VOL 69, NO 3 OCTOBER 2004

pediatric

FROM THE OUTGOING PRESIDENT

Sheila S. Phillips, M.D.

t is possible, in this era of breakthrough medical discoveries, to lose sight of the basics in pediatric care. Though pediatricians want some passing familiarity with exotica such as internal cameras for body imaging, stem cell research, and transplantation of numbers of body parts, and though each of us has been involved in the care of a child with a catastrophic anomaly or a serious disease, most of our time and effort involves the day- to-day issues of limited infections, minor traumas, and, most importantly, I believe, pertinent parenting advice.

A shelf of the current "how to parent" books might reach from Bakersfield to Barstow, and I've found a few discussions of the developing child are worth their carriage. But many are so packed with "dos and don'ts" and "hows and whys" that there is barely room for common sense. We realize that adults have strengths and weaknesses that mark our individuality; not all children are above average, but it shouldn't happen to our patients. Every problem we encounter in children gets a scientific name, which we then reduce to an acronym. Somehow, the individuating vagaries of development seem to distress parents of those who don't attain the milestones on some set schedule.

There are proven strategies of parenting that produce more secure and happy children. Our first concern as practitioners is to teach our patients and their

parents those ideas that we know work. We know that our children learn more from what we do than from what we say. An important opportunity for learning social behavior is the family meal. The community of the family is enhanced by regular sharing of the meal-time table. I tell my parents



to try to eat with the children as often as possible.

If parents enjoy spending time with the family the children will prefer to be a part of the family as they grow into adolescence. Many parents don't have the option to be with the child much because of work, but often I meet parents who could be home but the child spends too much time in nursery school. When I speak with the parents of young children, I encourage them to read to them every day, and to read with them as they learn to read. We talk of other ways to spend time-taking walks, playing outside, visiting new areas, or even watching TV or videos-—all of course, together. As children get older, travel to places studied in school, to social and cultural institutions, as a family, enriches childhood, makes parenting a joy, and benefits the family, which is the heart of the pediatric mission.

FROM THE INCOMING PRESIDENT

Martha Rivera, M.D.

"Nothing that I can do will change the structure of the universe, but maybe, by raising my voice, I can help in the greatest of all causes." – Albert Einstein.

Given the era of computer technology and mail generated CME credit, we now see a population of practitioners not leaving their homes or office to fulfill CME credits. Are we really cheating ourselves of the benefit of human interaction and camaraderie that can only happen at meetings? One of the most important aspects of the meetings is the congeniality of the participants. The Brennemann lectures recently held in San Diego are an example. There were a myriad of excellent speakers who discussed issues of relevance for the practitioner. Tips ranged from office maneuvers for orthopedics injuries, to new vaccine technology. In addition, new data is often presented prior to pub-

lication, keeping the practitioner up to date. These are just a few samples of the lectures.

One leaves the lectures with a new fund of knowledge that can be utilized in everyday life. Furthermore, recertification is now required for all practitioners licensed after 1988, making it imperative to be versed in most recent changes. It is important to share the human experience with others going through many evolving issues in medicine, and a computer could never replace the interaction between people. So, I invite more members to actively participate and attend future meetings, so that the human element will not be lost.



los angeles pediatric society

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FUTURE MEETINGS

November 6, 2004

Thirty-sixth Annual Cleft Palate & Craniofacial Anomalies Symposium: Cleft Care: Something to Talk About Special workshop: "The Speech Pathologist Meets the Cleft Palate Team."

Sponsored by Saint John's Cleft

Sponsored by Saint John's Cleft Palate Center (310) 829-8150 or nancy.hsenmayer@stjohns.org.

November 18-21, 2004

Pediatric Update, 26th Annual Las Vegas Seminars Hosted by American Academy of Pediatrics, California Chapters, 1, 2, 3 & 4 Venetian Hotel, Las Vegas Nevada (310) 540-6240 or email aapcach2@aol.com

March 3-6, 2005

Combined Southern
California Pediatric
Postgraduate Meeting
Clinical Pediatrics
California Chapter 2, AAP
Cosponsored by: LAPS
Hilton Palm Springs Resort,
Palm Springs, CA
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See page 4

April 14-17, 2005

16th Annual Las Vegas Postgraduate Pediaric Meeting Sponsored by AAP California Chapter 2 and the AAP The Flamingo Hotel, Las Vegas, Nevada (310) 540-6240 or email aapcach2@aol.com See page 9

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IN MEMORIAM

Columbus D. Alpin, M.D. September 3, 2004

Dr. Alpin joined the Medical Staff at Cedars-Sinai Medical Center in 1977 and served as the Director of Pediatric Surgery.

