NEWS

VOL 68, NO 1 JANUARY 2003

los angeles pediatric society

FROM THE PRESIDENT

Eyal Ben-Isaac, M.D.



Health care has gone through many changes over the past several years. New diagnostic capabilities, medications, and treatment modalities have allowed us to solve many of the medical issues our children face. Residency training and education have also evolved, with the creation of new guidelines for curriculum development, resident duty hours, and demonstration of competency. Advocacy training has also become the latest "buzz" word, encouraging many training programs to develop new curricula and rotations for house staff.

According to the Accreditation Council for Graduated Medical Education (ACGME) and the Residency Review Committee (RRC), the goal of residency training in pediatrics is "to provide educational experiences that prepare residents to be competent general pediatricians able to provide comprehensive, coordinated care to a broad range of pediatric patients." In addition, the ACGME also states that "there must be structured educational experiences that prepare residents for the role of advocate for the health of children within the community." How to accomplish these goals is currently left to the discretion of the individual training programs, and might incorporate both didactic and experiential components integrated into other parts of the curriculum, or the use of distinct longitudinal or block rotations.

Webster's Dictionary defines advocacy as "the act or process of advocating or supporting a cause or proposal." To *advocate* means "to plead in favor of."

> Pediatricians and allied health care professionals are natural child advocates.

Advocacy in pediatrics dates back to the 19th century and Dr. Abraham Jacobi, the first recognized leader of pediatrics in the United States. His list of accomplishments is long and includes the creation of the first milk station in the U.S. to provide boiled milk, as well as working for birth control, the admission of women to the Johns Hopkins School of Medicine and for the advancement of Native Americans and African Americans. The founding of the American Academy of Pediatrics in the early 1900s was also based on an advocacy position taken by a group of pediatricians in support of federal legislation.

Pediatricians and allied health care professionals are natural child advocates. Our role in society as respected leaders and our influence on children's lives allow us to have a stronger voice than most individuals. The fact that no other institution in our society regularly encounters children during the vulnerable age period of 0-3 years, as well as our extensive training allow us to be ideal advocates for today's youth. In addition, the fact that the top two causes of childhood mortality over the age of one

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year are unintentional injuries and homicides, and that the most common preventable causes of lifelong disability are unintentional injuries and inadequate prenatal care, allow us the opportunity to intervene on important issues with maximum impact. Many health care professionals take active roles in childhood advocacy through involvement within the local schools and day care settings, as well through lobbying and involvement in policy making. Both avenues allow us to help promote education, health, dietary habits, etc. to parents and children. After all, issues such as the "Back to Sleep" campaign, second hand smoke exposure, car seat safety laws, and safety helmets were all sparked by allied health care professionals.

Many health care professionals take active roles in childhood advocacy through involvement within the local schools and day care settings, as well through lobbying and involvement in policy making.

While many feel that training programs must develop new curricula to accomplish the ACGME's recommendations, I would contend that all of us as health care professionals advocate for our patients and families each day, often times without even realizing it. The simple act we perform each day when we discuss anticipatory guidance and preventative health care is a clear indication of our ability to advocate for children. When we review how to "baby-proof" the home, the use of appropriate car seats, and discuss dietary intake we also help to ensure that infants safely make it into childhood. Discussing with parents the risks and benefits of immunizations further demonstrates our hope of preventing serious illness from inflicting our youth. The mere fact that we rarely see Hemophilus influenza meningitis since the introduction of the Hib vaccine attests to our abilities to prevent serious illnesses. In addition, the amount of time many of us spend obtaining authorizations for medications, radiological procedures, subspecialty visits, and hospitalizations for our patients is another form of how we "plead in favor of" our children each day.



There is no question that it is important for residency training programs to develop further advocacy experiences for our house staff. Short-term experiences educating residents about available resources, as well as long-term exposures that will allow residents to develop programs within their communities once they graduate are crucial in today's environment. However, it is also imperative that none of us forget the everyday tasks and our accomplishments on the behalf of our patients.

