguished Chair in Pediatric Research and professor of pediatrics, has been named a fellow of the American Association for the Advancement of Science (AAAS), the world's largest general scientific society. Dinauer is being recognized for her distinguished contributions to understanding the enzyme defect in chronic granulomatous disease — a life-threatening genetic disorder in which certain immune system cells are unable to kill some types of bacteria and fungi — and developing strategies for gene therapy to treat the disorder.

Dinauer, who is also a professor of pathology and immunology, serves as scientific director of the Children's Discovery Institute. The institute, a partnership between SLCH and WUSM, was created in 2006 to speed discoveries in children's medicine. As the institute's director, Dinauer has worked to build collaborative research partnerships across many scientific departments at the university.

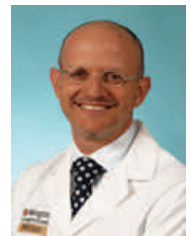
Dinauer's many recognitions include honors from the Association of American Physicians, the American Society of Clinical Investigation and the American Academy of Pediatrics.

Leadership Change in Emergency Medicine

David Jaffe, MD will be leaving Washington University School of Medicine / St. Louis Children's Hospital to become the first chief of the new Division of Pediatric Emergency Medicine at University of California, San Francisco, on February 1, 2015. Dr. Jaffe will create a new Division of Pediatric Emergency Medicine within the Department of Emergency Medicine. His move to UCSF is coincident with the opening of the new Benioff Children's Hospital at Mission Bay. Dr. Jaffe has been our Division Director of Emergency Medicine for 24 years and led our Division to be a nationally prominent center for patient care, clinical research and education. He has a superior record of training and mentoring junior trainees and faculty in pediatric emergency medicine. He will be an excellent leader for UCSF as they develop a Pediatric Emergency Medicine program.



Kim Quayle, MD, Professor of Pediatrics and Clinical Director of Emergency Medicine, will become interim Division Director of Emergency Medicine. Dr. Quayle, is an outstanding clinical leader in pediatric emergency medicine.



To complement Dr. Quayle's leadership of the Division, **David Schnadower, MD** has been appointed Associate Division Director for Research in the Division of Emergency Medicine. He will also continue his outstanding role as Fellowship Director.

Donald V. Huebener, DDS Retires

On November 1, 2014 Dr. Huebener retired from his role as a pediatric dentist specializing in cleft lip and palate and craniofacial anomalies and reconstructive surgery. Dr. Huebener will continue to serve as a consultant to these specialties after his retirement.

Dr. Huebener speaks nationally on behalf of St. Louis Children's Hospital and was instrumental in the development and continued success of the pediatric dental program. Most significantly he spent his career at SLCH advocating for children with few options for dental care. His patients love him as do all of his co-workers and friends here at SLCH.

Promotions



Dennis Dietzen, PhD, is promoted to Professor of Pediatrics on the Clinician Track. Dr. Dietzen earned his bachelor's degree at Marian College and his PhD at Indiana University School of Medicine before coming to Washington University for a postdoctoral fellowship in Clinical Chemistry. Dr. Dietzen is the Director of the St. Louis Children's Hospital Core Laboratory and the Metabolic Genetics Laboratory. He is also Lab Director of the Washington University Clinics at Barnes-Jewish West County Pediatric Clinics. In addition he is responsible for laboratory consultation.

