



The SOOp Box

Section on Ophthalmology

Newsletter

<https://tinyurl.com/AAPOphthal>

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®

Spring 2024

In This Issue

Chairperson's Report.....	1
SOOp Sponsored Events @ AAPOS.....	2
New Resources @ HealthyChildren.org.....	4
Call for Abstracts for 2024 NCE.....	4
Recently Seen in Pediatrics, Pediatrics in Review, AAP News, AAP Grand Rounds, & NeoReviews.....	5
AAP Pediatric Surgical Specialties Alliance Newsletter.....	5
Section Chairperson-Elect, Dr. Sylvia Yoo, Graduates from AAO Leadership Development Program.....	5
New Research: International Consensus Statement on Sport-Related Concussion Summarizes Pediatric Findings.....	6
AAP Warns of Climate Change Impacts on Children in Guidance Update.....	7
AAP Provides Guidance on Collaborative Care of Hospitalized Children.....	8
AAP Issues Guidance on Supporting a Family After the Death of a Child or Adolescent.....	8
AAP Receives Grant from Robert Wood Johnson Foundation to Support Research in Equity-Focused Health Care.....	9
AAP Applauds New Federal Government Actions to Help keep Kids Covered.....	10
Pediatric Medical Device Resource List.....	10
National Center for a System of Services for Children and Youth with Special Health Care Needs: Update.....	11
A Step in the Right Direction to End Disability Discrimination in Health Care... Report from the American Medical Association's House of Delegates (HOD) Interim Meeting.....	12
Spotlight on Artificial Intelligence in Pediatrics – AAP Webinar Series.....	13
Moving Pediatrics Forward: A History of Advocacy Within the AAP.....	14
Calling for newsletter articles!.....	14
Welcome New Members!.....	14
SOOp Member Roster – THANK YOU!.....	15

Chairperson's Report – Spring 2024

Donny Suh, MD, MBA, FACS, FAAP



Dear Colleagues,

As we look back on the achievements and progress made by the American Academy of Pediatrics (AAP) Section on Ophthalmology (SOOp) in 2023 and 2024, it is with great pride that I reflect on the collective efforts that have led to significant advancements in pediatric eye care advocacy, education, and public service initiatives. I am delighted to share with you the highlights of our activities over the past year, which have encompassed various crucial endeavors across governmental, socioeconomic, public service, membership, educational, and other essential domains.

Governmental Activities:

Our steadfast commitment to federal advocacy for the needs of academic and subspecialist pediatricians has been unwavering. Notably, the successful implementation of the federal Pediatric Subspecialty Loan Repayment Program stands as a testament to our persistent advocacy efforts. Furthermore, our collaboration with esteemed organizations such as the American Association for Pediatric Ophthalmology and Strabismus (AAPOS), the American Academy of Ophthalmology (AAO), and the American Association for Certified Orthoptists (AACO) underscores our dedication to ensuring comprehensive eye care for children at a national level.

Socioeconomic Activities:

Addressing socioeconomic barriers in pediatric ophthalmology remains a top priority for us. Through ongoing engagement in managed care advocacy and collaboration with the AAP Committee on Coding and Nomenclature, we aim to ensure equitable access to eye care services for all children. By actively reviewing policies and providing feedback on new developments, we strive to pave the way for improved access to quality eye care.

Public Service Activities:

Our commitment to public service is exemplified through initiatives aimed at empowering parents and caregivers with knowledge about pediatric eye health. Through the publication of informative pamphlets and articles and active

participation in national initiatives such as Healthy Vision Month, we continue to promote eye health awareness among diverse communities, ensuring that children receive the care they deserve.

Educational Activities:

The SOOP's educational initiatives have been instrumental in enhancing clinical skills, promoting interdisciplinary collaboration, and advancing pediatric ophthalmology research. Our collaboration with other professional associations underscores our commitment to lifelong learning and professional development. Notably, our collaboration within the AAP Pediatric Surgical Specialties Alliance (PSSA) is creating an opportunity for us to educate medical students and residents about the importance of pediatric ophthalmology, thus amplifying our advocacy efforts for children's eye care.

In 2024, our primary focus remains on advocacy through the development of policy, with a particular emphasis on finalizing joint statements on Cortical Visual Impairment and Juvenile Idiopathic Arthritis. These initiatives align with the 75th anniversary of the AAP's flagship journal, *Pediatrics*, and exemplify our commitment to advancing pediatric eye care through evidence-based guidelines and recommendations.