As President of the Los Angeles Pediatric Society I hope to continue to develop our society's rich history of advocating for our children and families. Our commitment to the education of our members and the community is evident through our annual Brennemann Lecture series and the annual Parmelee Lecture, both of which provide us an incredible opportunity to further enhance our skills. In addition, the Gene Black Summer Internship Program allows high school students an early exposure to our children's needs, and hopefully encourages them to enhance the future of our youth, whether it be through entering the health care profession, through education, or by involvement in the legislative process. As individual members, there is just so much more that we can do, and the available resources to learn and help are endless. Web sites such as *www.aap.org* and the Members Only site will inform you of legislative action items and updates from the Department of Federal Affairs. In addition, *www.aap.org/faan/faansub.htm* provides information about FAAN (Federal Advocacy Action Network), a network of AAP members who help support federal legislative and regulatory activities that play an important role in passing of legislation that benefits children and pediatricians. On a more local level, sites such as *www.schoolhealth.org* help teach pediatricians their potential roles in school policies, health, and education, while *www.riskwatch.org* informs and educates individuals how to make communities safer through its comprehensive injury prevention program. Thanks to so many people and programs working each day for society, the continued hope for a bright future will always exist for all our children.

SUMMER MEDICAL CAREER PROGRAM

James S. Seidel MD,Ph.D.

The LAPS Gene Black Summer Medical Career Program is planning some changes in the next few years. We are hoping to expand the program by increasing the number of participating hospitals or pediatric groups, as well as the number of students at each site.

We would like to ask members to consider becoming a preceptor. This entails arranging a four-week schedule for the students in the practice as well as at hospital sites with your colleagues (surgery, the nursery, OB, the Emergency Department, etc.) Although this does take some time, the rewards are great. The students really blossom during this experience and one has the opportunity to influence a young person's career and educational decisions.



We are planning to meet with the high school counselors next fall to plan for future years to see how the program needs to be modified and how we can streamline the recruitment of students. One of our goals is to increase the number of individuals from underserved communities in the program. We have always done well in this area but we have not tracked the students. We hope to develop a more formal tracking system that will be updated annually.

Our summer Medical Careers Program is unique and very special. We are extremely proud of the accomplishments to date of the program and our students. The LAPS members have played an important role in development and sustaining of the program through their generous donations. We urge you to continue your support as well as consider being a preceptor in the future.

NIH Child Anxiety Treatment Study Now Underway at UCLA

John Piacentini, Ph.D.

Anxiety disorders are the most common type of psychiatric problem in children and adolescents with several large prevalence studies suggesting a collective prevalence rate of 12% to 20% in this country. Historically thought to be benign and/or developmentally normative, anxiety disorders can cause severe distress and lead to significant impairment in academic, social, and familial functioning. Moreover, affected youngsters are at heightened risk for adult anxiety and depressive disorders, suicide attempts, psychiatric hospitalization, and long-term psychosocial dysfunction. Unfortunately, despite the fact that effective psychosocial and pharmacological treatments exist for these children, only a small proportion of clinically anxious youngsters ever receive appropriate and effective treatment for these symptoms. Controlled trials have shown both selective serotonin reuptake inhibitors (SSRIs) and cognitive behavior therapy (CBT) to be effective treatments for childhood anxiety disorders. However, these two treatments have never been directly compared to each other or their combination. The long-term advantages of one treatment compared to another have also not been studied

Anxiety disorders are the most common type of psychiatric problem in children and adolescents...

The National Institute of Mental Health has recently funded a large multi-center study (Child and Adolescent Anxiety Multimodal Treatment Study, or CAMS) addressing these two questions. The Child OCD, Anxiety, and Tic Disorders Program at the UCLA Neuropsychiatric Institute and Hospital (UCLA-NPI) serves as the local site for this trial. Children and adolescents are eligible for the study if they are 7-16 years of age, medically healthy, off psychiatric medications, and meet DSM-IV diagnostic criteria for separation anxiety disorder, generalized anxiety disorder and/or social phobia. All youngsters receive a comprehensive psychiatric evaluation to determine study eligibility. Eligible youngsters are then randomized to one of four treatment conditions: 1) sertraline-alone, 2) CBT-alone, 3) sertraline plus CBT, or 4) pill placebo. Acute treatment lasts for 12 weeks. Responders to one of the three active treatment conditions receive an additional 24 weeks of the same treatment (meds, CBT, or both delivered during monthly clinic visits). Placebo nonresponders will be offered a free course of either CBT or medication, depending on their preference. Efficacy assessments are scheduled every four weeks during acute phase (Weeks 0, 4, 8, 12) and at Weeks 24 & 36 during maintenance phase. All study assessments, visits, and medications are provided free of charge. In addition, families receive $10 for each treatment visit to cover travel expenses (between $140 and $200 depending on treatment condition) and up to $340 for completing all study assessments.