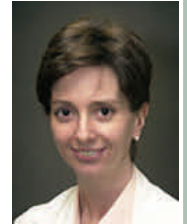
His expertise is needed to inspect and provide patient-specific interpretation for each metabolic profile and has been instrumental in identifying extremely rare cases of inborn metabolic disease that were either misdiagnosed or undiagnosed at other institutions (HHH syndrome and lysinuric protein intolerance). Dr. Dietzen has expanded the lab's capacity for mass spectrometry and developed methods for measurement of cyclosporine, tacrolimus, and sirolimus as well as an assay to quantitate indomethacin in patients undergoing therapy for patent ductus arteriosus. With expanding utilization of novel circulatory assist devices at SLCH, Dr. Dietzen has incorporated new instrumentation and methods to monitor heparin (anti-Xa), fibrinogen, antithrombin, d-dimer concentrations and 6 thromboelastographs. He oversees the point of care testing in the ED as well as developing the lab for the new Pediatrics Specialty Clinic on Mason Road. Dr. Dietzen's educational contributions include supervision of Laboratory Medicine residents, medical students and Clinical Genetics and Molecular Genetics fellows, and Pediatric Pathology fellows, including supervising fellows in applied clinical research projects. Five of his trainees now serve as lab directors at Lurie Children's Hospital, Northwestern University; Mercy Children's Hospital, Kansas City; Cook Children's Hospital, Fort Worth, Texas; and our own Sarah Brown, PhD, here at St. Louis Children's Hospital.

His extensive community service includes serving as Editor of *The Monitor*, the newsletter of the Pediatric and Maternal/Fetal Division of the American Association for Clinical Chemistry (AACC); a member of the Pediatric Reference Range Subcommittee of AACC; the AACC Government Relations Committee (2008-2012) and the Committee on Laboratory Management Practice Guidelines for follow-up testing of Positive Newborn Screening Results for the National Academy of Clinical Biochemistry. He was the Vice Chair of the 2010 Annual AACC Meeting and Chair of the 2013 meeting, the largest clinical laboratory meeting of its kind with greater than 20,000 attendees. He is currently on the AACC Board of Directors. He was awarded the AACC Award for Outstanding Contributions to Pediatric Clinical Chemistry, 2012.

Alexis Elward, MPH, MD, is promoted to Professor of Pediatrics in the Division of Infectious Diseases on the Clinician Track. After earning her bachelor's degree from Loyola College and her MD from the Universi-

ty of Maryland School of Medicine, she came to St. Louis Children's Hospital as a resident, chief resident, and fellow, joining the faculty in 2001. One of her major interests has been hospital-acquired infection prevention. In 2006, she became the medical director of Infection Control for SLCH.

Her work on Bloodstream Infection prevention in Pediatric Intensive Care Unit patients started during her fellowship and has been presented at national scientific meetings including the Society for Healthcare Epidemiology of America, The Interscience Conference on Antimicrobial Agents and the Infectious Diseases Society of America, and published in *Pediatrics*, *Infection Control*, *Hospital Epidemiology* and *The Lancet*. The scientific studies have formed the basis for changes in hospital policies and establishment of quality improvement teams in the PICU/CICU and NICU, of which Dr. Elward is the leader. As a result of her work, NICU, CICU and PICU bloodstream rates have fallen by 80% since 2006 with 2,261 days of intensive care unit stay and 38 deaths averted resulting in an estimated cost savings of over four million dollars. Dr. Elward's work on Hand Hygiene, initially funded by the CDC, has expanded to cover 6 BJC hospitals and results in improvement in hand hygiene adherence from 18% in 2002 to 98% in 2013. Dr. Elward's other research interests include ventilator-associated pneumonia, surgical site infection prevention, and catheter-associated urinary tract infection prevention.



Outside the medical school, Dr. Elward is well-recognized due to her leadership during significant hospital outbreaks and community events. She led the investigation of a Salmonella Javiana outbreak affecting 513 hospital personnel in June, 2003, publishing her results in *Infection Control and Hospital Epidemiology*. In collaboration with the health department and the GI division, she developed guidelines for medical management of Shigella during the community outbreak in 2007, and she served as co-incident commander during the investigation of acute anaphylactic reactions among pediatric hemodialysis patients in January of 2008, which, in collaboration with the Centers for Disease Control and Prevention, led to an international recall of contaminated heparin. The investigation was published in CDC's *Morbidity and Mortality Weekly Report* and the *New England Journal of Medicine*. She also served as the medical technical specialist in the St. Louis Children's Hospital Command Center during the H1N1 pandemic.

