President's Report

President, NASPGHAN: Benjamin D Gold, MD

The 2nd 6 months of 2021 . . .

To my Friends and Colleagues of NASPGHAN, CPNP and APGNN:

For those of you who remember my words in this column in June of 2021, with lots of optimism, glass-half-full mentality, along with a dose of rose-colored glasses perspective, I stated that “ . . . on November 3-7, 2021, we will all be together again in Nashville, TN at our Annual Meeting, Postgraduate and Single Topic Symposium on Aerodigestive Disease at the Grand Old Opryland Hotel and Conference center . . . ” And, well, boy was I ever wrong! Who would have predicted that at the start of 2022, the omicron variant of SARS-CoV2 would be raging and we would have had to pivot at the 11th hour and put together the 2021 Annual Meeting as a virtual meeting in its entirety, held December 12-18th, 2021? Before I go on, I would like to thank everyone who made themselves available to pre-record their talks if they were asked to, and, be available for live Q&A at the day/time of their presentation. In addition, my heartfelt thanks to all of the speakers, moderators, committee chairs and vice chairs, Council members and the leadership of NASPGHAN for the 2021 Annual Meeting’s incredible success! Further, my special thanks to Laura Smith, our NASPGHAN Meeting and Events Director and Margaret Stallings, as well our President-elect, Jen Lightdale, who were the mighty engine of creativity and energy that made the meeting a success.

What a year 2021 was for all of us . . . feels a little like the movie Ground Hog Day doesn’t it . . . although I would venture to say, there is a new administration running the country and now ongoing attempts at letting science and data-lead anti-pandemic actions as well as systematic attempts at eliminating misinformation. NASPGHAN continues to provide updated resources on our website that are consistent with the most relevant science and recommendations so that our members can continue to take care of our patients with digestive disease effectively, safely and infection-free.

NASPGHAN members continue to contribute to a variety of projects, including patient resources made available on our website and at GIKids.org, multiple articles published in JPGN reporting on member-driven surveys, and a series of practical, evidence-based interactive webinars and teleconferences. The Virtual Webinar Wednesdays offered a variety of topics for members to contribute to and to learn from. NASPGHAN’s International Committee, led by Dr. José Garza, now starting his tenure as an elected Councilor, held two highly successful and well attended jointly developed and implemented webinars with our colleagues from the Asian Pan Pacific Society, APPSPGHAN with topics ranging from the east-west perspective of COVID-19 impact, and the implications in pediatric resources on our website that are consistent with the most relevant science and data-lead anti-pandemic actions as well as systematic attempts at eliminating misinformation.

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gastroenterology and non-IgE food allergy in Webinar 1, and, in Webinar 2, East and West perspectives on neonatal cholestasis as well as the NASPGHAN and APPSPGHAN perspective on H. pylori eradication therapy.

Similarly, despite the impact of the pandemic on the economy, our financial status remains strong. In addition to the success of the 2021 Virtual Annual Meeting, our organization remains economically viable and strong with our industry partners who have continued to step-up with their financial support, and the vigilant oversight of our Secretary-Treasurer, Norberto Rodriguez-Baez (see Dr Rodriguez-Baez column in this newsletter).

Further, social media presence of NASPGHAN has never been stronger, from the ‘twitter-sphere’ to Instagram to, now beginning its 3rd year, increasingly popular Podcast called Bowel Sounds, which launched its inaugural episode at the 2019 Annual Meeting in Chicago. Bowel Sounds (led by Jennifer Lee, Peter Lu, Jason Silverman and Temara Hajjat) has stepped up its game in the 1st 6 months of 2021, now appearing two times monthly. It brings key issues to our members, including those that are relevant to the society as a whole to clinical aspects of pediatric gastroenterology, hepatology, pancreatology and nutrition as well as the production crew’s unique talent of providing evidence and practical clinical points to highlighting the special individuals and their personalities that are the highly regarded experts within our organization.

With respect to training our fellows, we owe our gratitude to the enthusiastic leadership of Christine Lee, Danny Mallon and all of the members of the Training Committee who were able to reformat and then execute the first ever virtual 1st year Fellows Conference, a virtual 2nd year Fellows Conference — with ongoing activities dedicated to keeping our fellows of all years connected — to each other, to the organization and to mentors. The Training Committee, with methodical thoughtful planning, was able to hold the 3rd year Fellows Conference in Miami, in September 2021 in person; with a highly successful and COVID safe conference.

In keeping with NASPGHAN’s other high priority objectives, Diversity, Equity and Inclusion training was incorporated into each of the fellows’ conferences, and there was a specific emphasis at this year’s virtual Annual Meeting on those attendees who belonged to under-represented minorities in medicine groups, and, hosted six 3rd and 4th year medical students with an expressed interest in pediatrics who attend the oldest HBCU in the country, Meharry Medical School. The talented, energetic Fellows Committee, which has been incredible this past year and a half, continue to be involved and contribute to all aspects of our organization. I truly believe that our organization, NASPGHAN will be in good hands for many years to come.

On the advocacy and professional development front, our Society continues to tirelessly speak up for our patients and more broadly advocate for the welfare of children. NASPGHAN has continued to lobby our representatives and senators about magnet safety, medical nutrition and equity and about pediatric gastrointestinal disease in general. NASPGHAN’s members dedicated to Advocacy and Public Policy were involved with the Virtual Day on the Hill held June 15, 2021.

As mentioned above, NASPGHAN has committed to improving diversity, equity, and inclusion in our profession, Society, to diminish health care disparities, and to improving the social context of the marginalized patients we serve. The NASPGHAN Professional Development Committee (PDC), led by Gitit Tomer and Rina Sanghavi, continues to keep the issues of gender representation, equality and participation at the forefront, and as mentioned, the PDC, in conjunction with the Diversity Special Interest Group led by Conrad Cole is undertaking a systematic assessment of our Society with respect to gender designation, ethnicity and race. The executive working group of the SIG: Dennis Spencer, Tiffany Patton, Crystal Tsai, Eyad Hanna and Val Cohran moved into the action phase to establish actionable goals, including NASPGHAN being an active member of the Intersociety group on diversity (IGD); a group that includes 2 member representatives (Drs Val. Cohran and Conrad Cole) and 1 staff member (Margaret Stallings) from the GI societies (AGA, AASLD, ACG, ASGE and NASPGHAN). IGD accomplishments include releasing statements following the presidential elections, conducting social media campaigns during the Minority Health Month, Asian Pacific American heritage month, National Indigenous Peoples Month and the National Hispanic Heritage Month, as well as completing a survey on gender and ethnic diversity in the member organizations with a publication of some type appearing in all of the major GI journals.

In closing, there are an incredible number of wonderful aspects to our Society, a great number of people who stepped up and made a difference, and so many wide-ranging accomplishments that shine brightly despite all we have been through to remind us that there is much to look forward to and with excitement about the future.

My wife Wanda, my family and I want to extend our warm wishes and love to you all for a safe, productive, and truly blessed 2022.

Stay safe, stay healthy and may you and your families have a wonderful new year!

Respectfully yours,

Benjamin D Gold, MD, FAAP, FACP, NASPGHAN-F
President, NASPGHAN
Children’s Center for Digestive Healthcare | Atlanta, GA
Happy New Year everyone! As we say farewell to 2021, and prepare for brighter days in 2022, I hope y’all can join me in reflecting on another successful NASPGHAN Annual Meeting and Postgraduate Course that was ultimately held live a few weeks ago this past December. Although I know all of us would have preferred to have celebrated together in a line dance at Nashville’s Grand Ole Opry, it was nevertheless truly inspiring to experience our entire society “pivoting together,” as we did the right thing and held the meeting virtually. Thanks so much to all of you, especially Laura Smith, Margaret Stallings, and the specially tasked “HAM” committee, for your support in helping us to figure out how to best navigate the pandemic.