For more information about the study, please call Melody Keller at the UCLA Child Anxiety Program at 310/825-4132.

John Piacentini, Ph.D. is Associate Professor-in-Residence in the Department of Psychiatry and Biobehavioral Sciences at the UCLA School of Medicine, and Director of the UCLA-NPI Child OCD, Anxiety, and Tic Disorders Program.

FUTURE MEETINGS

Jan 17, 2003
Is There Life After Residency?
Courtyard Marriott, Marina del Rey

Mar 14-17, 2003
Clinical Pediatrics
Hilton Palm Springs Resort,
Palm Springs
See flyer, next page.

Apr 10-13, 2003
Advances in Pediatrics
Flamingo Hotel, Las Vegas

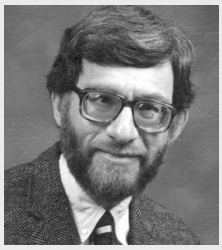
May 14.2003
Obesity in Children
Sportsmen's Lodge, Studio City

Sept 18-21, 2003
Brennemann Lectures
Bahia Hotel, San Diego
See flyer on page 8.

New Hotel and Meeting Venue: HILTON PALM SPRINGS RESORT

IT'S NEVER TO SOON

Marshall Goldberg, M.D., FAAP, FAAAA&I, Program Chairman



It's never to soon to plan for the outstanding CME opportunities that the Society will again be offering this year. The Parmelee Lecture will be held on May 14, 2003 and will feature Naomi Neufeld, M.D., a respected endocrinologist who has long been recognized for work in childhood obesity. I don't have to remind anyone who is in active practice how serious, frustrating, and common this problem has become. Dr. Neufeld will address us on "Childhood Obesity: Facing Down the Epidemic." This is a subject of importance to all of us and I urge you to attend.

I hope you all will be motivated to attend the Parmelee Lecture in May and to bring you and your families to San Diego in September both for enjoyment and education.

Our 60th Brennemann Lectures will once again take place on Mission Bay in San Diego. Keep September 18-21st open. Our faculty continues to impress me and I am certain this year will be no exception. Randi Hagerman, M.D. from the MIND Institute at UC Davis will join us. She will discuss the interrelationship between developmental and genetic issues. I have heard her speak. I can guarantee, you will take home many pearls. Richard Jacobs, M.D., the chief of Infectious Disease at the University of Arkansas is no stranger to us. He is absolutely outstanding. We are pleased to welcome Robert Lemanske, Jr., M.D. from the University of Wisconsin. (My Iowa Hawkeyes finally beat them this year!). Bob is nationally recognized for his work in allergy and has a special interest in the role of viral infections in asthma. Donald Shaul, M.D. from the Division of Pediatric Surgery at the Childrens Hospital of Los Angeles has had close contact with many of us in the area and I'm certain we can look forward to stimulating and useful information. Our final speaker will be Robert Wells, Ph.D. from Valley Childrens Hospital in Fresno. Bob chairs the Division of Pediatric Psychology. I have attended his talks at their Yosemite Meetings. I can give you an unqualified assurance that you will enjoy and learn from Bob's presentations.