Dr. Elward served as the liaison between the Pediatric Infectious Diseases Society (PIDS) and the Society for Healthcare Epidemiology of America (SHEA) and is the only pediatrician on the CDC's Hospital Infection Control Practice Advisory Committee. Dr. Elward has published nine invited and 25 peer-reviewed publications and has been invited to speak at many national and international scientific meetings.

Promotions

Bess Marshall, M.D. is promoted to Professor on the clinician-educator track in the Division of Endocrinology and Diabetes.



Dr. Marshall obtained her Bachelor of Science and Doctor of Medicine degrees from Vanderbilt University. After completing residency in pediatrics at the University of Texas, Southwestern, she came to Washington University School of Medicine in St.

Louis where she completed fellowship training in pediatric endocrinology. She joined the faculty in the Department of Pediatrics at Washington University after completion of her fellowship training in 1993.

Dr. Marshall is an active presence on the clinical services managing both the inpatient and outpatient care of patients on the endocrinology and diabetes service. Additionally, she serves as an attending on the general pediatrics wards. In addition to the clinical responsibilities of endocrinology and general ward attending, she participates in the education of medical students, pediatric house staff and fellows in pediatric endocrinology.

Dr. Marshall has a long-standing interest in the regulation of glucose metabolism. She worked in the laboratory of Alan Cherrington, Ph.D. at Vanderbilt University examining the metabolic action of glucoregulatory hormones. As an endocrinology fellow, she trained with Mike Mueckler, Ph.D. in the Department of Cell Biology and Physiology at Washington University School of Medicine making important observations on glucose transport proteins. She has continued her interest in glucose metabolism as medical director of the Washington University Wolfram Research Clinic. She is the recipient of funding from the National Institutes of Health, American Diabetes Association, and the Washington University Institute for Clinical and Translational Studies.

Since 2008, Dr. Marshall has been the Associate Director of the Department of Pediatrics Office of Faculty Development. This office provides support for faculty members in the Department of Pediatrics by providing programs for professional and personal development.

Kathryn (Katie) Plax, MD is promoted to Professor of



Pediatrics in the Division of Adolescent Medicine. Dr. Plax received her bachelor's degree from Brown University and her MD from the University of Rochester and residency at Boston Children's Hospital. Currently she is the Director of the Division of Adolescent Medicine. With a focus is on changing health for disadvantaged popula-

tions. She was instrumental in development of the SPOT (Supporting Positive Opportunities with Teens) a youth specific drop in center, to serve the health and social service needs of 13-24 year olds This model came from Dr. Plax's experience of providing medical care to adolescents who rarely access traditional medical services; those with HIV infection, high risk behaviors, runaways, "street youth" and in the foster care system. She is engaged in collaborative planning with the state, county and city health departments to combat the spread of STD's and HIV. Dr. Plax has spoken at the Governor's Blue Ribbon panel and rewritten poli-

cy for youth in medical foster care.

Dr. Plax works with Pediatric residents, Brown School of Social Work students, Ob/Gyn residents, and medical and nursing students. Juan Pena, PhD and Dr. Plax offer the first Adolescent Health course in the region at the Brown School of Social Work for the combined MSW/MPH degree and has a joint faculty appointment in the Brown School of Social Work. Dr. Plax developed the Pediatricians in Community Program for residents to learn more about children in poverty and with special health care needs. Efforts to engage resident and physician leaders nationally have taken place through the Community Pediatrics Training Initiative (CPTI) at the AAP. Dr. Plax served as one of five pediatrician coaches around the country who were selected and served as coaches to community pediatrics and advocacy programs. She also held workshops at PAS that included federal department leadership to support transformation in residency education. To date, CPTI has touched over 80 residency programs in pediatrics and is working with national funders to continue this work over the next three years. Because of Dr. Plax's leadership in this arena she was chosen to serve on the AAP Poverty work group to engage pediatrics in the work to transform child poverty in the US.