Membership Activities:

Efforts to enhance member engagement and retention are ongoing, with personalized outreach to lapsed members, social networking events, and the publication of biannual newsletters. We are also actively reaching out to medical students to increase interest in pediatric ophthalmology and to cultivate a vibrant and inclusive membership base.

In conclusion, I extend my deepest gratitude to each of you for your continued dedication and contributions to the AAP Section on Ophthalmology. Together, we will continue to advocate for the well-being of children and strive to make a meaningful impact on pediatric eye health.



AAP Section on Ophthalmology–Sponsored Events @ the 2024 AAPOS Annual Meeting

The AAP Section on Ophthalmology takes great pleasure in having the opportunity to partner with the American Association for Pediatric Ophthalmology and Strabismus (AAPOS) each year in offering a few events affiliated with their annual meeting.

AAP Update

Donny Suh, MD, FAAP, Chairperson, Section on Ophthalmology

Wednesday, April 10

11:16 – 11:20 AM

Raising Voices for the Seldom Heard – Advocating for Our Patients and Our Profession

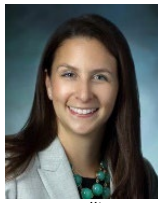
Nancy Benegas, MD, FAAP; Megan Collins, MD; Alejandra de Alba Campomanes, MD; Douglas Fredrick, MD, FAAP; Christopher Lloyd, MD; Christie Morse, MD, FAAP; Michael Repka, MD; Angell Shi, MD, FAAP; Mitchell Strominger, MD, FAAP; Sylvia Yoo, MD, FAAP

Tuesday, April 9

7:00-8:15 AM



Nancy Benegas, MD, FAAP



Megan Collins, MD



Alejandra
de Alba Campomanes, MD



Douglas Fredrick, MD, FAAP



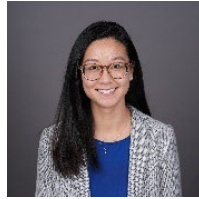
Christopher Lloyd, MD



Christie Morse, MD, FAAP



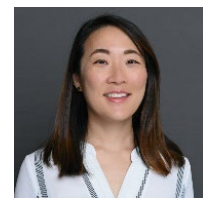
Michael Repka, MD



Angell Shi, MD, FAAP



Mitchell
Strominger, MD, FAAP



Sylvia Yoo, MD, FAAP

Workshop Abstract

Title: AAP SOOp workshop: Raising Voices for the Seldom Heard-Advocating for Our Patients and Our Profession

Purpose:

Physicians dedicated to caring for children, and the unique medical conditions affecting those children, continue to be undervalued and poorly understood by adult medicine colleagues, policymakers who determine the value of our care, and payors upon whom we depend for professional viability. Attendees of the workshop will learn diverse ways we can act individually and collaboratively to advocate for our patients and ourselves.

Target Audience:

Pediatric ophthalmologists, Orthoptists, Pediatricians, Residents, Fellows, Medical students

Current Practice:

While the vast majority of medical trainees and physicians believe that advocacy on behalf of our patients and profession is a valuable activity, the number of physicians participating in these activities is a distinct minority. Lack of participation leads to lack of representation when policy and practice determinations are made, leading to a sense of fatalism in the future of our profession and the fate of our patients.

Best Practice:

Increased participation in advocacy efforts will increase the awareness of our vital role in insuring the ocular health of

children. Building alliances with pediatricians, pediatric medical and surgical subspecialists, as well as patient care advocates should be a goal for all pediatric ophthalmologists.

Expected Outcomes:

Increased participation in advocacy activities will result in increased public recognition of AAPOS as the most trusted organization dedicated to preserving and restoring vision in children. Participants will become aware of the many ways they can participate in advocacy.

Summary:

- Participants will learn how to advocate for their patients through interprofessional collaboration and education.
- Participants will learn how to advocate for their patients by participation in governmental and non-governmental public health agencies.
- Participants will learn how they can advocate for our profession through participation in federal, state, and local legislative activities.

References

- Chimonas S, Mamoor M, Kaltenboeck A, Korenstein D. The future of physician advocacy: a survey of U.S. medical students. BMC Med Educ. 2021 Jul 24;21(1):399. doi: 10.1186/s12909-021-02830-5. PMID: 34303349
- Pettett G. Obligation or option? The physician's role in advocacy. Mo Med. 2011 Nov-Dec;108(6):386-8. PMID: 22338725; PMCID: PMC6181714.

Stop by Our AAP Exhibit Booth in Austin! (Booth T51)

- Grab yourself a print copy of the Section newsletter
- Renew your AAP and Section membership if applicable
- Visit with Executive Committee members and staff and learn about opportunities to get more involved!
- Pick up an AAP member ribbon for your name badge



New Patient Resources on HealthyChildren.org from our Section!