Of course, in the end, NASPGHAN didn’t miss a beat. Kicking it off on December 12 was the fantastic Single Topic Symposium on Aerodigestive Medicine that featured otolaryngologists, pulmonologists, speech pathologists, patients, and of course, many of our own GI colleagues, in a true demonstration of its titular emphasis on “Advancing Collaborative Care.” This was followed by the opening sessions for the 2021 Teaching and Tomorrow Program — attended by 121 residents considering careers in pediatric GI. Highlights of the Plenary Session that Sunday evening were many and included the 2021 Balistreri Lecture on Enteropathogenic E. coli by Dr. Gail Hecht, and a great Year in Review by Sandeep Gupta, NASPGHAN Editor-in-Chief for JPGN.

Over Monday-Friday, December 13-17, more than 1,845 of us took time to enjoy more than 28 concurrent sessions of the Annual Meetings of NASPGHAN, APGNN and CPNP. Efforts to ensure a highly diverse, equitable and inclusive faculty paid off, and the meeting was chock-full of luminaries, as well as up and coming pediatric gastroenterologists from all across North America, discussing hot topics and incisive management of many clinical and professional scenarios we collectively face daily. Monday night was particularly memorable because it featured a thrilling ceremony where many deserved awards were conferred, including awardees Glenn Furuta (the Harry Shwachman Award), Estella Alonso (the Murray Davidson Award), Barry Wershil (the Margaret Stallings Distinguished Service Award), and Praveen Goday (2021 NASPGHAN Master Educator Award). Congratulations to all of this year’s award winners!

Throughout the meeting, the exhibits and poster sessions were super cool with live Zoom rooms that let us all feel like Harry Potter, as we “apparated” in and out to speak with presenters. This year’s meeting also featured a highly successful trial of “poster tours” that were led virtually by members of our inimitable Research Committee. (Next year, we hope to again to have poster tours — but this time, in person!) To close things out on Sunday, December 18th, co-chairs Maria Oliva-Hemker and Toba Weinstein led a wonderful Postgraduate Course that was attended by 802 registrants and that featured state-of-the-art updates on topics across our specialty. What a treat!

Of course, no need to be sad if you missed any of this. A silver-lining of our new normal is that all sessions of the Virtual 2021 NASPGHAN Annual Meeting, Postgraduate Course and Single Topic Symposium were recorded and will be available for a full year, up until December 12, 2022. This means it’s like “BACK TO THE FUTURE” as registration is still open along with the potential to get CME or MOC credit.

Looking forward, the Officers, Council, and Committee Chairs will be gathering over Martin Luther King Weekend to plan the 50th NASPGHAN Annual Meeting to be held October 13-16, 2022, at the beautiful Rosen Shingle Creek in Orlando, FL. Please reach out if you have any suggestions about topics or the festivities, and thanks to all of you who are already helping to put together this epic event. For now, put a smile on your face and some pep in your step because it’s almost time to get dancing!

Jenifer R. Lightdale, MD, MPH
President-elect, NASPGHAN

Welcome New 2021 NASPGHAN Members (as of June 2021)

Rami Arrouk
Laurence Chapuy
Jennie David

Allison Hatley-Cotter
Jorge Herrera
Jui-Yen Huang

Bhargava Mullapudi
Jay Shafi
Secretary–Treasurer's Report

Dear Colleagues,

Happy New Year 2022! Greetings from your Secretary Treasurer! The public health and economic effects of the COVID-19 pandemic are devastating and continue affecting the well-being of people around the world. However, despite the headwinds created by this global crisis, NASPGHAN has been able to continue rising and maintaining a solid position.

**MEMBERSHIP**
Our Society keeps growing! The current membership of NASPGHAN is about 2,604 (90 emeritus; 8 members who are also members of ESPGHAN; 459 fellows; 20 psychologists; 52 members of the Editorial Board; 1,904 full members; and 71 international). There are 47 Fellow of NASPGHAN members, 397 members in the Association of Pediatric Gastroenterology and Nutrition Nurses (APGNN) and 202 Council for Pediatric Nutrition Professionals (CPNP) who are actively involved in collaborative activities with NASPGHAN. Membership is not reflected simply by the numbers. NASPGHAN is extremely fortunate to have committed and engaged members serving at every level in our organization. Thank you!

**FINANCES**
NASPGHAN’s primary revenue sources include membership dues, JPGN royalties, Annual Meeting registrations, investments and support from our supporters. As of October 2021, the membership dues were exceeding expectations. The JPGN income and royalties were at target. The revenues for the 2021 Annual Meeting and Postgraduate Course were also at target. However, there were additional costs for organizing a virtual meeting as well as penalties for canceling the in-person meeting in Nashville. There was a cancellation fee of $797,020. NASPGHAN and the Gaylord Hotel administration came to an agreement that resulted in the payment of $298,510 as the final cancellation fee and rebooking a same size annual program with the hotel for 2027.

Prior to 2016, our investment model was “Cash and Bonds,” which is pretty conservative. In 2016, we moved to a more aggressive plan (Growth with Income). This model takes advantage of the market strength, allowing a buffer for funding of NASPGHAN projects. We did well in 2020 with a fund balance of $9,147,808. By October 25, 2021, our consolidated asset allocation was $11,512,688. NASPGHAN works closely with the financial firm Glenmede Trust Co., which has been instrumental in guiding us towards maintaining a growing investment portfolio. The recommendation of the Finance Committee is to continue our current investment strategy. We propose organizing a strategic planning meeting in 2022 to identify new initiatives and expand programs, as well as to continue supporting our current activities.

I encourage you to continue supporting NASPGHAN and the NASPGHAN Foundation in our mission to advance the field of pediatric gastroenterology, hepatology, and nutrition through education, advocacy and research. Please feel free to contact me at (norberto.rodriguez-baez@utsouthwestern.edu) for any questions or concerns. I look forward to seeing you in-person at the celebration of the 50th anniversary of NASPGHAN in October 2022.

Your Secretary Treasurer,

Norberto Rodriguez-Baez, MD
Secretary-Treasurer, NASPGHAN
Dallas, TX
Dear Colleagues:

HAPPY NEW YEAR! Although given that we couldn’t meet in Nashville and are in the midst of yet another COVID wave, we can only hope that 2022 will be better than 2020 and 2021. Still, despite the frustrations, stress, and uncertainties of these two years, it seems that one of the few constants is that as professionals, we have been able to count on our colleagues, both at home and across this amazing society. As we head into our 50th anniversary year, the commitment and effort on behalf of each other and our patients are truly inspiring. Given that so much of what we do remains virtual, the advances in science, patient care, education, and quality presented at our meeting last month were nothing short of amazing.

Through the collective efforts of so many of you, our organization remains strong, and we were able to continue to support our education and research missions. Thanks to our collective work, and the support of our Partners, Foundation supported projects for 2021 included:

› **ONLINE LEARNING MODULES**

**The ABCs of EGIDs Online Learning Modules**
This huge project came to completion, please join me in thanking all of the faculty and the leadership of Course Directors, Sandeep Gupta, MD and Jonathan Spergel MD, PhD.

**NASPGHAN Nutrition Curriculum for Pediatric Gastroenterology Fellows**
This comprehensive and enduring resource for fellows also came to completion, and thanks also go to the faculty under the steady leadership of Drs. Praveen Goday, Candi Jump and Ala Shaikhkhalil.