Memorial services were held on September 11 and September 20.

Milly Liu Liang, M.D. September 17, 2004

Dr. Liu attended medical school in Nanking and did her pediatric training at Stanford and the University of Chicago. Dr. Liu entered private practice in Torrance in 1956. In 1965, she became an attending physician of pediatrics at Harbor-UCLA.

A memorial service was held on October 7.



A TALE OF TWO LECTURES

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

t was the best of lectures and the worst lecture attendance. With apologies to Dickens I must confess that the 2004 Brennemann Leectures had perhaps the finest presentations in recent memory. The speakers, to a person, presented clinically useful information and cutting edge data. Comments from attendees were uniformly enthuiastic. The faculty batted 1000! In addition, Carol

Berkowitz launched the first Clifford Rubin Lectureship with a most informative presentation on the Family Bed.

Our excursion to Sea World was warmly received and thoroughly enjoyed by all. The walruses and manatees were charming.

So where did we go wrong? Why the dramatic drop in attendance? Perhaps the fact that the annual AAP meeting was in San Francisco the following weekend played a role. I hope that was the issue but I'm afraid I see a dangerous trend occurring. Attendance at meetings everywhere has fallen. Have we lost the desire to learn? I hope and think not. We have an obligation to our patients and to ourselves to continue to pursue knowledge, to hone our skills, and refine our practice of pediatrics. The 2005 Brenneman Lectures will afford us such an opportunity. We will meet once again at the Bahia in San Diego from September 22-25,2005. We have an outstanding faculty. The speakers

include Angela Anderson(Toxicology and Poisoning), Bill Storm(Cardiology), Barry Zuckerman(Behavior and Development), Larry Pickering(Infectious Disease) and an old friend from USC, Frank Sinatra(Gastroenterology).

We will once again have an evening excursion. The maiden voyage to Sea World was quite a treat. In the past we have trekked to the zoo or Wild Animal Park, both exciting venues.

Hope to see you in San Diego in 05.

MEMBERS IN THE NEWS

Dr. Leonard Apt, Professor Emeritus of Ophthalmology and Founding Director of the Division of Pediatric Ophthalmology and Strabismus, has established the endowed Leonard Apt Chair in Pediatric Ophthalmology through a \$1-million gift drawn from the trust of Frederic G. Rappaport, Dr. Apt's nephew. This endowment will support the teaching and research of a distinguished faculty member in this subspecialty pioneered by Dr. Apt. Dr. Apt is recognized as a founder of academic pediatric ophthalmology. As the first physician to be board-certified in both pediatrics and ophthalmology, he designed and completed the first organized fellowship in pediatric ophthalmology while serving as the initial National Institutes of Health Special fellow. In 1961, Dr. Apt established at UCLA the first full-time division of pediatric ophthalmology at a medical school in the United States and later became one of the founders of the Jules Stein .Eye Institute. He authored an early text devoted to the field, and his "Apt test," which differentiates fetal from adult hemoglobin in newborns, is known worldwide. He also developed several surgical instruments, including a loupe for magnification in surgery. In addition, his widely acclaimed studies identifying specific allergy to catgut and collagen sutures as a cause of postoperative inflammation led to the development of present-day, non-allergic absorbable sutures. More recently, along with colleague Dr. Sherwin Isenberg, he co-developed a new, inexpensive -antiseptic eye drop, which is now used in developing countries and has dramatically decreased the incidence of eye infections and blindness in children.

FROM THE COPEM

Save Emergency Care! Save Lives! Vote YES on Prop 67.

Proposition 67 is the Emergency Medical Care Initiative. This is an effort to keep local hospital Emergency Departments(ED) and trauma centers open and ensure a rapid-response system for you and your patients. This proposition also will upgrade our existing 9-1-1 phone system as well as provide equipment and training for the paramedics and firefighters who serve our communities throughout California. Our current system is so underfunded that over 60 hospital EDs and trauma centers have closed in the last decade. For our pediatric patients, a longer ambulance ride can mean the difference between life and death!