In the research arena, Dr. Plax has been instrumental in the success of the CHOICE project, a large health study seeking to understand contraception choices and reasons for discontinuation led by Jeffrey F. Peipert, MD, MPH, MHA, Professor in the Department of Ob/GYN and Vice Chair of Clinical Research; an imaging study to understand the differences in brain structure, function, and biological markers of risky decision-making among adolescents leading to new approaches to diagnosing and treating HIV led by Beau Ances, MD, PhD, in Neurology; and a study improving the STI screening methods to decrease the current percentage of missed diagnoses of sexually transmitted infections working with Faiza Ali, MD, in Pediatric Infectious Diseases.

Dr. Plax is a nationally recognized expert in reaching underserved youth populations. the American Public Health Association, at the National Ryan White 2011 Clinical Care Conference and also at the Pediatric Academic Society Workshop, May 2012. She presented alongside the Surgeon General, Dr. Regina Benjamin, at the Congressional Black Caucus Foundation meeting in 2012. Dr. Plax also participated with others on a published account of the positive effects in reaching underserved youth with mental health services at The SPOT. (*Mental health care utilization at a free drop-in youth center in St. Louis, Missouri.* Mo Med. 2012 Nov-Dec; 109 (6):475-81.

For two years Dr. Plax was supported by the Soros Foundation to work in partnership with community organization in Missouri to make it easier for youth to enroll in Medicaid, a policy called presumptive eligibility, which was passed in Missouri after her campaign. She served as the MO AAP legislative chair from 2004-2011, vetting bills, testifying at hearings and writing letters to the editor. Dr. Plax worked on two tobacco tax campaigns. She serves on the Healthcare Oversight Committee the state created to better meet the needs of youth in foster care.

Promotions



Mythili Srinivasan, MD, PhD, is promoted to Associate Professor of Pediatrics in the Division of Hospitalist Medicine on the Clinician Track. Dr. Srinivasan earned her BS at Stella Maris College, her MSc at Madurai Kamaraj University, School of Biological Sciences, and her MD and PhD at Saint Louis University School of Medicine, followed by Pediatric Residency at Cardinal Glennon Children's Hospital.

Sedation for outpatient procedures has been a particular interest for Dr. Srinivasan, and she has worked to develop a nitrous sedation protocol for VCUG, Botox injection for children with cerebral palsy and placement or removal of histrelin implants for children with precocious puberty. In addition she developed a self-assessment teaching tool/survey for the two most commonly used procedural sedation agents, ketamine and nitrous oxide in order to identify knowledge gaps in pediatric hospitalist sedation providers and develop strategies to address those gaps, using that information to assess for knowledge gaps. This work has resulted in five publications in the *Journal of Pediatrics* and *Hospital Pediatrics* and the addition of an education component to the Division of Hospital Medicine core curriculum.

In addition to the work in sedation, Dr. Srinivasan has initiated a research study analyzing the rate of complications during circumcisions performed by pediatric hospitalists, is serving as a member of a research team involved in a retrospective study of sedation in the PAWS unit, is the site leader for a multi-site PCORI funded research project comparing the effectiveness of oral antibiotics vs. intravenous antibiotics for home antibiotic therapy after hospitalization for complicated pneumonia, ruptured appendicitis, or osteomyelitis. She won the Award for best research poster at the Academic Hospital Medicine Leadership Summit, Society for Hospital Medicine, Washington, DC, in 2010.

Her community service includes serving as Director of the Hospitalist Circumcision Service, Co-Director of the Quality subcommittee for SLCH procedural sedation and Director of Hospitalist Sedation Services at the Ambulatory Procedure Center as well as the Director of Research Development and Scholarly Activity in the division of Hospitalist Medicine. She Created a National Pediatric Hospitalist contact data base that has been used by investigators at two other institutions.