› **WEBINARS**

**Four-part series on Parenteral Nutrition**
Thank you to the Nutrition Committee (Chair: Timothy Sentongo, MD).

**Advances in Diagnosis and Treatment of Alagille Syndrome**
With thanks to our Hepatology Committee and Course Director, Kathleen Loomes, MD.

**Transnasal Endoscopy: Going Where We Have Never Gone Before**
With thanks to Course Directors Vrinda Bhardwaj, MD and Kristina Leinwand, MD.

**EGIDs: Beyond the Esophagus**
With thanks to Course Director: Joshua Wechsler, MD.

 › **COMING SOON!**

**HCV Slide Deck and Grand Rounds Series**
Thanks to the Hepatology Committee and leads Mercedes Martinez, MD and Kathy Schwarz, MD and Yen Pham, MD.

 › **COURSES**

The popular N2U Course was again held virtually, led by members of the Nutrition Committee and Course Director, Timothy Sentongo, MD.

 › **PATIENT & FAMILY EDUCATION MODULES**

**Liver Disease and Nutrition Considerations in PBD-ZSD**
Katie Sacra, Family Education and Engagement Liaison for the The Global Foundation for Peroxisomal Disorders served as moderator James E Heubi, MD participated in Part One. Sarah Fleet, MD participated in Part Two.

**Nutritional Management of Children with Cholestatic Liver Disease (September 2020 Webinar)**
Sanjiv Harpavat, MD was moderator.

**Doc4Me Updated**
Thanks to Jeannie Huang, Foundation Treasurer.

 › **GIKIDS MATERIALS**

These materials are continually being updated and again thank you to the members of the Public Education Committee and special thanks to the web editors Athos Bousvaros, MD and Priya Raj, MD.

 › **MORE TO COME FOR 2022**

Support for research by our members and affiliated professionals remains strong as well. We were able to add to our portfolio and obtain funding for a grant to support research in pancreatic disease. Tremendous thanks go to the Research Committee, led by Bruno Chumpitazi and Kathy Loomes, for their work in reviewing the large number of highly competitive applications. We were proud to be able to award 10 grants this year, but as always, remain frustrated that so many worthy applications were not able to be funded. We remain committed to the pursuit of new sources of research support for our members and affiliate societies.

I want to come back to the streamlined mission statement of the Foundation, which is to fund and support “the professional and patient education and research missions of NASPGHAN” — in other even plainer words, the Foundation is us. I want to thank…
again the NASPGHAN members who have generously donated to the Foundation and ask those that have not yet, please include NASPGHAN and the Foundation in your annual charitable giving. Giving to the Foundation remains easy and mobile, just TEXT 4GIPEDS to 215-608-5488.

As we look back on 2021, and the promise of a new year, I want to thank and acknowledge the support of our Corporate Partners and Supporters.

Finally, please join me in acknowledging our Foundation Board members, and the executive leaders, Ann Scheimann (President-Elect), Barry Wershil (Past-President), Jeannie Huang (Secretary-Treasurer), and of course, Margaret Stallings and the dedicated staff in the NASPGHAN office.

Again, my best wishes for a happy and healthier 2022!

Sincerely,

Menno Verhave, MD
President, NASPGHAN Foundation
Boston, MA

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[Click here If you would prefer to donate online!]

NEW NASPGHAN FOUNDATION ALCRESTA RESEARCH AWARD IN PANCREATIC DISEASES

Deadline: March 15, 2022

Applications are now being accepted for the new NASPGHAN Foundation/Alcresta Research Award for the Study of Pancreatic Disease in Children for Fellows and Junior Faculty. This award will provide $75,000 for one year to a fellow or junior faculty member for meritorious studies focused on pancreatic disease in children. Relevant conditions and areas of interest include but are not limited to: acute or chronic pancreatitis; exocrine pancreatic insufficiency; pancreatic-related fat malabsorption; quality improvement of patient outcomes in areas related to primary or secondary pediatric pancreatic disease; pancreatic acinar cell disorders. Additional details are available. Submissions are due March 15, 2022.
Thank you to our members for their generous donations
(As of September 2021)

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Leslie Higuchi, MD

Jeannie Huang, MD, MPH, PhD, NASPGHAN-F
Sohail Husain, MD
Mark Integlia, MD
Maureen Jonas, MD
Abha Kastha, MD
Daniel Kam, MD
Mitchell Katz, MD
Ajay Kaul, MBBS, MD
Judith Kelzen, MD
Drew Kelts, MD
Barbara Kirschner, MD, FAAP
Ronald Kleinman, MD
Samuel Kocoshis, MD, FAAP
Katja Kovacic, MD
Patricia Kruzowski, DO
Sakil Kulkarni, MD
Sharad Kunnath, MD, MPH
Donald Laney Jr., MD
Christine Lee, MD
Simon Ling, MB, CHB
Anthony Loizides, MD
Cara Mack, MD, NASPGHAN-F
William Maclean, Jr., MD
Eric Maller, MD
Jonathan Markowitz, MD, MSCE, NASPGHAN-F
Alan Mayer, MD, PhD
Randall McClellan, MD
Yvonne McFarlane-Ferreira, MD
Mairead McSweeney, MD, MPH
Fernando R. Medina Carbonell, MD
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Alexander Mieshke, MD
Elizabeth Milesi, DO
Richard Mones, MD
Sean Moore, MD, MS
Kathleen Motil, MD, PhD
Derrick Moulton, MD
Elaine Moustafellos, MD
Suzanne Nelson, MD
Janaina Nogueira, MD
Inna Novak, MD
Samuel Nurko, MD
Bankole Osuntokun, MD, MS
Dinesh Pashankar, MD
Maria Perez, DO
Michael Pickens, DO
Randi Pleskow, MD
Philip Putnam, MD
Leon (Yul) Reinstein, MD
Amanda Ricciuto, MD
Albert Michael Ross IV, MD
Robert Rothbaum, MD
David Rudnick, MD, PhD
Paul Rufo, MD, MMsc
Nasim Sabery Khavari, MD
Neha Santucci, MD

Meghana Sathe, MD
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Sally Schwartz, RD, CSP, LDN
Sarah Schwarzenberg, MD
Jeffrey Schwimmer, MD
Gaith Semrini, MD
Amesh Shah, MD
Edwin Simpser, MD
Cass Smith, MD
Jason Spence, PhD
Jessica Stumpf, MD
Kevin Sztam, MD, MPH
John Thompson, MD
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Amethyst Kurbegov, MD, MPH
Christine Lee, MD
Jessica Lee, MD
Anthony Loizides, MD
Eric Maller, MD
Daniel Mallon, MD
Dear NASPGHAN Members,

I hope this update finds you and your families well. While we were hopeful to meet in Nashville this year, the pandemic had different plans, yet again. Despite this, I’m proud of the incredible programs NASPGHAN, APGNN, and CPNP were able to put forth virtually. On behalf of APGNN, I’d like to extend my gratitude to all the members of NASPGHAN who assisted APGNN in this process, especially Laura Smith and Margaret Stallings. APGNN had a successful year with award recipients, Board elections, and the launch of our GI Nursing Certificate Program.