[Does My Child Need Eye Protection for Sports?](#)

[Nystagmus in Babies & Children](#)

[How can I safely watch a solar eclipse with my children?](#)

Also of Interest on HealthyChildren.org

[AAP Parent Brochure on Clinical Trials](#)

The [Call for Abstracts](#) for this year's AAP National Conference & Exhibition (NCE) is now open through April 12th.

The AAP (NCE) accepts abstracts of case reports, original research, program evaluations, quality improvement projects, and advocacy projects for presentation within various section and council programs. Section/council programs are developed by AAP member specialty and subspecialty communities to provide a forum for the advanced discussion of clinical matters, research developments, or special interest areas. Note that the Section on Ophthalmology does not have a dedicated educational program at the NCE so there is no call specific to the field of pediatric ophthalmology, however, many AAP Sections cover topics that may involve children's eyecare. For example, the following AAP entities (in addition to many others) accept abstracts for presentation at the NCE: Council on Child Abuse and Neglect, Council on School Health, Council on Sports Medicine and Fitness, Section on Administration and Practice Management, Section on Advances in Therapeutics and Technology, Section on Emergency Medicine, Section on Global Health, Section on Neonatal-Perinatal Medicine, Section on Telehealth Care.

The AAP National Conference Abstract program is comprised of participating section/council programs accepting submissions. Each participating section and council has [program-specific guidelines](#) which must be reviewed in detail before submission. Submission of an abstract indicates acceptance of all guidelines, policies, and procedures.

Timeline for AAP Abstract Submission:

- **April 12, 2024:** Abstract submissions due at 11:59 PM CDT
- **June 2024:** Authors acceptance notifications distributed to *presenting authors*
- **September 27- October 1, 2024:** AAP National Conference & Exhibition



If interested, please submit through the [AAP abstract submission portal](#) by April 12th.

Recently Seen in Pediatrics, Pediatrics in Review, AAP News, AAP Grand Rounds, & NeoReviews

[Long-term Ocular Outcomes in Congenital Toxoplasmosis Treated Perinatally](#)

[A Review of Pediatric Ophthalmic Tumors](#)

[Closing Gaps in Teen Vision Screening](#)

[Transition to Adulthood for Extremely Preterm Survivors](#)

[‘Getting rid of stupid stuff’ can reduce EHR-related burnout](#)

[AAP: Use ceftriaxone to prevent newborn eye infection during erythromycin ointment shortage](#)

[Vitamin-Dependent Genetic Disorders of Childhood](#)

[AAP partners leading judicial advocacy to battle misconceptions about abusive head trauma](#)

[Mpox in Children: 3 Cases](#)

[A Case of Neonatal Monkeypox Treated With Oral Tecovirimat](#)

[Nausea and Vomiting as Initial Manifestations of Pediatric NMOSD](#)

[Severe Mucositis in the Setting of Mycoplasma pneumoniae and Streptococcal Coinfection](#)

[Advances in the Care of Infants With Prenatal Opioid Exposure and Neonatal Opioid Withdrawal Syndrome](#)

[Common Clinical Scenarios of Systemic Hypertension in the NICU](#)

[Prenatal Diagnosis of Micrognathia](#)

[School Shootings in the United States: 1997-2022](#)

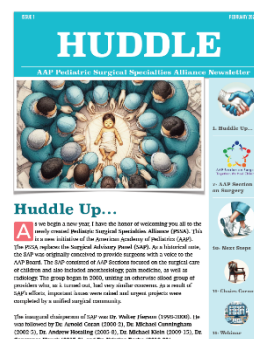
[Trends in Nonfatal and Fatal Injuries in Children](#)

[Homelessness Among Sexual Minority Youth](#)

AAP Pediatric Surgical Specialties Alliance Newsletter

We are pleased to share with you the very first edition of the AAP Pediatric Surgical Specialties Alliance (PSSA) newsletter, [HUDDLE](#). The PSSA is a new initiative of the AAP, which replaces the former Surgical Advisory Panel (SAP). Longtime SOOp member leader, Dr. Walter Fierson, was the inaugural Chair of the SAP from 1998-2000, and as such, this newsletter includes an interview with him.

Stay tuned for future editions of HUDDLE!