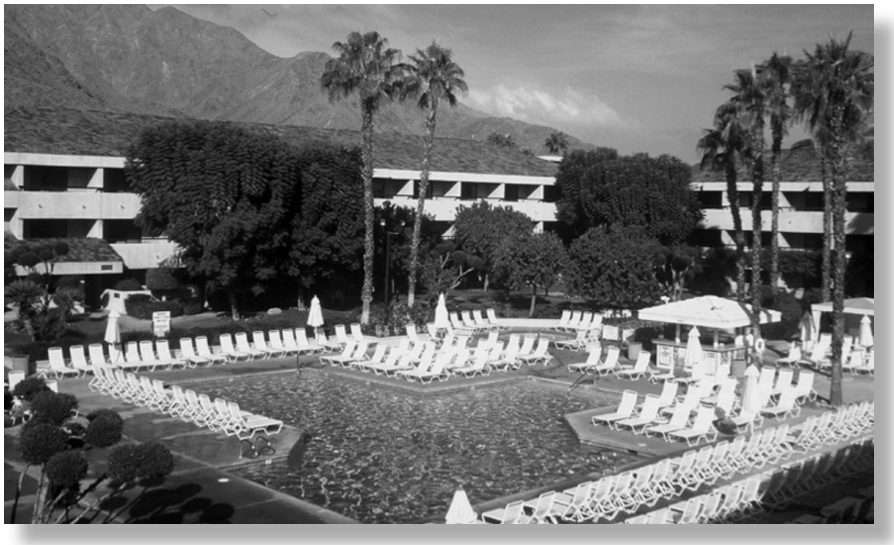
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March 13-16, 2003

New Hotel and Meeting Venue: HILTON PALM SPRINGS RESORT



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JAY M. LIEBERMAN, M.D., Chief, Pediatric Infectious Diseases, Miller Children;'s Hospital, Long Beach, California.Assistant Professor of Pediatrics, University of California School of Medicine, Irvine, California

MARTIN I. SACHS, D.O., Professor of Pediatrics, Mayo Medical School, Mayo Clinic; Consultant, Pediatrics, Mercy Medical Center, Des Moines, Idaho.

FRANK SINATRA, M.D., Professor of Pediatrics, Keck School of Medicine of the University of Southern California, Los Angeles, California.

WILLIAM 0. WALKER, JR., M.D., Director, Neurodevelopmental Birth Defects Clinics, Childrens Hospital and Regional Medical Center, University Place, Washington.

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This activity is CME approved. For more information, call 310/540-6240 or 323/757-1198;
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Web site: www.aapca2.org

2003 Clinical Pediatrics Meeting Advance Registration

Use the registration form available online at www.aapca2.org or complete the form below. Make checks payable to: American Academy of Pediatrics, Chapter 2 and return to: PO Box 2134, Inglewoood, CA 90305. Phone 310/540-6240 or 323/757-1198.

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Tuition Fee:	*Before 2/10*	*After 2/10*	
Physicians: Members (AAP Calif. Chapter 2, LAPS, SWPS)	$525	$550	$_____
Physician Non-members	$575	$600	$_____
Pediatric Residents (Hospital: _____)	$150	$175	$_____
Allied Health Professionals	$150	$175	$_____
Physicians Emeritus & Retired (AAP CA Chapter 2, LAPS, SWPS)	$100	$125	$_____
GOLF FEE: Golf for Men and Women	$100	$125	$_____
(Starts 12:00 Noon Saturday — limited to first 20 registrants)		**Total**	$_____

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Hotel Accommodations Requested: ____ Double ____Single Number in Party .....

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Hotel Accommodations: 100 rooms of the Hilton Palm Springs Resort will be available for registrants. Rates are $189.00 per day, single or double occupancy (tax not included).
Note: Special room rates apply only until 30 days prior to the meeting or until after all 100 of the reserved rooms have been booked. Chapter 2 disclaims any responsibility for hotel arrangements. You are advised to make room accommodations as soon as possible.

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Signature .....

THE GENE BLACK SUMMER MEDICAL CAREER PROGRAM

The Summer Medical Career Program was established by the Los Angeles Pediatric Society in 1969. The purpose of the program is to stimulate high school students to choose careers in the health professions. This is accomplished by providing first hand experience observing doctors, nurses and allied health professionals at work in hospitals and through career guidance provided by counselors at each participating institution. For a period of four weeks students take part in a variety of activities affording direct contact with both the medical staff and patients. They rotate through the various departments in hospital and observe the role of health-care personnel in providing medical services. The program is different at every location and is usually tailored to meet the interests of the participants.

A weekly stipend of $50.00 is given each student to cover incidental expenses and a certificate of completion at the end of the program. In addition two $500 scholarships are awarded each year from the Edward M. Rissman Scholarship Fund.