The funds raised by Prop 67 will go directly to local hospitals, EDs and trauma centers and can ONLY be used to preserve emergency medical care. The money will be audited and the legislature can not take it away for other purposes. This initiative will result in a 3% telephone usage surcharge at a maximum of 50 cents per month for residential customers with out-of-state calls being exempt, as well as full exemption for senior citizens and others on basic lifeline phone rates.

For more information log on: www.saveemergencycare.org Thank you

CLINICAL **PEDIATRICS**

Hosted by:

California Chapter 2, AAP, and American Academy of Pediatrics and cosponsored by Los Angeles Pediatric Society

March 3-6, 2005

At the HILTON PALM SPRINGS RESORT in Palm Springs, California

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ALFRED LANE, MD

Professor of Dermatology and Pediatrics, Chair Department of Dermtology, Stanford University Medical School.

KAREN MILLER, MD

Developmental-Behavioral Pediatrician, Center for Children with Special Needs, Floating Hospital for Children, New England Medical Center, Boston, Massachusetts.

JAY M. LIEBERMAN, MD

Chief, Pediatric Infectious Diseases, Miller Children's Hospital, Associate Professor of Clinical Pediatrics, University of California, Irvine, California.

AENOR SAWYER, MD

Orthopedic surgeon specializing in pediatrics; private practice, San Ramon, California

This program is CME approved. For more information, call 310/540-6240; Fax 310/543-2375; or email aapcach2@aol.com.

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The 2004 Medical Career Program



he LAPS Summer Medical Career Program was created thirty five years ago with the goal of encouraging high school juniors and seniors to pursue a career in the health professions. In 1990, the program was named after Gene Black, who worked for the Los Angeles Pediatric Society for

45 years and helped develop the program.

This year, 52 students were chosen from among 243 applicants to participate in the rigorous four-week program that put them in direct contact with the medical staff and patients. Forty nine students completed the course. Sixteen medical centers in the greater Los Angeles served as sites for the program.

To apply, students were required to write a short personal essay and to supply at least one letter of recommendation. Counselors at the sponsoring medical centers chose which students to admit.

Students were provided a weekly stipend of \$75 to cover incidental expenses. At the end of the program, two students who successfully completed the program

were selected at random to each receive a \$500 scholarship from the Edward M. Rissman Scholarship Fund. The awards will be presented to the students after they finish their first semester of higher education. The winners of the 2004 scholarships are: James Ellis III from Martin Luther King High School in Riverside (Arrowhead Regional Medical Center) and Francessca Estella from Woodrow Wilson High School in Long Beach (St. Mary's Hospital).

Following is a sampling of letters of thanks we received this year.

Anyone interested in participating in next years' Gene Black program should contact Dr. Hamilton at (310) 264-2100.

Dear Ms. Carr, My name is Joseph Ferrigno from the area of San Pedro, California. I was assigned to Harbor-UCLA general hospital. I just want you to know it was one of the most productive, influential, and rewarding experiences I have ever had the pleasure to participate in. A little history of myself made it very easy to relate to. I was born a premature baby 18 years ago at a total weight of 1 pound 11 ounces and a 25 weeker Anyways, when I got the chance to enter the neonatal unit for a morning shift, it really made me relate. It made me feel so fortunate to be alive today and to know what these babies suffer, I once suffered. This is the primary reason I chose medicine, I feel the self-determination to become a pediatric neonatologist and return the favor of life to these babies. One doctor made sure I am here today, and I want to assure another baby in the future he will live a full productive life like I do. This is the reason I cherished the chance to participate in the Gene Black Summer program. Everything I saw I thoroughly enjoyed. There was nothing bad about the program and I hope to have high school seniors enjoy this program as much as I once did. It is truly amazing and I thank you from the bottom of my heart for making it run smoothly.

With much thanks and supreme gratitude.

Program Site: Harbor UCLA General

First of all I would like to thank you for allowing me to experience this opportunity. It was completely amazing. I learned and witnessed so much.