Yumi Turmelle, MD Yumi Turmelle, MD is promoted to Associate Professor of Pediatrics in the Division of Gastroenterology on the Clinician Track. She obtained her Bachelor of Arts from the University of Miami and her MD from the University of Florida College of Medicine. She completed pediatric residency at Jackson Memorial Hospital/ University of Miami, then pursued a Pediatric Gastroenterology and Nutrition Fellowship and an additional year of training in Pediatric Transplant Hepatology at Washington University School of Medicine. She currently is the Medical Director of the Pediatric Liver Transplant program at St. Louis Children's Hospital and recently completed a Master's of Science in Public Health at Saint Louis University School of Public Health. Dr. Turmelle's clinical interest is in liver disease and transplantation. Her research interests include pediatric cholestatic liver diseases, outcomes after liver transplantation and immune tolerance following transplantation. Her work has been supported by the NIH and currently serves as Washington University site PI for a multicenter clinical trial focusing on immunosuppression withdrawal trial in stable pediatric liver transplant recipients. Dr. Turmelle's community service has included participation in the Admissions Committee for the School of Medicine as well as the GME committee. She serves as the fellowship director of the pediatric gastroenterology fellowship and recently completed a three-year term in the Faculty Diversity Committee.

Celeste Capers, MD, is promoted to Assistant Professor of Pediatrics in the Division of Critical Care Medicine on the Clinician Track. After earning her BA at Wellesley College and her MD at the University of Iowa Carver College of Medicine, Dr. Capers came to St. Louis Children's Hospital for her Pediatrics Residency and served as Chief Resident, then remained at Washington University for her fellowship in Critical Care. She joined the faculty in 2009 and is the Medical Director of the St. Louis Children's Hospital Transport Team, which has developed a protocol for transporting patients on ECMO under her leadership.



Her community service includes serving as Director of the Hospitalist Circumcision Service, Co-Director of the Quality subcommittee for SLCH procedural sedation and Director of Hospitalist Sedation Services at the Ambulatory Procedure Center as well as the Director of Research Development and Scholarly Activity in the division of Hospitalist Medicine. She Created a National Pediatric Hospitalist contact data base that has been used by investigators at two other institutions.

Research

University, Children's Join National Network to Study Preterm Birth

Washington University, Children's Hospital and the March of Dimes are launching the March of Dimes Prematurity Research Center. During the next five years, the March of Dimes will invest \$10 million in the center. The research effort will feature a transdisciplinary approach to discovering the causes of preterm birth to develop new strategies for prevention.

Alan Schwartz, PhD, MD, the Harriet B. Spoehrer Professor, chair of the University's Department of Pediatrics and pediatrician-in-chief at St. Louis Children's Hospital, and Sarah England, PhD, will serve as associate program directors of the center. Dr. England Justin Fay, PhD, Erik Herzog, PhD, and Emily Jungheim, MD, will lead a team that will determine if disruptions of sleep patterns (related to circadian rhythms) are

a risk factor in preterm birth.

One day, this research might lead to preterm prevention strategies such as melatonin to regulate sleep or bright light therapy in high-risk women. England is a professor of obstetrics and gynecology, and Fay is an associate professor of genetics. Herzog is a professor of biology, and Jungheim is an assistant professor of obstetrics and gynecology and a Washington University Institute for Public Health Scholar.

F. Sessions Cole, MD, chief medical officer at St. Louis Children's Hospital and a March of Dimes National Trustee, said he hopes the research the new center supports will find better ways to prevent premature birth so the epidemic of preterm birth will end.

I-PASS Reduces Medical Errors by 30%

Improved communication among health-care providers during shift changes reduced injuries due to medical errors by 30 percent, according to a federally funded, multicenter study.

Co-author **F. Sessions Cole, MD**, said "This study suggests that a standardized process along with education and information technology support can reduce medical errors."

The research, reported Nov. 6 in *The New England Journal of Medicine*, was led by researchers from Boston Children's Hospital and Harvard Medical School and included physicians at WUSM.

The program is called I-PASS, and the

mnemonic is intended to help personnel recall steps for properly communicating important patient information during a shift change. I-PASS stands for *illness severity, patient summary, action list, situational awareness* and contingency planning, and *synthesis* by receiver.