Funding is provided by contributions from individuals and groups, Medical Careers Unlimited Medical Group Members and our new Circle of Friends and Donors. To show our appreciation, contributions received this year are listed below. All are cordially invited to join. You will help students get started in the right direction just as perhaps someone helped you.

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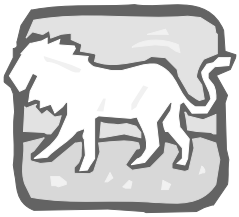
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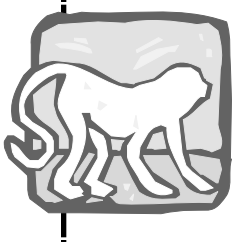
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THE LOS ANGELES PEDIATRIC SOCIETY
Presents the

60th ANNUAL BRENNEMAN MEMORIAL LECTURES

September 18-21, 2003





BAHIA HOTEL
on San Diego' Mission Bay
998 W. Mission Bay Dr.
San Diego, CA 92109

MEETING INFORMATION
(310) 540-6240 or
(323) 757-1198
e-mail: lapseve@aol.com
fax: (310) 543-2375 or
(323) 779-3505

Faculty

RANDI J. HAGERMAN, M.D. Grakopoulos Vesonaia Chair in Pediatrics, University of California at Davis, California

RICHARD F. JACOBS, M.D., F.A.A.P., Horace C. Cabe Professor of Pediatrics, University of Arkansas for Medical Sciences; Chief, Pediatric Infectious Diseases, Arkansas Children's Hospital, Little Rock, Arkansas

ROBERT F. LEMANSKE, JR., M.D., Professor of Pediatrics and Medicine, University of Wisconsin Medical School, Madison, Wisconsin

DONALD SHAUL, M.D., Associate Professor of Clinical Surgery, Keck School of Medicine of the University of Southern California; Childrens Hospital Los Angeles, California.

ROBERT WELLS, PhD., Associate Professor Psychiatry, University of California, San Francisco, Fresno Program. In Private Practice in Fresno, California.

Accrediation

This activity is offered by a CMA-accredited provider, the Los Angeles Pediatric Society. Physicians attending this course may report up to 15 hours of Category 1 credits toward the California Medical Association's Certificate in Continuing Medical Education and the American Medical Association's Physician's Recognition Award. The California Board of Registered Nursing approved 15 hours of continuing medical education. Provider number CEP11121.

60th Brennemann Lectures Meeting Advance Registration

Name ..... Date .....

Address .....

City ..... State ..... Zip .....

Phone ( ) ..... Fax ( ) .....

Email .....

Tuition Fee		Before 8/25	After 8/25	
Physicians: Members of LAPS		$495	$525	$_____
Physician Non-members		$525	$575	$_____
Pediatric Residents	Hospital:_____	$ 35	$50	$_____
Allied Health Personnel	*Category:*_____	$250	$300	$_____
Emeritus with LAPS		$125	$125	$_____

***SATURDAY** *Wild Animal Park excursion:* $40.00 adults $20 children (3-11) N/C (2 & under) *After 8/25 $50.00 adults $30 children*

No. of adults ____x____ No. of children 3-11 ____x____ 2 & under ___x N/C = $_____

*Must be registered in advance..... **TOTAL...** $_____

Please make checks payable to: Los Angeles Pediatric Society and return to: P.O. Box 2022, Inglewoood, CA 90305. ***We regret credit cards cannot be accommodated.***

60th Brennemann Lectures Hotel Advance Registration

Name .....

Address .....

City ..... State ..... Zip .....

Phone (Please include area code).....

Number in Party .....

Hotel Accommodations Requested: ____ Double ____Single

Arrival: Time..... Date.....

Departure: Time ..... Date.....

Your check or credit card is acceptable in payment.
MasterCard VISA American Express (circle one)

#..... Exp. Date .....

Signature .....

150 rooms are available to registrants at the special rate of $140 per day single or double occupancy plus tax. Part of this fee is commissionable to LAPS. **Note: Special rates will be available only until August 19, 2003 or until all 150 blocked rooms are taken. Once these rooms are taken, regular hotel rates will apply. WE RECOMMEND YOU MAKE RESERVATIONS FAR IN ADVANCE OF THE MEETING.** *The Los Angeles Pediatric Society disclaims any responsibility for hotel arrangements. Please make check payable and send to Bahia Hotel at address listed above. Phone Number: 1-800-288-0770.*

Some New Perspectives on Early Cleft Care

Janet Salomonson, M.D., Ann Masson, R.N.