My favorite department is the ER. There was so much action and all the cases differed. The doctors were very nice and explained a lot about how they go

I also saw open heart surgery. It is such an incredible process. I watched from the beginning when the about their day. anesthesiologist step up all his machines. It is still unbelieveable to me how they stop the heart and a machine can replace it. Again, the doctors let me know what was going on which was really neat. I can still see images of the surgery whenever I talk about it. Another department that I really enjoyed was

pathology. I touched a real brain!! I also got to feel an amputated foot, a spline, and a breast tumor. I thought I would totally grossed out, but instead I liked it a lot. A pathologist showed me the difference between cancer cells and healthy cells under a microscope. That

And of course I loved the labor and delivery department. I saw a c-section and a vaginal delivery. I was really awesome. also saw tubes being tied. It was so amazing to be in a room with four people and then suddenly there be five people in the room. I still cannot believe I got to be apart of such a joyous experience for two families.

Again, thank you for picking me to be one of the lucky fifty three selected. I will always remember this wonderful Erica Dorfman experience.

Tarzana Hospital

These past four weeks have been the best experience I have ever had. I learned so much that many my age would usually never have the chance to experience. What I enjoyed the most was how many departments we visited and had a chance to observe. Many departments I visited I never thought of as a career that interested me, but now I realize that there are so many options in the medical career. What is wonderful about this program is that you get to see things first hand. Watching surgeries was so amazing and I really enjoyed how many of the doctors, nurses, and technicians we worked with tried to incorporate us into their work to make it more worthwhile. The only thing I wish was different is that it could have been longer Emily Gallegos than a month long!

Kaiser Permanente Woodland Hills

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 \$75.00 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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Huntington Memorial Hospital, Pasadena Kaiser Foundation Hospital. Harbor City Kaiser Foundation Hospital, Woodland Hills King/Drew Medical Center.

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Tarzana Medical Center, Tarzana UCLA Medical Center. Los Angeles White Memorial Medical Center, Los Angeles

INTERNATIONAL VOLUNTEER OPPORTUNITY

Mission Doctors Association



A young mother in a remote village of Papua New Guinea began a three-day journey to St. Mary's hospital near Rabaul. One of her sons was deathly ill with a fever and she knew he needed the help of the doctors and nurses there. With two sons in tow, she made her way on foot through the dense forest. Before she could reach St. Mary's, the first child had died and the other two had become very sick. Soon after reaching the hospital the second child died of meningitis. The third was saved by the administration of IV antibiotics under the medical care of Dr Louis Coda, a pediatrician working with Mission Doctors Association from Los Angeles. This story illustrates the difference in the human drama of medical care that many of us went into pediatrics hoping we could make.

Many physicians have felt a calling to help those less fortunate, and many have found an outlet for such altruism in medical missionary work, either with secular or religious organizations. Just the freedom of working with patients without the day-to-day hassle of stringent regulations, the threat of malpractice suits, and the rigors of a medical office is often reward enough for volunteering time in third world settings. But the true reward is making a difference in the lives of those who need help.

In 1959, the Los Angeles-based Mission Doctors Association (MDA) was founded by Monsignor Anthony Brouwers following a call by African bishops for people with medical training and expertise to come and help in rural towns and villages. Since that time, MDA has sent Catholic doctors to many countries including Ghana, the Camaroons, Zimbabwe, Papua New Guinea, and Guatemala. Recently, we have been asked to help in Uganda, Kenya, and Equator.

Physicians of all types. ... pediatricians, surgeons, internists, family practitioners, ophthalmologists, and orthopedists have given their

time and talent to healing the sick and injured. Traditionally, MDA has sent physicians and their families following an extensive preparation class, on two or three year assignments, most often imme-



diately following training or upon retirement.

In the past five years, MDA has adopted a short-term program of one- to three-month stays to locations where there is a Mission doctor in place. This gives a physician with the zeal to help (but without the ability to be away long-term) to experience "mission," and do



some actual good while having the camaraderie of a veteran already on-site. This has turned out to be our most successful program. Ten physicians have done short-term missions in four countries over the past year. The need is inexhaustible and the reward is immeasurable to those who have responded with time, conviction, and dedication. For those unable to "heal the sick" with personal time and commitment, there has been the good of supporting the organization through administration on the Board. Please visit our Web site at www.missiondoctors.org.