APGNN would like to again recognize our award recipients for 2021:

- **Susan Moyer NASPGHAN Foundation Grant**: Melanie Oates, RN, BSN—Improving IBD Care Through Parent Mentoring

- **Excellence in Education Award**: Emily Ventura, RN, BSN, CCRN—Creation of an educational brochure for patients and families with targeted disease information on Progressive Familial Intrahepatic Cholestasis (PFIC)

- **Sue Peck Excellence in Nursing Practice**: Patricia A. Bierly, MSN, CRNP—Nominated by Teresa Carroll, APRN

- **Excellence in Mentoring Award**: Margaret Stallings, NASPGHAN Executive Director—Nominated by Amy Donegan, MS, APRN

The APGNN Board transitioned in November, saying farewell to Katie Rowell and welcoming Jordan Trotter-Busing (Vanderbilt Children’s Hospital) as the new Patient & Professional Education Committee Chair. Sara Fidanza (Children’s Hospital Colorado) was re-elected as the Chair for the Research & QI Committee, and Kerry Reed (Children’s Hospital Colorado) was elected as our new President-Elect. Kerry will also continue as the Secretary/Treasurer this year. Amy Donegan (Nationwide Children’s Hospital) completed her Past President term and was instrumental in the development of the GI Nursing Certificate Program. I am thrilled to announce that Amy will spearhead the APGNN GI Nursing Certificate Advisory Board.

As you heard in the NASPGHAN Plenary, we have officially launched the Pediatric Gastroenterology Nursing Assessment-Based Certificate Program. We are so excited to offer this evidence-based CE program to our members, focusing on the fundamentals of Pediatric GI. This is a fantastic resource for new-to-GI nurses and Advanced Practice Providers, and those who pass all 13 learning modules will receive a “Certificate of Pediatric Gastroenterology, Hepatology, and Nutrition Nursing”. This serves as a comprehensive onboarding program that meets national standards and improves baseline knowledge of staff. For those who are interested in specific topics, individual modules are available for purchase and can be utilized by anyone including GI psychologists, social workers, and dietitians. The modules are self-paced, interactive, and include required readings comprised of NASPGHAN position papers, guidelines, or peer-reviewed articles. Content was developed by APGNN subject matter experts, and we were fortunate to have our physician colleagues review all content prior to publication.

We want to share our program with everyone and in this spirit have created discount codes for APGNN, NASPGHAN, and CPNP members. Additionally, we are offering organizational discounts to those divisions who support nursing continuing education. You can visit the APGNN website for more information or email me directly with any questions!

On behalf of APGNN, we wish all of NASPGHAN a happy and healthy start to the New Year.

Warm Regards,

Elizabeth Burch, MSN, RN, CPNP
APGNN President-Elect

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**Apply for NASPGHAN Fellow (NASPGHAN-F) Status**

Eligible NASPGHAN members can now apply for the Fellow of NASPGHAN status (NASPGHAN-F).

Attainment of the prestigious Fellow of NASPGHAN status is for those NASPGHAN members who have made significant contributions to the field of pediatric gastroenterology, hepatology or nutrition. Members with a strong career track record for success as clinicians, physician scientists (MD/DO, MD/DO/PhD) or researchers (PhD/ MSC) in the field of pediatric gastroenterology, hepatology and nutrition are encouraged to apply. Fellow status can be attained by meeting all criteria for either Clinical Practice or Research expertise. The NASPGHAN Executive Council will review all applications, focusing on the quality and breadth of clinical, research and educational contributions and service to the field of pediatric gastroenterology, hepatology and nutrition. Eligibility requirements are available online and details are available [here](#).
The Association of Pediatric Gastroenterology & Nutrition Nurses (APGNN) has officially launched the Pediatric Gastroenterology Nursing Assessment-Based Certificate Program.

The journey to development began back in 2016 following the Annual Meeting; APGNN conducted a membership survey about interest in a pediatric GI nursing certificate program. The response was overwhelmingly positive, with nearly 70% in favor.

There currently are very few pediatric nursing subspecialities that offer a certificate/certification program. This means that for nurses and APPs who have dedicated their careers to pediatric gastroenterology, there is no formal process to validate and capture their expertise. This program aims to provide a comprehensive overview of Pediatric GI nursing, while also acknowledging the specialized and evidence-based care we provide.

Key Components:
- The program consists of thirteen individual learning modules focusing on the fundamentals of Pediatric Gastroenterology
- Wide variety of topics spanning from abdominal pain, IBD, celiac disease, enteral tubes, introduction to liver disease, DGBIs, and more
- Customizable; the program can be purchased as a bundle or as individual modules with CE credit for those interested in specific topics
- Each module is presented in an interactive, web-based format with required readings comprised of NASPGHAN position papers, national guidelines, and/or peer-reviewed articles
- Content developed by APGNN subject-matter experts; each module was also reviewed by expert physicians for accuracy and to confirm no content gaps
- Post-test ensures comprehension of key concepts; APGNN engaged nurse scientists to validate questions

Certificate Overview:
- For participants who complete and pass the entire program, they will be awarded a Certificate of Pediatric Gastroenterology, Hepatology, and Nutrition Nursing
- Valid for 5 years with a process to renew and maintain certificate
- APGNN GI Certificate Advisory Board created to review content every three years in keeping with medical advances

Nursing & APP Benefits:
- Excellent resource for new-to-GI nurses and advanced practice providers
- Seasoned nurses/APPs who may subspecialize in one area can review updated guidelines to maintain well-rounded knowledge in all aspects of pediatric gastroenterology
- Supports advancement of clinical ladders, while meeting required CE credits for licensure

Physician Benefits:
- Nurses will have an increased baseline knowledge as they triage patient concerns and manage interim-visit care for patients
- Fosters a sense of clinical inquiry and opportunity for improved collaboration between team members
- Care teams (i.e. - social work, psychology, nutrition, residents, etc.) working with a specific GI population can gain deeper understanding of the medical presentation, thus improving care for patients within a multidisciplinary team

Organizational Benefits:
- Comprehensive, evidence-based onboarding program for nurses that meets national standards
- Curated resources for APGNN Members and program participants
- Improved quality of care within division as well as support of clinical ladder and Magnet Recognition

This program is priced to be accessible to everyone. Discounts are available for NASPGHAN and CPNP members, as well as organizational discounts for multiple bundles.

APGNN & SPN MEMBERS
- Individual Module pricing: $25
- Bundle pricing: $275

NASPGHAN & CPNP MEMBERS
- Individual Module pricing: $30
- Bundle pricing: $300

NON-MEMBERS
- Individual Module pricing: $35
- Bundle pricing: $350

ORGANIZATIONAL DISCOUNT
- 3-5 bundles: 5% discount
- 6-9 bundles: 10% discount
- 10-14 bundles: 15% discount
- 15+ bundles: 20% discount

Registration:
- APGNN has entered a joint providership with the Society of Pediatric Nurses (SPN) to offer the certificate program. SPN will serve as the hosting platform for the online learning modules and will manage all registration.
- Participants will be required to create an online guest-log in for the SPN Education Center to register. Click here for the direct registration link or visit APGNN for more information about the program and detailed registration instructions.
- To utilize the organizational discount, the SPN team will work with you directly to register your group. Please contact SPN to initiate this process.

Financial support was provided by Abbott, Nutricia, and Nestlé Nutrition Institute.
Hello NASPGHAN members! CPNP hopes you had a safe and happy holiday season and enjoyed the Annual Meeting! CPNP was honored to again be able to offer a virtual symposium in conjunction with the main meeting. A huge thank you to our Program Chair, Kirsten Jones, and President Elect, Abigail Lundin, for planning such excellent content. We also greatly appreciate our speakers from both NASPGHAN and CPNP who make our symposia possible. I can hardly believe that planning for the 2022 meeting will be underway again soon. If you have interest in a specific topic for the CPNP sessions, please send us an email with your ideas.

We were thrilled to have the opportunity to participate in the NASPGHAN Foundation/CPNP Nutrition Research Grant for the third year in a row. Congratulations to our awardee, Matthew Edwards of Children’s Hospital of Wisconsin, with the research proposal “Comparing Predictive Accuracy of Knee Height Equations in Pediatric Patients.” If you know of RDs at your institution who are interested in research, please let them know about the CPNP Research Grant and/or our grant mentor program that would pair them with a NASPGHAN member to help review their grant proposal. Grant proposals for 2022 will be due July 1, 2022 and the application site will open in the spring of 2022.