Section Chairperson-Elect, Dr. Sylvia Yoo, Graduates from AAO Leadership Development Program

On Sunday, November 5, 2023 during the *Society Presidents' Recognition and Awards Session* held in conjunction with AAO 2023 in San Francisco, Dr. Sylvia Yoo was recognized for completing her participation in the AAO's Leadership Development Program XXIV, Class of 2023. Dr. Yoo was part of a select group of participants chosen for the LDP XXIV, Class of 2023 from among a large group of physicians who were nominated by state, subspecialty and specialized interest societies; our AAP Section nominated Sylvia. The class also included an international participant who was nominated jointly by the Ukrainian Ophthalmological Society and the European Society of Ophthalmology (SOE).

In January 2023, Dr. Yoo took part in a 2 ½ day interactive session in San Francisco covering a wide variety of leadership and association management topics. The class

was joined by participants in the Pan-American Association of Ophthalmology's complementary program – its *Curso de Liderazgo* – with participants from across Latin America who were nominated by national and specialty societies. The meeting included a reception at the AAO's Truhlsen-Marmor Museum of the Eye and a visit to the headquarter offices to hear from the 2023 Academy President, Dan Briceland, MD, and Stephen McLeod, MD, on key priorities and future challenges for the AAO. Next was a trip in April to participate in the AAO Mid-Year Forum 2023 in Washington, DC, where Dr. Yoo met with Members of Congress and their staff to discuss issues important to the medical profession as part of Congressional Advocacy Day. During a dedicated LDP session at the Capitol Hill Club, Dr. Yoo and her LDP colleagues also heard from keynote speaker, US Representative Greg Murphy, MD (R-NC), about

screening, office assessment, rest and exercise, rehabilitation, persisting symptoms, recovery, return to school and to sport, retirement, the para sport athlete and ethical considerations.

New AAP Policies of Interest

American Academy of Pediatrics Warns of Climate Change Impacts on Children in Guidance Update

As climate change disrupts the planet through powerful weather patterns, rising temperatures and ecological disruption, children are especially vulnerable. They receive greater exposure to air, food and water contaminants per unit of body weight, and their development and growth depend on a healthy environment.



The American Academy of Pediatrics calls for taking action to protect children in a policy statement, "[Climate Change and Children's Health: Building a Healthy Future for Every Child](#)." The statement and an accompanying technical report update previous recommendations from 2015. They were published in the March 2024 *Pediatrics* (published online Feb. 20, 2024).

The latest policy and technical report will help guide a new AAP strategic initiative on environmental health and disaster readiness. The initiative is among four priorities outlined by the Board of Directors to shape the Academy's work in 2024.

"We see firsthand the effects of air pollution, wildfires and heat on our children with asthma and respiratory illnesses," said Samantha Ahdoot, MD, FAAP, a lead author of the statement, written by the Council on Environmental Health and Climate Change, Council on Children and Disasters, Section on Pediatric Pulmonology and Sleep Medicine, and Section on Minority Health, Equity, and Inclusion.

"Children who already bear a higher burden of disease because of poverty, structural racism and less education or who speak languages other than English face even higher risks of climate change hazards. But we understand the cause of this problem, so we know how to fix it. Climate solutions are the foundation of a healthy future for every child."

The AAP policy statement offers recommendations for the medical sector and government, encouraging the adoption of policies that reduce reliance on fossil fuels, promote cleaner air and facilitate walking and bicycling. The statement urges the use of more sustainable diets and increased access to nature.

The accompanying technical report provides the scientific basis and knowledge about the effects of higher concentrations of greenhouse gases on earth systems, as well as the child health impacts.

The AAP recommends:

- Physicians can incorporate climate change counseling into clinical practice. Assess climate risks and recommend climate solutions when screening for and addressing social determinants of health such as energy, food, and housing security. For example, encourage active modes of transport or promote consumption of plant-based proteins to reduce carbon emissions.
- Incorporate climate, health, and equity curricula into medical school, residency, continuing education, and board examinations.
- Reduce emissions and waste in the health care sector.
- Serve as a role model in the personal and professional community for practices that promote sustainability and advocate for equitable climate solution policies at the local, state, national, and international level.

The AAP recommends that policymakers promote energy efficiency and renewable energy production at the federal, state, and local levels, and preserve essential public health protections in the Clean Air Act. Governments can expand public transportation, increase construction of safe bikeways and walkways, and support urban planning designs that reduce dependence on automobile transit. The government can also provide funding as an incentive to reduce reliance on livestock as food and promote plant-based diets.

“We all want our children to grow up healthy, safe and secure. Building a healthier planet is essential to reach that goal in the midst of uncertainties about what climate change will bring,” said Carl R. Baum, MD, FACMT, FAAP, co-author of the policy statement. “A pediatrician can help families understand the ways big and small where we can help. We are in this together.”