"These findings across nine different academic pediatric programs suggest they are generalizable," added Cole, "We are excited about using the I-PASS approach to continue to improve patient safety." The I-PASS curriculum is available online to the public at no cost:

ipasshandoffstudy.com [Read more....](#)

Research Funding



Pilot Grant Funding for Research in Preterm Birth

The March of Dimes Prematurity Research Center at Washington University in St. Louis (*The Center*) announces a **Transdisciplinary Developmental Funding Program** for investigators with a faculty appointment of Instructor and above to support early-stage, innovative research in preterm birth at Washington University. *The Center* was established in November 2014 to study multiple aspects of preterm birth, including three thematic areas: Cervical Remodeling during Pregnancy, Electrical Maturation of Uterine Smooth Muscle, and The Role of Circadian Rhythms in Preterm Births. *The Center* fosters discoveries in other novel areas of preterm birth research through this pilot grant-funding program. Researchers in any discipline within the Washington University community are encouraged to explore high-risk ideas related to preterm birth that will generate preliminary data for subsequent extramural applications to the NIH or to non-governmental foundations.

Pilot grant funding will be for one year at \$25,000 with matching funds of \$25,000 expected from the Department Chair sponsoring the faculty member. A second year of support will be based on a progress report, yielding a potential for \$100,000/grant.

The electronic application must use forms from NIH SF424 Application Guide, available at <http://grants.nih.gov/grants/funding/424/index.htm>. Submissions will be reviewed for the hypothesis tested, the science and innovation of the proposal, the likelihood for translational research, and the potential for extra-mural funding.

1. Application Face Sheet¹
2. Budget Page and Justification (Funding cannot be used to support faculty salary.)
3. NIH-formatted biosketch (09-06 version) and Other Support page
4. The Research Plan (not to exceed four pages excluding Appendices)
 - a. Specific Aims
 - b. Significance to Preterm Birth Research
 - c. Innovation
 - d. Approach
 - e. Potential for progression to translational studies
 - f. Plans for subsequent application for extramural funding
 - g. Appendices
 - i. References (maximum 1 page)
 - ii. Pertinent publications (maximum 3)
 - iii. A letter from the Department Chair committing to matching funds
 - iv. Letter of support from consultants, collaborators, or faculty advisors
5. Awardees will submit a progress report 10 months after initiation of grant funding. The second year of support will depend upon progress made.
6. Each awardee will present at the yearly meeting of *The Center's* internal and external advisory committees and at *The Center's* annual retreat.

¹Copies of approved compliance forms pertinent to the project are required before awards are released to successful applicants.

Please submit to chubizj@wudosis.wustl.edu by 5 pm January 30, 2015. Awards will be announced by February 28, 2015, with funding to begin March 15, 2015. Questions: nelsondm@wudosis.wustl.edu or hackett@kids.wustl.edu

Research

Picture Emerges of How Kids Get Head Injuries

Kimberly S. Quayle, MD, professor of pediatrics was the first author of a study of more than 43,000 children evaluated for head trauma appeared Nov. 13 in *The New England Journal of Medicine*.

In children ages 12 and younger, falls were the most common cause of head injuries. In children under age 2, falls accounted for 77 percent of such injuries; in those 2-12, falls were the cause of 38 percent of head injuries. However, the causes of such injuries in children ages 13-17 were more varied: assaults, sports activities and motor-vehicle crashes. Previous research has shown that traumatic brain injuries are the leading cause of death and medical complications in children older than 1 year. But details about such injuries — from how they're caused to what role age might play — have been lacking.

"The detailed information from this very large prospective study is not available from any other source," said senior author Na-

than Kuppermann, professor and chair of emergency medicine at UC Davis and principal investigator of the initial study.

Of the 43,399 patients in the study, 98 percent were determined to have mild head trauma. During diagnosis and treatment, however, cranial CT scans were performed on 37 percent of the children — many arguably unnecessarily, given the nature of the injuries, Quayle said subjecting patients to doses of radiation that may increase the risk of cancer later in life.