We had another successful year with our Nutrition Pearls, releasing 10 Pearls in 2021. We are always interested in exploring new topics, so please send any ideas to the previously mentioned email address. We were also able to coordinate some of our Pearls with our CPNP/LASPGHAN RDs so that they will be translated and distributed internationally. The link to all of our Pearls can be found on the CPNP homepage and on LearnOnLine.

One of CPNP’s largest goals for 2022 is to create an active mentor program within our membership, so that we may offer to pair new RDs with experienced RDs for shadowing and other learning experiences. We appreciate your ongoing support as we continue to grow and please reach out if you have any suggestions or needs for nutrition resources in the work you are doing. Send us an email at (cpnp.naspghan@gmail.com).

Sincerely,

Carmyn Thompson, RD, LDN
President, CPNP, Council for Pediatric Nutrition Professionals

2022 MEMBERSHIP FEES CAN NOW BE PAID ONLINE

You can now view and pay your 2022 NASPGHAN, CPNP and APGNN membership dues online. To view your account, please:

- Go to the Member Center
- Log in with your user name and password
- Click on Renew Now on the left-hand side of the page.

When you pay your NASPGHAN dues online, you will be taken first to a page that will ask for some demographic and professional information. Completion of the information is optional. However, gender, age, race, ethnicity and professional data collection offers opportunities for NASPGHAN to focus on our members’ diverse values, beliefs, and behaviors and to tailor the structuring of NASPGHAN’s programs to meet members’ needs.

If you pay online, you will receive an automatically generated receipt and confirmation. Please remember that you will not receive JPGN after January, 2022, if you have not paid your 2022 NASPGHAN membership fees or paid for a 2022 JPGN subscription.

Please click My Account and consider taking some time to review your information and make sure that NASPGHAN has correct information for you. The NASPGHAN National Office will be preparing the annual update for the Membership Directory. Also, consider clicking through the personal demographic information and update your information including uploading a personal picture.

If you have any trouble logging onto the NASPGHAN website or have any questions, please contact Gina Brown, at (gbrown@naspghan.org) or Kim Rose (krose@naspghan.org) or by telephone at 215-641-9800.
Hello again NASPGHAN friends! Hope everyone had a nice holiday season and were able to spend time with family and friends. As Clinical Care and Quality Committee (CCQ) members continue with their mission to support the NASPGHAN community in clinical care and quality, we are so appreciative of all the hard work of the NASPGHAN committees and their members with the steady flow of societal paper proposals. We had the privilege of reviewing 5-6 outstanding applications in 2021, ranging from treatment and will have management of functional abdominal pain in children to the management of anemia in intestinal failure patients. It is so wonderful to see these documents at their inception, knowing the significant impact they will on the care of children with gastrointestinal issues.

CCQ continues to be home to three highly active Special Interest Groups (SIG), including the Celiac SIG, Integrative Medicine SIG and Eosinophilic Gastrointestinal Disorders (EGID) SIG. The Celiac SIG is led by Jocelyn Silvester, MD, and Ed Hoffenberg, MD, and are currently working on a number of initiatives, including a recent clinical practice survey related to current practices in the management of celiac disease.

The Integrative Medicine SIG is led by Alexa Russell, MD, and it has recently published a review article on the non-pharmacological approach to pediatric constipation (PMID: 33737146). The group also has another review article in the works related to hypnosis in pediatrics and are keeping busy with developing a survey to assess gaps in knowledge of pediatric gastroenterologists about integrative medicine.

Finally, we are excited to see all the progress happening in the EGID SIG led by their Chair Rajitha Venkatesh, MD, and Vice Chair Sandeep Gupta, MD, as they organize their SIG into subgroups (Innovation, Clinical/Community and Quality Improvement) to prepare for future success.

The committee members were again impressed by all the fantastic clinical vignette abstracts submitted for the 2021 NASPGHAN Annual Meeting. We reviewed over 250 abstracts for the Annual Meeting this year and look forward to continuing this duty going forward.

The committee has also strived to put out original ideas from our members and our clinical survey examining the repeat endoscopy was recently published in JPGN (PMID: 33633082)! We hope you enjoy reading it as much as we enjoyed developing and publishing it. We also had the chance to give feedback on Dr. Sharon Tam’s recent publication in Gastroenterology regarding changes in practice during the COVID-19 pandemic (PMID: 33675745).

2021 has been a year of many changes in an ever-evolving world, but Joe and I look forward to and embrace what will come in 2022!
We are excited to start another busy year and welcome any questions or our trainees on the fellow’s committee to help us move things forward.

fulfill our mission to provide useful education content, with some areas with new input! We are looking to create more multimedia content to this year. We would welcome input from other members going forward and review new content, with several new joint projects in the works for this year. We would welcome input from other members going forward as well, so please feel free to reach out to me, Amethyst, or the editors with new input! We are looking to create more multimedia content to fulfill our mission to provide useful education content, with some areas of focus to include the GI Kids YouTube and social media presence. We will also more actively engage the new media expertise and energy of our trainees on the fellow’s committee to help us move things forward.

We are excited to start another busy year and welcome any questions or comments.

NASPGHAN TECHNOLOGY COMMITTEE

Chair: Jason Silverman, MD, MSc, FRCPC  
Vice Chair: Peter Lu, MD

Over the past year, the NASPGHAN Technology Committee has continued to work on expanding our community’s digital reach and facilitating the use of technology in our roles as clinicians, researchers, teachers and colleagues.

In collaboration with Opus, our social media and web development company, the Technology Committee has continued to expand the social media presence of NASPGHAN and GI Kids. Our Social Media subcommittee provides editorial oversight for posts written by Opus and creates additional content. NASPGHAN currently has over 3,900 followers on Twitter, over 2,000 subscribers on YouTube and over 1,000 followers on Instagram and Facebook with continued growth in engagement across platforms.

We held a successful Webinar Wednesday in April 2021 with guests Drs. Austin Chiang, Jamie Friedman, and Rebecca Winderman to discuss best practices for how to use social media as busy physicians to educate and collaborate. We are planning several new social media initiatives for the coming year to further drive engagement with our platforms. The Technology Committee is also leading the writing of a societal position paper on the use of social media in our field, specifically in the realms of patient care, research, and professional development. Be sure to follow @NASPGHAN on social media if you don’t already!

The Bowel Sounds podcast also continues to grow since its launch at the 2019 Annual Meeting. Dr. Temara Hajjat joined the team as the podcast’s fourth host in late 2020, allowing us to expand to releasing episodes every other week in April 2021. We have had an incredible lineup of guests this season who have joined us to discuss topics ranging from congenital diarrhea and advanced endoscopy to medical education and global health. As of December 2021, the podcast has released 42 episodes, with over 74,000 downloads in 115 countries and territories across 6 continents. Stay tuned—we have more amazing guests lined up as we start Season 3.

The Technology Committee continues to work with Opus to improve and update our NASPGHAN and GI Kids websites. We are creating a Website subcommittee to take a more active role in the development and maintenance of our current websites. We have also continued to support the redevelopment of the Fellows Committee’s NASPGHAN Toolbox app as a mobile-friendly website.

Finally, the Data Science Special Interest Group (SIG), formed last year prior to the 2020 Annual Meeting, has continued to grow under the leadership of Drs. Sana Syed and Jazz Dhaliwal. The SIG has been very active, hosting their first data science journal club over the summer and working on future educational events for our NASPGHAN community.