AAP Provides New Guidance on Collaborative Care of Hospitalized Children

The care of children with acute or complex diagnoses often requires teams of health care providers. The American Academy of Pediatrics has issued a new clinical report, [“Comanagement of Surgical Pediatric Patients in the Acute Care Inpatient Setting,”](#) which was published online on December 18 and in the January 2024 issue of *Pediatrics*, offering guidance for pediatric health care teams on how best to work together to ensure the highest quality of care for children with surgical problems. According to research, the number of pediatric hospital medicine programs involved in caring for surgical patients increased from 44% to 90% between 1997 and 2020, and about 40% of pediatric surgery and 60% of pediatric orthopedic programs use comanagement for patient care. This clinical report, which drew input from experts in pediatric specialties—such as orthopedics, neurosurgery, surgery, anesthesiology, urology, and others—addresses the need for standards, training, and best practices to guide these collaborative programs. This clinical report sets standards for identifying hospital leaders of comanagement programs; elucidating goals, expectations and requirements of these programs; ensuring additional training required by members of the health care team; and establishing metrics on program outcomes. Given the high prevalence of collaborative care of hospitalized children with surgical problems across all types of hospitals and practices, this clinical report will assist hospitals, doctors and other health care providers involved in creating and improving comanagement programs.

American Academy of Pediatrics Issues Guidance on Supporting a Family After the Death of a Child or Adolescent

A child’s death, whether from illness or sudden loss, is always traumatic and stressful, and those affected may grieve in different ways.

The pediatrician can play a critical role in helping families, caregivers and the child’s community navigate the loss of a child, according to an updated clinical report published by the American Academy of Pediatrics. The report, [“Supporting the Family After the Death of a Child or Adolescent,”](#) published in the December 2023 *Pediatrics* (published online Nov. 27), draws on the latest evidence on grief, bereavement and mourning on ways to provide support and practical information.

“A pediatrician can provide comfort, compassion and a listening ear, and also offer practical information, like where to find a community bereavement program or grief counseling,” said Meaghann S. Weaver, MD, PhD, MPH, FAAP, lead author of the report. “If there are siblings, each child may process grief in their own way, based on their age and maturity level. There are no easy paths through the grieving process, but having support from a variety of places, including the medical provider, is critical.”

The AAP Committee on Psychosocial Aspects of Child and Family Health and the Section on Hospice and Palliative Medicine wrote the clinical report, which replaces a 2016 report, noting that families cannot be expected to “move on” or “get over” the death of a child.

“The grief process is unpredictable and does not unfold in a linear fashion, as emotions may wax or wane from one day to another,” said Arwa Nasir, MBBS, MSc, MPH, FAAP. “After families absorb the inevitable shock of the death, they may move into new phases of their grief. We can encourage family members to be gentle with each other as they adjust to their loss and the impact on their lives.”

The report breaks down the most common causes of death in children and shows how the COVID-19 pandemic revealed the vulnerability of even pediatric patients. By March 2022, approximately 355 children ages 4 and below and 737 ages 5 through 18 died from a COVID infection and related causes in the United States. Although American Indian/Alaska Native, Black, and Hispanic children represent 41% of the US population under age 20, they accounted for 78% of COVID-19-related deaths in this age cohort, according to research cited.

Sudden and unexpected infant deaths, including SIDS, accidental suffocation deaths, and ill-defined deaths represent 3,400 deaths per year in the United States and are the largest category of sudden and unexpected deaths in childhood. Motor vehicle crashes were cited as the leading cause of pediatric deaths for over half a century. Beginning in 2017, firearms now represent the number one cause of death among persons ages 1 to 19 years old.

Recommendations for pediatricians include:

- Respect that compassion is a universal language of care and can be expressed through taking the time to listen and provide emotional support to a family.
- Realize how knowledge about the structure of a family and its support systems may be important in recognizing each family's unique needs.
- Consult with sources and family to learn about the cultural and religious traditions surrounding death and bereavement to include culturally appropriate parental roles of grieving.
- Pediatricians should consider visiting their seriously ill or dying patients in the emergency department or pediatric intensive care unit, as able. Consider a phone call or face-to-face meeting with the child's caregiver.
- Follow-up with and provide guidance to surviving siblings who are still patients.

"It's important to understand that grieving the loss of a child is longer than many expect," Dr. Weaver said. "Families often hold a cherished, forever connection to the child."