The CT scans taken of children in the study revealed that traumatic brain injuries were identified in only 7 percent of the children scanned, suggesting that CT scans may be over-used during diagnosis. An additional 3 percent had skull fractures without brain injuries. "Criteria that suggest a low risk of traumatic brain injury and observing a child before resorting to a CT scan can reduce the use of unnecessary scans" Quayle said. [More...](#)

Telephone Coaches Improve Asthma Treatment

The *Journal of Allergy and Clinical Immunology* has published the results of an asthma treatment program. First author, **Jane Garbutt, MD**, a professor of medicine and senior author, **Robert Strunk, MD**, professor of pediatric reported a novel program at WUSM suggests that peer trainers who coach parents over the phone on managing their children's asthma can sharply reduce the number of days the kids experience symptoms. The program also dramatically decreased ER visits and hospitalizations among low-income children with Medicaid insurance.

During a series of brief calls, the peer trainers taught parents new skills such as how to give medications effectively encouraged parents to take their children to primary care physician appointments and provided support to help parents better manage their children's asthma. Parents chose a topic for each conversation, which lasted 10 minutes on average.

After one year of telephone coaching, families in the peer training group reported on average that their children experienced an additional three weeks without asthma symptoms,

compared with children in the other group. Children with Medicaid insurance showed a similar reduction in asthma symptoms and had 42 percent fewer ER visits and 62 percent fewer hospitalizations. These reductions lasted through a year of follow-up without any further contact with the peer trainers.

Garbutt estimated that every dollar spent on this new program for children with Medicaid insurance could save \$3 by preventing ER visits and hospitalizations.

Garbutt said the researchers found out that most parents weren't aware if their children were having asthma symptoms. The study motivated many parents to start a notebook of daily symptoms, talk to their children's teachers and treat their children's asthma daily, as opposed to waiting until symptoms were severe.

"The peer-training approach makes so much sense because it can help parents overcome barriers that prevent effective use of medications and other issues that interfere with asthma care," said Strunk. [More...](#)

Research

Research Awards

PI	Award	Title
DeBosch, B.	WashU NORC/Pilot and Feasibility Program	Metabolic Regulation by Hepatic GLUTB
Dharni-dharka, V.	NIH/UM1/Nationwide Children's Hospital	Integrative Proteomics & Metabolomics for Pediatric Glomerula Disease
Hayashi, R.	CHOP/ Children's Hospital of Philadelphia	Cookies for Kids' Cancer Phase I Supplemental Reimbursement
Hayashi, R.	CHOP	Workload Intensity: COG Chair
Hayashi, R.	CHOP	Per Case Reimbursement: NIH COG Chair Grant
Hickey, C.	NIH/K12/PSDP/Cincinnati Children's Medical Center	Defining Host-Microbial Interactions that Trigger Inflammatory Bowel Disease
Kozel, B.	ICTS	Contribution of Vascular Stiffness to Abnormal Neurodevelopment in Elastin Insufficiency and Williams-Beuren Syndrome
Patel, M.	NIH/UO1/University of PA	Maturational Phenotype of Right Ventricle as Premature Infants Lung Disease
Pineda, J.	SLCH Foundation/ Research Grant	Pediatric Neurocritical Care Program
Spinella, P.	DOD	Tranexamic Acid Mechanisms and Pharmacokinetics in Severe Traumatic Injury
Spinella, P.	NIH/R01/UCSF	Coagulation and Fibrinolysis in Pediatric Insulin Titration Trial
Storch, G.	HRSA	Coordinated Services and Access to Research for Women
Tarr, P.	Gates Foundation/Global Health Grant/Queen Mary University of London	Environmental Enteropathy in Zambia: Biomarkers Defined by Pathogenesis
Wambach, J.	American Thoracic Society	Mechanisms of Surfactant Dysfunction Among Infants with ABCA3 Mutations

Save the Date

[Register Here](#)

Clinician Educator Portfolio Workshop

A brief presentation on clinician educator portfolios followed by consultation with faculty experts.