Committee & Special Interest Group Reports continues on the following page
ended with faculty sharing powerful stories of resilience in the midst of challenging events in their professional and personal lives. After another afternoon of one-on-one faculty meetings and relaxation by the pool, the fellows and faculty enjoyed a night of Danny Mallon-run, masked Karaoke that lasted for hours.

After being separated during the pandemic, all participants were thankful for the opportunity to meet together in-person and left the 3rd year conference invigorated and inspired for the next academic year. A special thanks goes to Lauri Symonds, Steven Wu and Reckitt/Mead Johnson for their generous commitment to support this wonderful conference. A big heartfelt thank you goes to NASPGHAN’s beloved Margaret Stallings and Laura Smith for organizing this first conference back since COVID.

Lastly, we are most grateful to our amazing 2021 faculty without whom this meeting could not have happened: Ben Gold, Norberto Rodriguez-Baez, Jean Molleston, John Barnard, Sue Rhee, Steven Guthery, Esi Lamouse, Kristina Leinwand, Danny Mallon and Christine Lee. Thanks to the to the great success of holding the 3rd year fellows conference safely, plans are currently underway to hold the 1st and 2nd year fellows conference in-person!
NEW CONTENT ON GIKIDS.ORG FOR PATIENTS & FAMILIES

More than 50 new and updated topics now live on GIKids, with clear pictures and illustrations, updated information on diagnosis, testing, procedures and treatment – all in a way that is best received by patients and their families. Visit GIKids often as existing content is being updated and new topics are being added.


If you have a topic you would like to see, please contact Kathleen Regan at (kregan@naspghan.org).

THE NASPGHAN TOOLBOX WEBSITE HAS LAUNCHED

The now live Toolbox website toolbox.naspghan.org, is aimed to help fellows have quick access to a resource guide during call, clinics or even procedures.

The Fellows Committee worked to convert the former Toolbox app to a mobile friendly website that can be viewed from any device at any time that allows for quicker updates. Users can “Add to Home Screen” for quick accessibility on mobile phones or tablets.

The Toolbox Committee within the Fellows Committee worked on this project. Members include Namrata Patel, Roma Bose, Alejandro Velez Lopez, Sarah Kemme, Allison Ta, Jonathan Miller, Samantha Saul, Kate Templeton, Patrick Reeves, and Paula Preito. Send your feedback to (toolboxfeedback@naspghan.org).

Supported by an educational grant from Reckitt Mead Johnson Nutrition.

NASPGHAN Learn OnLine—Your Source For Continuing Education

NASPGHAN’s on line learning site, LearnOnLine, saw tremendous growth in 2021. The site now offers more than 215 educational offerings, nearly all for CME and/or MOC Part II credit, for both NASPGHAN members and non-members. All are complimentary.

Once logged into the site, there is immediate access to JPGN articles, Bowel Sounds podcasts, a Fellows nutrition curriculum with a variety of learning modules, monthly Nutrition Pearls brought to you by CPNP, a full program on EGIDs and a library of all past webinars.

Access is simple. https://learnonline.naspghan.org. Once there, enter your NASPGHAN username and password, and you will be placed on the homepage where all the offerings are clearly categorized.

Did you know you can keep track of all your education credits here as well? By choosing Dashboard, you can see all of the modules you have taken and any upcoming live event for which are registered for. By choosing View My Certificates, you can view and print any MOC Part II or CME certificate for programs you have completed.

NASPGHAN thanks its many educational supporters for their generous grants, and the numerous NASPGHAN members who give of their time to provide content through podcasts, Pearls, webinars and more.

If you have something you would like to see covered in an educational program, please contact Kathleen Regan at (kregan@naspghan.org).

NASPGHAN encourages you to start your New Year with a visit to LearnOnLine!
News from the Editor
Sandeep K. Gupta MD
Western Hemisphere, JPGN

Your JPGN current editorial team has completed a year in office and we are super-excited to be able to serve our community and our society, while helping advance scientific knowledge.

Over the last 12 months, I have introduced most of our editors through the NASPGHAN newsletter. Furthering our collaborative, one-team approach, below are updates from several of our editors on the initiatives they are leading. These are in addition to their work-life, their personal duties, and handling of manuscripts submitted to JPGN—we could not do what we do without our editorial team. There are other projects too, but we will save some for later!

We do not like to say bye to any on our team, but Dr. Diana Lerner is completing her stint as the Image of the Month Section Editor for JPGN. She has made several additions, including enhancing the allowed word count and review process for submissions. She has pioneered the fantastic learning opportunity of Quick Poll (below). We wish her the best and welcome Dr. Catharine Walsh as the new section editor.

REVIEWER RECOGNITION

Joseph Croffie, MD

Our external reviewers are critical to the work we do and provide altruistic, selfless and voluntary service to advance our mission. We want to thank all who reviewed manuscripts for JPGN. Top reviewers in 2020 were identified during this year’s virtual meeting with a red ribbon by their name. Many thanks to Laura Smith for making this happen!

We are especially grateful for the following individuals who each reviewed 10 or more manuscripts for JPGN in the last year: Drs. Chandran Alexander, Valeria Cohran, Lee Bass, Jorge Vargas, Joel Rosh, Jeannie Huang, Alfredo Larrosa-Haro, Athos Bousvaros, Steven Schwarz, Steven Lobritto and Robert Baker.

FELLOW REVIEWER INITIATIVE

James Squires, MD

The ‘JPGN Fellow Reviewer Program’ was successfully launched in July 2021 in collaboration with the NASPGHAN Training Committee. This innovative program has enabled 3rd year fellows and Advanced 4th year fellows to be directly invited as reviewers for JPGN, enhancing and elevating their scholarship and aptitude, and building their peer-review skills. Each fellow is paired with a faculty mentor (local or distant) who works with the trainee to ensure the quality and constructiveness of the review. To date, 14 fellow reviewers have participated in the program, providing between 1 and 3 reviews each. In 2022, JPGN is excited to continue to grow and expand the program, providing continued benefit to Fellow Trainees through access to latest science in the field, critical thinking skill development that will improve participant research and writing and strengthened mentorships with Senior faculty.

COMMITTEE REVIEWER PROGRAM

Nitika Gupta, MD

JPGN Editorial Board, NASPGHAN Council and the NASPGHAN Professional Development Committee announced another exciting partnership—the Committee Reviewer Program. The goal of this program is to increase engagement and collaboration between NASPGHAN committees and JPGN.

SOCIAL MEDIA UPDATE

Jason Silverman, MD

In 2021, Twitter has had significant increases in followers (up 17%), average monthly impressions (up 146%) and average monthly profile visits (up 47%). We release on social media a new post every day highlighting work in JPGN. During 2022, we will continue to expand the ways in which we engage with our readers (and authors) through a collaboration with Bowel Sounds, the Pediatric GI Podcast. Look out for episodes featuring in-depth interviews with authors of key JPGN papers throughout the year.

CREATION OF ENDOSCOPY AND PROCEDURES SECTION

David Troendle, MD

JPGN will introduce an Endoscopy and Procedures section within the journal starting in early 2022. The purpose of this section will be to highlight groundbreaking research and developments in the field of endoscopy and other GI related procedures relevant to the ESPGHAN/
NASPGHAN membership. Investigators are encouraged to submit original articles and short communications for consideration. Please consider JPGN first for your pediatric endoscopy and procedure related research!

**IMAGE OF THE MONTH QUICK POLL**

*Diana Lerner, MD*

“A picture is worth a thousand words”—well in the case of the Image of the Month Section of JPGN, an image and 250 words offers some of the most unique visual diagnosis in pediatric gastroenterology, histology, imaging, and surgery. To spotlight this section of the journal, we worked with Ayesha Baig, MD and members of the Endoscopy Committee to introduce the Image of the Month Quick Poll. If you want to sharpen or simply show off your visual diagnosis skills go to (www.jpgn.com) on your computer and give it a shot. You don’t have to log in and it is accessible on your mobile device about halfway down the page. You will get to see your results right away and scrolling to the bottom of the page will get you the explanation and the link to original article. Many thanks to our publisher Ali Manieri for allowing non-subscribers free access to the featured images!