American Academy of Pediatrics Receives Grant from Robert Wood Johnson Foundation to Support Research in Equity-Focused Health Care

The funding will build on efforts to eliminate race-based medicine and barriers in access to health care



The [Robert Wood Johnson Foundation](#) has awarded the American Academy of Pediatrics more than \$1.7 million to support research in addressing health care disparities for children and adolescents.

The project, "Building a Race-Conscious Approach to Strengthening Pediatric Policy and Research," will establish a scholars' network to support those engaging in culturally effective, equity-focused research. The 2-year grant will foster a supportive ecosystem for health equity research and researchers.

"The AAP and its supporters are proud to lead the way toward achieving a vital goal – to ensure that each child receive equitable, affirming and anti-racist pediatric health care," said Joseph Wright, MD, MPH, FAAP, chief health equity officer for AAP and lead author of the Academy's policy statement, "Eliminating Race-Based Medicine."

"This grant supports research that promises to improve the health of all families, by examining ways to make organizational changes that filter down to individuals seeking medical care. We believe that scholars from diverse backgrounds and lived experiences can be a powerful force in evaluating current systems and recommending improvements. Pediatricians who have been underrepresented in medicine will have opportunities for mentorship, sponsorship, training and networking during this process," said Dr. Wright, the project's co-principal investigator.

This grant complements the work underway through funding from the [Doris Duke Foundation](#) to create a process for identifying and correcting race-normed clinical algorithms. Together, these grants form the cornerstone of the academy's multi-year strategic initiative to affirm anti-racist care for all children.

The AAP will then leverage partnerships with nine other medical professional associations and engage medical institution leaders and journal editors to support the newly formed group of researchers, to be called the Pediatric Health Equity Scholars Network.

The organizations are committed to form a support system for health equity scholars and sustain a race-conscious approach to pediatric research and policy development. The organizations will draw on experiences they gained in forming the Women's Wellbeing through Equity and Leadership (WEL) program for women in medicine.

“We are very pleased to take these steps toward achieving equity in healthcare,” said Janna Patterson, MD, MPH, FAAP, AAP senior vice president for Global Child Health and Life Support at AAP and the project's co-principal investigator. “Together, we envision improvements in the medical field that will benefit generations to come.”

American Academy of Pediatrics Applauds New Federal Government Actions to Help Keep Kids Covered

By: Sandy Chung, MD, FAAP, President, American Academy of Pediatrics

“The American Academy of Pediatrics applauds [the actions taken in December](#) by the Centers for Medicare & Medicaid Services (CMS) to help reconnect children to care in the states where they are struggling the most.

“The AAP has been sounding the alarm since federal Medicaid protections expired last spring that children would unjustly and disproportionately lose coverage without adequate planning and oversight. Unfortunately, this is exactly what happened. More than 2 million children lost Medicaid coverage in just six months, despite many of these children remaining eligible for the program. This is in the face of existing Medicaid requirements that should make it simple and straightforward for children to keep their coverage. Challenges like receiving unclear instructions from state Medicaid officials, long call center wait times, and data systems glitches led to children being harmed.

“As we started to see the number of children being dropped from Medicaid, AAP began urging CMS to use their enforcement powers to keep as many children as possible enrolled in Medicaid and to minimize losses. The recent actions by CMS are an important step forward in doing just that, and align with the federal oversight called for by the AAP [in its most recent policy statement on Medicaid and CHIP](#).

“These efforts come at crucial time for child health, with widespread mental health needs among young people and viruses like RSV, flu and COVID circulating. Parents should not be confronted with an unexpected loss of Medicaid coverage when taking their children to the pediatrician, and we welcome these actions as one way to help prevent this from happening.

“Pediatricians will continue doing our part to assist families in securing health coverage, and we stand ready to support further efforts to keep all our nation's children safe and healthy.”

Pediatric Medical Device Resource List

FDA-grant-supported Pediatric Device Consortia (PDC) – a resource for pediatricians, pediatric caregivers, pediatric specialists, engineers, and entrepreneurs in developing their innovative pediatric medical devices. A new five-year cycle began in September 2023, with the updated consortia sites listed below. Available assistance can include consulting, project management, and seed funding.