When a baby is born with a cleft lip and palate, the parents have many questions. The first is "How will the baby eat?" Feeding techniques have been clearly discussed in the September newsletter. Their next question is "When can the lip be fixed?" They may also notice that the nose is distorted. They may remember seeing someone with a repaired cleft who had a "flat nose." Realistically, achieving a symmetric, natural appearing nose is challenging. Several factors contribute to the cleft nasal deformity: distortion caused by the abnormal lip muscle insertion, cartilage position, cartilage shape, and growth differences between the two sides of the face.

Several factors contribute to the cleft nasal deformity: distortion caused by the abnormal lip muscle insertion, cartilage position, cartilage shape, and growth differences between the two sides of the face.

The classic teaching was to repair the lip in infancy, but defer nasal correction due to concerns with growth. However, results reported in the 1980s on children treated in Australia revealed cartilage repositioning at the initial lip repair in infancy was safe, effective, and led to improved results. This technique has been generally accepted and is used in most U.S. Cleft Centers.

This procedure still did not address the abnormal cartilage shape, which often results in a blunt, broad, asymmetric nasal tip that draws unwanted attention to the cleft repair. Extrapolating on the observation reported in the literature by Japanese surgeons in 1989, neonatal nasal molding could improve cartilage contour. Ear and nasal cartilage in the neonate is plastic (i.e. can be molded and reshaped) for approximately six weeks after birth. The plasticity rapidly decreases during these six weeks, so the earlier molding is instituted, the better.

Some centers advocate a custom appliance fabricated in conjunction with an orthodontist. While this is necessary in some instances, many infants can be treated with prefabricated silastic nasal conformers and taping. This is preferable since treatment can be started sooner and is less invasive. The conformer is maintained as a kind of retainer until the lip is repaired at approximately 10 weeks of age (following the surgeons' rule of 10s – 10 pounds, 10 weeks, 10 grams of hemoglobin).

With high-resolution ultrasound, the prenatal diagnosis of a cleft is becoming more common. Early diagnosis provides an excellent opportunity for parents to have a prenatal visit with a cleft palate center. Then, when the baby is born, the team can be immediately involved; working alongside their personal pediatrician to assure their baby has a healthy start.

Note: The American Cleft Palate-Craniofacial Association (ACPA) can provide a referral to a cleft palate team in your area (919) 933-9044. Janet Salomonson, M.D. is the Medical Director and a Plastic Surgeon at the Cleft Palate Center at Saint John's Health Center in Santa Monica. For more information please contact Ann Masson, R.N., BSN, Nurse Case Coordinator at (310) 829-8150 or cleftpalate@stjohns.org.

Smallpox Vaccination Alert!

Dr. Vincent Fulginiti has been working with CDC and HHS on writing and editing a Website regarding smallpox vaccinations. It includes excellent photographs from his and Henry Kempe's archives. The publication is available from the Department of Public Health Office of Biodefense Preparedness. The booklet provides health personnel the information necessary for smallpox vaccinations and the possible reactions. There is no charge. The following website is very informative: http//www.bt.cdc.gov/training/smallpoxvaccine/reactions

Note: When you visit the Web site, go to Message from HHS, then About this site, then Normal vaccinations, then Adverse reactions.



THE LOS ANGELES PEDIATRIC SOCIETY PRESENTS

THE ANNUAL SPRING MEETING AND PARMELEE LECTURE

Wednesday, May 14, 2003
Sportsmen's Lodge Restaurant, Studio City
Reception: 6:30 pm — Banquet: 7:00 pm — Lecture: 8:00 pm

PROGRAM SPEAKER

Naomi Neufeld, M.D.

Clinical Professor of Pediatrics, U.C.L.A.; Founder and Medical Director of Kid-Shape; Attending Physician at Cedars Sinai Medical Center

TOPIC
CHILDHOOD OBESITY:
Confronting the dilemmas in current practice

REGISTRATION
ANNUAL SPRING MEETING AND PARMELEE LECTURE

los angeles pediatric society
ADVANCE REGISTRATION — ANNUAL SPRING MEETING AND PARMELEE LECTURE
Wednesday, May 14, 2003

Name.....
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State / City / Zip.....