**ALI MANIERI** is our Lead Publisher and oversees the team at Wolters Kluwer that works on JPGN. She has worked in the medical publishing industry for over 20 years and primarily manages gastroenterology and surgery journals. Ali enjoys the long-standing relationship she has with ESPGHAN and NASPGHAN and the positive working environment she shares with the JPGN Editors and Editorial Office. She lives in Maine with her husband and son and enjoys gardening, hiking, baking, and searching for shells and driftwood on the beach.

**PHYLLIS BARR** has been the Managing Editor for the EU office/Eastern Hemisphere of JPGN for the last 12 years and resides in Jerusalem, Israel. She has been an editor and technical writer for over 30 years. Prior to working for ESPGHAN (JPGN/ JPGN Reports), Phyllis was Vice President of an Internet Service Provider company in the U.S. that she co-founded. She derives great satisfaction from working with and assisting the authors, reviewers, and the editorial team. Phyllis enjoys spending time with her family, her two whippets, swimming, traveling and creating mosaic artwork.

**MARIANNA HAGAN** is our Managing Editor for the NA office/Western Hemisphere of JPGN. She has been working for Wolters Kluwer for over 15 years and currently manages several titles, including JPGN and JPGN Reports. Marianna enjoys getting to work with such a diverse group of people involved in JPGN and watching each issue of JPGN come together. Outside of work, she enjoys spending time with her family in New Jersey, and adding to her ever growing list of books to be read.

**SARAH BIRNS** is the Senior Production Editor for JPGN and leads the complex processes from acceptance of your manuscript to seeing it in print. She has been with Wolters Kluwer since 2010, managing various society journals. She enjoys in her role with JPGN the wonderful collaborative relationships she has with the editorial office, ESPGHAN, and NASPGHAN. She is a folklorist as her side gig and loves to travel, especially to sites of dark tourism. She aims to try every Ethiopian restaurant in the world!

Happy 2022 to you and yours! As always, please share your ideas, thoughts, and feedback (sgupta@iu.edu).

Sandeep K. Gupta MD
*Editor-in-Chief, JPGN, Western Hemisphere*

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**NEW NASPGHAN POSITION PAPER PUBLISHED IN JANUARY JPGN**

**North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition Position Paper on the Diagnosis and Management of Pediatric Acute Liver Failure**


The paper is accessible on the NASPGHAN website.

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See the latest on NASPGHAN Meetings and Meetings of Interest
JPGN Reports, is our new open access journal that has been publishing for about 1.5 years. Thank you to all of you who are submitting manuscripts for potential publication in JPGN Reports, our more clinically-oriented journal. JPGN Reports is doing extremely well, with over 400 submissions and almost 200 accepted articles to date! Recently the fourth Compendium of articles for 2021 was published and can be viewed on the website. Each Compendium is a compilation of all articles published during the prior quarter and is published every February, May, August and November.

JPGN Reports focuses on novel case reports, clinical study protocols, reports on scientific conferences and workshops including meeting proceedings, and clinical reports of novel and often preliminary treatment opportunities in this field. (See ‘About the Journal’ on the website for full description).

Many of you have asked if your published articles will be cited in PubMed and if JPGN Reports has an Impact Factor. As a new journal, JPGN Reports does not yet have an Impact Factor. To have an Impact Factor, the journal must first be approved by PubMedCentral, a hurdle that is not automatic; we must meet specific criteria to be approved by PubMedCentral. Wolters Kluwer, our publisher, will be submitting our application for PubMedCentral review and approval early in 2022. The approval process may take 3-6 months. Hopefully we will be approved—once approved, all published articles to date (from inception of the journal) will be then cited in PubMed. An Impact Factor will start appearing after 1-2 more years. Recently updated Instructions for Authors (IFAs) can be found on the website.

JPGN Reports welcomes and thanks its new Editorial Board members for their commitment to our journal:
- Lee Bass, MD—Associate Professor, Pediatrics
  Northwestern University, Chicago, IL
- Richard Couper, MB, ChB—Gastroenterology
  Women and Children’s Hospital, North Adelaide, Australia
- Lucia Escobedo, MD, MS—Assistant Professor, Pediatrics
  Ciudad De Mexico, Mexico
- A. Jay Freeman, MD—Associate Professor, Pediatrics
  Emory University, Atlanta, GE
- Deborah A Goldman, MD—Hepatologist-Gastroenterologist
  Cleveland Clinic, Cleveland, OH
- Regino Gonzalez-Peralta, MD—Pediatric Medical Director
  AdventHealth, Orlando, FL
- Rishi Gupta, MD—Associate Professor, Pediatrics
  University of Rochester, Rochester, NY
- Vikrom Karnsakul, MD—Associate Professor, Pediatrics
  Johns Hopkins University, Baltimore, MD
- Brad Pasternak, MD—Associate Professor, Pediatrics
  University of Arizona, Phoenix, AZ
- Daphne Say, MD—Associate Professor, Pediatrics
  University of California, Davis, CA
- Thomas Wallach, MD—Assistant Professor, Pediatrics
  SUNY, New York, NY
- William J. Wenner, Jr, MD, JD—Professor, Pediatrics
  Penn State University, Hershey, PA

Interested in reviewing submissions to JPGN Reports?
If you would like to review manuscripts submitted to JPGN Reports and have not received an invitation to review in the last year, please make sure your information is updated on our website or contact Marianna Hagan, JPGN Reports Managing Editor, at (marianna.hagan@wolterskluwer.com). If you have specific clinical or other interests and expertise, please let Marianna or Dr. Heyman know to pass this information to the Editors. CME credit is available for reviewers of submissions to JPGN Reports. Thank you for participating in our peer review process!

Are you following JPGN Reports on social media?
Our Social Media Editors, Natasha Cavalcante and Rajitha Venkatesh, have been actively posting Twitter and Facebook feeds. You can help our journal’s visibility and its impact by following JPGN Reports on Facebook and Twitter and reposting/retweeting the messages already there. “Like” the page; Promote the page to your followers; Share posts with your followers!! Follow our channels and stay updated with JPGN Reports on Twitter and Facebook.

Subscribe to alerts and to the electronic table of contents by signing up at the JPGN Reports website.

Please feel free to contact Marianna (marianna.hagan@wolterskluwer.com) or me (mel.heyman@ucsf.edu) if you have any further questions or suggestions.

Best wishes for a healthy and happy 2022!

Mel Heyman, MD
Editor-in-Chief, JPGN Reports, Western Hemisphere
American Academy of Pediatrics Corner

Dear Colleagues,

A primary goal of the Section on Gastroenterology, Hepatology and Nutrition (SOGHN) of the American Academy of Pediatrics is to connect pediatric gastroenterologists with primary care pediatricians (PCPs) through AAP. In 2021, 7 AAP chapters received grants through a competitive application process for the GI Speakers Program as part of their Chapter CME/Annual Meeting. Presentations on relevant GI topics were given at State Chapter meetings for Maine, New Mexico, Florida, Colorado, Ohio, Georgia and Massachusetts, and speakers included Noah Hoffman, MD, Deborah Duro, MD, FAAP, Barbara Howard, MD, Christine Waasdorp, MD, FAAP, Reema Gulati, MD, FAAP, Sarah Adams, MD, FAAP, Barbara McElhanon, MD, Steven Liu, MD, Jose Garza, MD, Jay Fong, MD, FAAP, and Laurie Fishman, MD, FAAP. We look forward to continuing this program in 2022 and to partnering with NASPGHAN on a proposed new chapter speakers program on Hepatitis C.