Further details can be found in previous editions of the Section on Advances in Therapeutics and Technology newsletter: <https://services.aap.org/en/community/aap-sections/advances-in-therapeutics-and-technology/>

FDA Pediatric Device Consortia Grants Program
(Office of Orphan Products Development)

<https://www.fda.gov/industry/developing-products-rare-diseases-conditions/pediatric-device-consortia-grants-program>

Alliance for Pediatric Device Innovation (formerly National Capital Consortium for Pediatric Device Innovation)
(Children's National Health System / University of Maryland) innovate4kids.org

Southwest National Pediatric Device Innovation Consortium

(Texas Children's Hospital and Baylor College of Medicine / University of Minnesota / Texas A&M / Rice / Univ. of Houston)
SWPDC.org

Consortium for Technology and Innovation in Pediatrics

(Lurie Children's Hospital) www.westcoastctip.org

University of California San Francisco-Stanford Pediatric Device Consortium (University of California San Francisco / Stanford University) pediatricdeviceconsortium.org

Midwest Pediatric Device Consortium (MPDC)

(Nationwide Children's Hospital / Cleveland Clinic Children's Hospital / Cincinnati Children's Hospital)

Foundation for NIH Public-Private Partnerships

Pediatric Medical Devices Design Phase - (evolved from SHIP-MD) <https://fnih.org/our-programs/pediatric-medical-devices-design-phase/>

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National Center for a System of Services for Children and Youth with Special Health Care Needs

NEW RESOURCES AVAILABLE!



Are you interested in learning more about how to improve the system of services for children and youth with special health care needs (CYSHCN)? The [National Center for a System of Services for CYSHCN](#) is here to help! Explore our easy to navigate [list](#) of 40 strategies related to equity, access, financing, and quality of life to improve the system as outlined in the [Blueprint for Change](#). These strategies are aspirational and intended to inform a national framework and long-term vision for children and families. The National Center can support you and your organization in understanding how to implement innovative incremental approaches to advance these strategies – [contact us for support!](#)

A Step in the Right Direction to End Disability Discrimination in Health Care

In this recently published [AAP Voices blog](#), Amy Houtrow, MD, PhD, MPH, FAAP, a member of the National Center for a System of Services for CYSHCN Steering Committee and author of the Blueprint for Change supplement article, "[Health Equity for Children and Youth With Special Health Care Needs: A Vision for the Future](#)", discusses proposed revisions to Section 504 of the Rehabilitation Act of 1973 from the US Department of Health and Human Services. The intent of proposed revisions is to bolster protections for people with disabilities originally outlined in the federal legislation approximately 50 years ago. Dr Houtrow discusses the importance of this proposed rule in advancing equity for children with disabilities and shares patient and family stories from her own experiences.

Report from the American Medical Association's House of Delegates (HOD) Interim Meeting

Lynda Young, MD, FAAP

Wow! This Interim meeting was a doozie! The meeting was held November 10-14 in National Harbor, Maryland. The huge push was, "Fix Medicare Now!" and enough signs were hanging around to paper the Capitol building. Finally, Medicare was getting a lot of attention from Congress, including the introduction of several bills to increase physician payments instead of a 3% cut. But - and this is a big but- several resolutions concerning Medicaid passed and are now the policy of the AMA. You would have been proud of the pediatricians in the House of Delegates, especially the small but mighty AAP delegation. The major impetus for these changes was that Medicaid covers more people than Medicare and it's time for a change. Here's a summary of these new policies, which had overwhelming support in the HOD:

- **Expanding AMA payment reform work and advocacy to Medicaid and other non-Medicare payment models for pediatric health care and specialty populations** asks that our AMA support appropriate demonstration projects, carve-outs and adjustments for pediatric patients, and services provided to pediatric patients within the payment reform arena. Included in this policy is the ask for the AMA to collaborate with state and national medical specialty societies (like the AAP) on physician-developed alternative payment models that address the distinct prevention and health needs of children and take into account the long-term impact of such models. Also brought up in testimony was the great diversity of payment among the state Medicaid programs.
- **Improving Medicaid and CHIP access and affordability** - The AMA supports continued state flexibility to waive copayments or impose minimal copayment amounts that are based on income and in limited circumstances including non-emergent, non-preventive services, excluding children, who should not be subject to cost-sharing in Medicaid. The pediatric testimony was for eliminating Medicaid copays, citing studies that have shown that even nominal cost-sharing can create barriers to care. Testimony also pointed out that state and federal Medicaid administrators aren't receptive to calls to eliminate all cost-sharing in Medicaid at this time, since everyone - including advocacy groups - is completely focused on and overwhelmed by the "unwinding".
- **Immigration status in Medicaid and CHIP** - The AMA advocates for the removal of eligibility criteria based on immigration status from Medicaid and CHIP.
- **Youth residential treatment program regulation** - The AMA recognizes the need for licensing standards for all youth residential treatment facilities to ensure basic safety and well-being standards for youth. The AMA also supports recommendations, including patient placement criteria and clinical practice guidelines, as developed by nonprofit healthcare medical associations and specialty societies, as the standard for regulating youth residential treatment programs.
- **HPV-associated cancer prevention** - This was a report from the Council on Science and Public Health. The AMA supports that HPV vaccines recommended by the Advisory Committee on Immunization Practices be required for school attendance for all vaccine-eligible individuals.
- **Adverse childhood experiences (ACEs)** - The AMA supports collaboration with the CDC and other relevant interested parties to advocate for the inclusion of additional evidence-based categories to the currently existing ACE categories to continue to improve research into the health impacts of ACEs and how to mitigate them.
- **Social media impact on youth mental health** - this resolution was referred to the Council on Science and Public Health as the Council is currently working on a report for the next Annual Meeting in June 2024. So, stay tuned for more on this issue.