DR. JIM SEIDEL MEMORIAL FUND



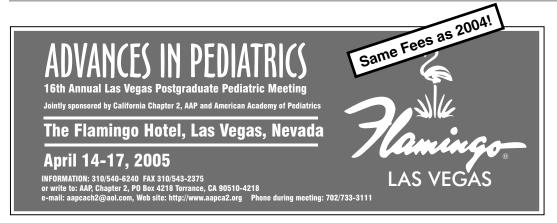
The Los Angeles Pediatric Society has established the Dr. Jim Seidel Memorial Fund in support of the Gene Black Summer Medical Career Program. Once the goal of \$25,000.00 is reached, we will issue a Dr. Jim Seidel Memorial Scholarship to one student in this program each summer. Selection of the student will be based on Hospital Counselor recommendations and the student's essay about their experience in the program.

Please make donations payable to the Los Angeles Pediatric Society, with "Dr. Jim Seidel Memorial Fund" in the memo section of your check and mail to P.O. Box 4198 Torrance, CA 90510-4198. Tax ID #95-2673275.

Name:	
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GENE BLACK SUMMER MEDICAL CAREER PROGRAM
Would you like to participate in the Gene Black Summer Medical Career Program? Do so by giving your monetary support to:
MEDICAL CAREERS UNLIMITED 2004/2005 MEMBER
O Individual \$50.00 O Donor \$100.00 O Medical Group \$100.00
If Medical Group Donation, list name and address of medical group and names to be listed:
In Honor of
 O Donor \$100.00 O Circle of Friends \$500.00 O Golden Circle of Friends \$2000.00 O Platinum Circle of Friends \$5000.00
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Donors will be recognized publicly in the newsletter. Donations of \$1000.00 or more will be recognized for five years from date of donation. (Make checks payable to the Los Angeles Pediatric Society and mail to P.O. Box 4198 Torrance, CA 90510-4198.)



Tuition Fee:	Before Mar 15	After Mar 15
Physicians: Members of AAP California Chapter 2	\$550	\$575 \$
Physician Non-members	\$600	\$625 \$
Pediatric Residents Hospital	\$295	\$325 \$
Allied Health Personnel	\$295	\$325 \$
Physicians Emeritus with AAP Chapter 2	\$125	\$150 \$
(tuition does not include luncheon seminar costs)		

Welcome New LAPS Members!

Naya Nicole Juul-Dam, MD, Seattle, WA (resident)

Katrina C. Kammerer, DO, Los Angeles, CA (resident)

Tracy Lynn Zaslow, MD,

Los Angeles, CA (resident) Angelee K. Reiner, MD,

Tarzana, CA (resident)

James C. Henry, MD, Glendale, CA

Jennifer Ann Hartsteim, MD, Glendale, CA

Richard Harlan Feuille, Jr., MD, Glendale, CA

Sharon Beth Kaminker,

MD, Santa Monica, CA

THE STATE OF EMERGENCY MEDICINE

Janet Semple-Hess M.D.

(Editor's note: It was not so long ago that doing a shift in the ER was a way to keep in touch with critical care while earning a few extra dollars during those early years of practice. Like much of medicine, things have changed in the ER. Patient care has become much more complex. Patient Transport and Paramedic units have become essential links in providing timely care for the critically ill and injured. I asked Janet Semple-Hess MD to give us an update on what is happening in Emergency Medicine. With the economic pressures on Emergency Departments in LA, we are fortunate to have such quality services available at Childrens Hospital. RGM)

t is 4 pm and there is a swarm of pediatric residents, nurses, and patients in the Emergency Department. A three-week old with a fever is about to have a septic workup in Bed A, and a child with a seizure disorder who is having increased seizures in Bed B. There are two children with fractures that need to be reduced under sedation, and a leukemic patient with neutropenia and fever who has now become hypotensive. The two asthmatics in the Respiratory Room need additional albuterol treatments and a dose of Prednisone. Just at this moment, the NowCare phone line, which connects the Emergency Department at CHLA to EMTs, paramedic units, and Base Stations throughout Los Angeles County, rings. The ED attending picks up the phone, and all goes silent. There has been a multiple victim highway accident, with fatalities, on Highway 118.

A wide variety of illnesses or injuries come through our doors; from patients with rare or complex subspecialty diseases, children and adolescents tragically suffering from multi-system trauma, to those with more common illnesses, such as bronchiolitis or croup.