Presented by: Department of Pediatrics Office of Faculty Development

Friday, February 6, 2015
3:00 – 5:00 p.m.
SLCH 5S28

Please bring your Educator Portfolio
(Samples are available in Office of Faculty Development.)

To view contact:
Janet Braun
braun_j@kids.wustl.org
454-4952

Faculty Facilitators:

Alan L. Schwartz, Ph.D., M.D.
Brian P. Hackett, M.D., Ph.D.
Bess Marshall, M.D.
Lisa Moscoso, M.D., Ph.D.
Kim Quayle, M.D.
Cassandra Pruitt, M.D.
Middy Estabrook, M.D.



Work Life Balance

How Do You Balance the Holidays and Work?

The holidays are generally a time filled with festivities and good cheer. So, who wants to work? Probably not many of us, but in all seriousness, we still need to get the job done despite the holidays and all their inherent distractions. Here's are examples of how other busy professionals tackle the season.

The Importance of Family

Relax, relate and release. This is the time to catch up with old friends, stop and have a cup of herbal tea and catch up on family issues.

I always try to plan ahead. The holidays come once a year, and it is a very special time for family. Work will be there!

At all times, but especially during the holidays, there is one rule that must not be broken: Leave your job at work! Bringing home those irritations, challenges and worries that occupy you all day long at work can grossly interfere with holiday fun. By checking them at your workplace door, you free up off time to enjoy friends and family. Don't let it eat up your fun time.

Make a Master Plan

Balancing the holidays and the demands of the job is easy if everything is written down. Of course, keeping a day planner with important events and dinners written down is the easiest first step. Then around these events, I schedule into the day planner grocery shopping, gift shopping, etc. Online gift shopping always makes the best use of time, and this can be done on the lunch hour. Also, to stay organized, I keep a small notebook with a list and running tally of everyone I purchase gifts for. In that manner, no one is forgotten, and finances are kept in check. My children are included in the notebook also. I even plan the day I can get Christmas cards out and wrap presents. This may seem overboard, but with two preschoolers, it is necessary.

Find Time to Shop

I capitalize on the efficiency of the Internet to do a lot of shopping these days. This way, I am not taking as many extended lunches for shopping, and whatever I need is dropped off at my doorstep (or my job, depending on which address I use). Also, I am a night person, so I do a great deal of my sorting, wrapping, crafting, etc. between 11 p.m.

and 1 a.m. I don't usually take a lot of time off during the holidays, because the office is virtually empty. This allows me a little downtime during the day, so I'm ready to do my night owl thing later on!

I take some time out of every lunch break to go to the store and buy something holiday-related. I start this the first week of November. Then I go home before I pick up the kids and wrap it. That way, when I take that one day for the big bang of purchases, it has diminished dramatically, and it becomes a manageable event, with a stop for a quick lunch, too -- my reward for dividing it up so successfully.

In August right before school, I have my nine nieces and nephews and my four children make lists of everything they think they can't live without. Then I talk to my mom and ask her what she would like or I give her some options. I look online, find the best price and go for it. I have a late day every Wednesday when I work from 9:30 a.m. to 6 p.m. I get up at my normal time: 5:30 a.m. At 7, I am at the stores. This way, I don't have to take time off, nor am I in anyone's way. The stores are so peaceful -- all you hear is carts packed with more stock just for us to buy. You can get up each and every aisle with no brushing carts, no excuse me, no kids running out in front of you trying to get that toy. You can shop in the clearance section with no interruptions. From 7 a.m. to 9 a.m., I get all I can. If I need help, I ask. Don't be afraid to ask; that is what they are there for -- to help you, the consumer. Enjoy yourself, and have fun shopping for the little munchkins.

One Special Holiday

Being a nurse for 30 years, working mostly night shifts, I soon realized I could not make every holiday spectacular. So at the beginning of the year, I pick one holiday I will celebrate with pizzazz! If you request your holiday early, you are seldom disappointed. This year, it's Thanksgiving, and all plans are made for a great event.