Tuition Fee: BANQUET AND LECTURE
Physician, Member LAPS — $50.00 ..... $_____
Physician, Non-Member — $60.00..... $_____
Allied Health Professionals — $50.00 ..... $_____
Pediatric Residents (hospital _____) $30.00..... $_____
Non-member Pediatrician new to area in 2002/2003 — $30.00..... $_____

Tuition Fee — LECTURE ONLY
Must be registered in advance to insure seating
Physician Member LAPS — $20.00 ..... $_____
Physician, Non-member — $25.00..... $_____
Allied Health Professionals — $20.00 ..... $_____
Pediatric Residents (hospital _____) — $10.00 ..... $_____
Non-member Pediatrician new to area in 2002/2003 — $10.00..... $_____

Checks payable to: los angeles pediatric society
Return to: PO Box 2022, Inglewood, CA 90305
For additional information: 310/540-6240, 323/757-1198, LAPSEVE@aol.com

los angeles pediatric society
APPLICATION FOR MEMBERSHIP

All pediatricians, as well as other specialists having a professional interest and concern with the health and welfare of infants, children, and adolescents, are eligible for membership. Members residing outside of California will be classified as affiliate members. Membership for all categories is $100 a year. Please complete each of the following items as applicable. *Life membership is available at a one-time fee of $1000.

PLEASE PRINT OR TYPE

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1. *Full Name:* _____ *Birth Year:* _____
First Middle Last

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2. Your LISTING for the Directory of Members: Listings are limited to two addresses. Academy and College members are urged to add affiliation initials after degree. Please make listing exactly as you want it published.

Name:

❒ *1. Street:* _____ *Phone: ( ) _____*
City: _____ *State:* _____ *Zip:* _____

❒ *2. Street:* _____ *Phone: ( ) _____*
City: _____ *State:* _____ *Zip:* _____

Specialty: _____ ❒ *Bd. Cert. Date of Cert.*_____ *Date of Re Cert.*_____ ❒ *Bd. Elig.*
Subspecialty: _____ ❒ *Bd. Cert. Date of Cert.*_____ *Date of Re Cert.*_____ ❒ *Bd. Elig.*
Note Board Name for Allergy Specialty: _____
Check preferred mailing address above. If different than listing, note in Item 3.

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3. *Street:* _____ *City:* _____ *State:* _____ *Zip:* _____

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4. *Medical School:* _____ *Year Graduated:* _____
Internship: _____ *Years:* _____
Residencies: _____ *Years:* _____
_____
Other Professional Training: _____
_____
Hospital Staff: _____
_____
❒ *Private Practice : Total Years:* _____ ❒ *Academic Practice: Total Years:* _____

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5. *Member in good standing of other medical and scientific societies:* _____
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6. *References (Name of two physicians, preferably members):*
1. _____ *2.* _____

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7. ❒ **LIFE MEMBERSHIP*

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8. *Date:* _____ *Signature:* _____

YOUR CHECK FOR FIRST YEAR'S DUES ($100) MUST ACCOMPANY APPLICATION
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City . . . . . .

State / Zip . . . . . .

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Specialty . . . . . .

❒ **Certified** ❒ **Eligible**

❒ Check if interested in membership.

All pediatricians, as well as other specialists with a professional interest in the health and welfare of children are eligible. There are no geographical limits. Annual dues of $100, includes partial fees to the Annual Brennemann Lectures and Spring/Parmelee meeting.

CLASSIFIED ADS

POSITION WANTED

Board Certified Pediatrician, recently relocated to Los Angeles, in search of full/part time position. Please call 323/377-8634 if position available.

LOCUM TENENS

Locum tenens position available commencing 12/28/02. Private Practice ten miles east of Los Angeles. Board Eligible or Board Certified Pediatrician, valid D.E.A. & California licenses with minimum one year experience in General Pediatrics. Current position is for 30-38 hours per week in the medical office, some on-call and hospital rounds. This may lead to a permanent position. Contact Gloria 626-437-1589 or JJYX@aol.com.

los angeles pediatric society

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