There are at least five pediatric trauma victims. Los Angeles County Air Squad is helicoptering two criticals, a three-year-old and a five-year-old with head and abdominal trauma to the CHLA ED—ETA is 15 minutes. "How many more victims can you take?" the Base Station Nurse asks. A physician, nurse, and respiratory therapist make their way to the helipad immediately. The Trauma pager system is activated to announce a Level I Trauma, as the Trauma Team, led by the ED Attending and Trauma Surgeon assemble.

Pediatric Emergency Medicine has evolved enormously in the last 20 years throughout the nation, starting out in the late 1970s and early 1980s as pediatricians managing "emergency rooms" in pediatric hospitals. During this time, a pioneering group of pediatricians spearheaded a call to action nationwide to improve emergency services for children. As one result of this action, Pediatric Emergency Medicine has been recognized with a subsection of the AAP in 1992. The attending physicians in the CHLA Emergency Department are board-certified in Pediatric Emergency Medicine, having completed a residency in either Pediatrics or Emergency Medicine and a Fellowship in Pediatric Emergency Medicine. This allows the clinicians, at CHLA, the ability to deliver highly specialized pediatric emergency care to patients throughout LA County. In addition, an active fellowship program with five fellows currently in training has been developed.

The Division of Emergency and Transport Medicine at Childrens Hospital Los Angeles, affiliated with the USC Keck School of Medicine, includes the Emergency Department, Childrens Emergency Transport Program, and Kids Care — our urgent care area. The Division sees and treats approximately 60,000 patients annually, with approximately 36,000 patients seen in the ED and 24,000 patients evaluated in Kids Care. Many of these visits are referrals from community clinics and pediatricians.

Each day, a large number of patients arrive from community clinics and pediatricians' offices along with patients transported in from smaller community emergency departments. On some days, our volume of patients exceeds 200-300 visits per day, especially in winter months. A wide variety of illnesses or injuries come through our doors; from patients with rare or complex subspecialty diseases, children and adolescents tragically suffering from multi-system trauma, to those with more common illnesses, such as bronchiolitis or croup.

The CHLA Emergency Department is a designated Level I Pediatric Trauma Care Center, one of 12 pediatric trauma centers in the nation. Patients are treated by a specialized Trauma Team that consists of Emergency physicians, surgeons, nurses, respiratory therapists and ancillary personnel. The Hospital is also a Pediatric Critical Care Center, a designation that signifies the hospital's capabilities of providing emergency and critical care to ill or injured patients from infancy through adolescence.

The Emergency Department is staffed 24 hours a day by seven full time and five part time attendings. The attending staff is a young, energetic group of physicians dedicated to the teaching and supervision of medical students, residents, and pediatric emergency medicine fellows.

Pediatric residents from CHLA, as well as residents from seven other pediatric, emergency medicine, and family practice residency programs rotate through the Emergency Department each year. Emergency Medicine faculty provides a formal lecture series, intubation labs, suture and splinting labs, journal club, and mock codes to enhance clinical practice. In addition, there is active participation by the Emergency Medicine faculty in outreach programs throughout Southern California and at the national level through the AAP and ACEP. The Pediatric Emergency Medicine fellowship program has been active since 1984.

The mission of the Division of Emergency and Transport Medicine is to deliver the most comprehensive, and advanced emergency care to patients. Every effort is made to communicate with the referring physician or facility regarding care while the patient is still in the Emergency Department, or by fax, if follow up is required.

The staff at CHLA welcome any questions, comments, or suggestions, regarding care provided in the CHLA Emergency Department. Our community liaison physician is Dr. Janet Semple-Hess who may be contacted at (323) 669-2109 or email (jsemple-hess@chla.usc.edu).

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.

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First	Middle	Last		
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YOUR CHECK FOR FIRST YEAR'S DUES (\$100) MUST ACCOMPANY APPLICATION LIFE MEMBERSHIP: \$1000 (One-Time)



IF YOU ARE NOT ON OUR MAILING LIST:

Free membership in LAPS until June 30, 2005 to all third-year pediatric residents graduating this June, 2004. Our gift to you. Just fill out the application on page 11 of this newsletter and return to PO Box 4128 Torrance, CA 90510-4198

or fax to

(310) 543-2375

FREE 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.



los angeles pediatric society

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