In my 12+ years as an AMA delegate, I have never heard such tremendous support for Medicaid reform. Of course, since Congress has bills out now on Medicare reform, we'll have to wait our turn until those get settled. Then Medicaid will become a huge issue for us.

Reprinted with permission from the Section on Seniors Winter 2024 newsletter.

SPOTLIGHT ON ARTIFICIAL INTELLIGENCE

The development and application of artificial intelligence tools in health care is growing rapidly. AAP is creating and sharing resources to help pediatricians and pediatric specialists understand and utilize these tools to decrease burden, promote health equity, and improve the overall quality of pediatric health care.



AAP “AI in Pediatrics” Webinar Series – Recorded Episodes

[Generative Artificial Intelligence: What Pediatricians and Pediatric Specialists Need to Know](#)

[Generative AI for Medical Education in Pediatrics](#)

[Generative AI for Clinical Scenarios in Pediatrics](#)

[Generative AI for Administrative Tasks in Pediatrics](#)

[Frequently Asked Questions About AI in Pediatrics - Part 1](#)

[AI and Medical Liability in Pediatrics](#)

Registration is open for AAP's next two AI webinars!

[AI and EHRs Part 1: Connections and Applications Outside the EHR](#)

Join us for an exciting discussion of how pediatric clinicians and practices can integrate third-party AI tools as part of the care they provide.

Thursday, April 1, 11:00 AM Central

Speakers:

- Chip Hart, Director of Pediatric Solutions, PCC
- Rachel Bakersmith, Practice Administrator, Children First Pediatrics

Register for **AI and EHRs Part 1** here: <https://bit.ly/3Vu5zKG>

[AI and EHRs Part 2: How Are EHR Vendors Thinking About AI?](#)

In this webinar, we'll learn about how and where EHR vendors are integrating AI tools and functionality within their software.

Thursday, May 16, 11:00 AM Central

Speakers:

- Janet Campbell, HIMSS EHRA
- Sabrina Braham, MD, FAAP

Register for **AI and EHRs Part 2** here: <https://bit.ly/3x9oCji>

These webinars will be recorded. Even if you can't attend the live events, please register so you can receive a link to the recordings when they are available! Questions and comments about these webinars, or AI in pediatrics more broadly, can be directed to cocit@aap.org.

Moving Pediatrics Forward: A History of Advocacy Within the AAP

Advocacy on behalf of the health of all children is in the organizational DNA of the American Academy of Pediatrics. It was an original goal of the founding members of the AAP to build an organization dedicated to advocating for children. Since the development of pediatrics as a specialty field, pediatricians & pediatric medical and surgical specialists have played a powerful role in creating lasting and meaningful change for the patients they serve.

The AAP has compiled a timeline (from the 1940s to today) to highlight some of the most significant moments in its long history of advocacy, complete with new video clips looking back on each decade.

Take a moment to learn more about the AAP's decades of progress [here](#).



Calling for newsletter articles!

For our next SOOp Box Newsletter, the Fall 2024 edition

Please send proposals to Sylvia Yoo, Newsletter Editor

At Sylvia.Yoo@tuftsmc.org by August 15, 2024

Welcome New Members! Since November 2023

Aliya Centner
Orlando, FL

Dominic Choo
Dallas, TX

Janine Collinge
West Hartford, CT

Cameron Coulter
Lexington, KY

Brigid Devine
Cincinnati, OH

Devin Moffat
Clive, IA

Isdin Oke
Boston, MA

William Osier
Aurora, CO

Veronica Picard-Schaefer
Milwaukee, WI

Syeda Rizvi
East Lansing, MI

Veronica Ton
Boston, MA



Thank You to All of Our Current Members for Your Support

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