Estella Alonso, MD, FAAP, Lurie Children’s Hospital, received the Murray Davidson Award from the SOGHN at this year’s NASPGHAN Awards Ceremony. We were pleased to recognize her contributions as a trailblazer in our field, akin to the efforts of Murray Davidson, MD, FAAP, after whom the award is named. Please nominate other deserving colleagues for next year’s Murray Davidson Award and/or the Samuel J. Fomon Nutrition Award from the AAP, both due March 15, 2022. More information about these awards and our SOGHN activities can be found at www.aap.org/SOGHN.

The SOGHN has established the Patient and Family Education Subcommittee, under the leadership of Christine Waasdorp Hurtado, MD, MSCS, FAAP. They have already updated articles for HealthyChildren.org, the AAP Parenting Website, on the FODMAP diet, Hepatitis C, GERD, and Infant Vomiting. And they are now working on Celiac Disease and Fatty Liver (NAFLD). I’m excited that these articles are being updated since this web site is trusted and gets a great deal of parent traffic.

For more information or to volunteer for a committee role in the SOGHN, contact Debra Burrowes at (dburrowes@aap.org).

Mitch Cohen, MD, FAAP
Chair, AAP Section on Gastroenterology, Hepatology and Nutrition

NIDDK RELEASES STRATEGIC PLAN FOR RESEARCH

The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) of the National Institutes of Health has released the NIDDK Strategic Plan for Research.

The NIDDK Strategic Plan for Research presents a broad vision for accelerating research over the next 5 years to improve the health of people who have or are at risk for diseases within its mission: diabetes and other endocrine and metabolic diseases; liver, intestinal, and other digestive diseases; nutritional disorders; obesity; and kidney, urologic, and hematologic diseases. The Strategic Plan is based on extensive input from leading researchers and patient advocates across the country who served on our strategic plan Working Group, numerous organizations and individuals who provided ideas in response to our public Requests for Information, and members of the NIDDK’s Advisory Council.

The NIDDK Strategic Plan for Research includes four major scientific goals, each with a set of research opportunities: 1) advance understanding of contributors to health and diseases, 2) develop and test prevention and treatment approaches in clinical trials, 3) disseminate and implement evidence-based strategies to improve health, and 4) engage stakeholders as partners in research. The plan’s four scientific goals and accompanying research opportunities will guide NIDDK to build on its 70+ years of discovery, progress, and innovation. The Strategic Plan also highlights how NIDDK will serve as an efficient and effective steward of public resources.

NIDDK is committed to empowering a multidisciplinary research community, engaging diverse stakeholders, and leveraging discoveries of connections among diseases to improve prevention, treatment, and health equity—pathways to health for all. This unifying theme is highlighted throughout the Strategic Plan.
NASPGHAN Welcomes 2021 First-Year Fellows
(as of June 2021)

Timothy Adamos
Adaku Adebamiji
Arun Ajmera
Moises Alatorre Jimenez
Christine Andrews
Erik Andrewski
Diego Ricardo Arellano Sánchez
Alyssa Baccarella
Michelle Bao
Lily Barash
Horacio Alejandro Bartlett
Jeanette Becerril Bueno
Aaron Bennett
Alexandra Biller
Stephanie Borinsky
Holly Breeden
Margare Bujarska
Jordan Busing
Longyue Lily Cao
Elizabeth Cárdenas Anaya
Juvenal Casillas Franco
Anira Lizbeth Castro Zárate
Andrea Chavez Marcocchio
Connie Chen
Danielle Clark
Alexander Coe
Javier Antonio Córdova Sabillón
Erika Cornell
Michelle Corrado
Guillermo Alejandro Costaguta
Bonnie Crume
Evianna Cruz Herrera
Kathryn Czepiel
Ghaida Dahlwi
Renee Dhar Dass
Trevor A. Davis
Tejas Desai
Andrew Dickerson
Sarah Din
Brynn Donnelly O’Laughlin
Eriin Elbel Mauney
Yetunde Favole
Marianelly Fernandez Ferrer
Tiffany Freeney Wright
Zeeat Gaibee
Irene Gamra
Laura Ginsberg
Cynthia González Portillo
Osiris Maria Gonzalez
Susette Gonzalez
Elliott Gordon
John (Matt Grisham
Jessica Estefania Guerra González
Susan Gutierrez
Leonard Haas
Minoti Haribhui
John Hong
Alexandra Hudson
Sherif Ibrahim
Hebat Kamal
Elise Kang
David Katibian
Hamza Khan
Rabia Khan
Irene Kho
Janice Khoo
Sanjeev Kumar
Tom LaRouere
Jonathan Lebowitz
David Lee
Rikah Lerner
Steven Levitte
Minna Leydorf
Andrew Liman
Elaine Lin
Kathleen Lo
Maria Susana Lopez Gonzalez
Helen Mac
Jing Marrero
Jonathan David Martin Del Campo
Kyle McKeown
Sagar Mehta
Nicole Mendez
Anisha Mohandas
Lilian Moreno-Ibarra
Apoorva Nangiri
Alexander Nasr
Silvia Nastasio
Erini Nessim Kostandy
Nicholas Norris
Teresa Oh
Alicia Olave-Pichon
Daniel Orellana
Amador Ortega Hernández
Samantha Paglinco
Aishwarya Palorath
Haley Pearlstein
Julio Cesar Perez Xavier
Ariel Porto
Julia Primo

Amariel Ralbovsky
Teresa Yared Ramos Leal
Ana Karen Ramos Ornelas
James Reed
Rahiya Rehman
Gerardo Rivera Fernandez
Juan Eduardo Robles Aguilara
Ana Cristina Victoria Rocha
Maria Belen Rojas Gallegos
Luis Jorge Rojas-Concha
Priya Rolfs
Annemarie Rompec
Abigail Russi
Stephanie Saaybi
Karla Margarita Sabillón Montoya
Liane Sadder
Pavithra Saikumar
Zeina Saleh
Nadia Sandoval Garín
Rachel Schenker
Jonathan Schouten Salazar
Stephanie Segura
Aruna Sethuraman
Colby Sharlin
Ruchika Sharma
Shiva Sharma
Brianne Shuler
Brittany Siegel
Jaclyn Siegel
David Simon
Matthew Smyth
Monserrat Soria Hernandez
Tica Stefani
Or Steg Saban
Kathryn Stephenson
Yojana Sunkoj
Julee Sunny
Supragna Swamy
Gregorio Torres
Marie-Catherine Turcotte
Jessica Ulrich
Vivian Vega
Kanak Verma
Carolyn Vespoli
Ellen Wagner
Ashleigh Watson
Lianna Wood
Gladys Sloane Zimmerman
**Billing & Coding**


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**2022 PHYSICIAN FEE SCHEDULE**

On November 2, 2021, the Centers for Medicare & Medicaid Services (CMS) issued a final rule that includes updates on policy changes for Medicare payments under the Physician Fee Schedule (PFS), and other Medicare Part B issues, on or after January 1, 2022.

- With the budget neutrality adjustment to account for changes in RVUs (required by law), and expiration of the 3.75% temporary CY 2021 payment increase provided by the Consolidated Appropriations Act, 2021 (CAA), the CY 2022 PFS conversion factor is $33.59, a decrease of $1.30 from the CY 2021 PFS conversion factor of $34.89.

- On December, 17, 2021, Congress and President Biden intervene in Medicare payment cuts. President Biden signed S. 610, the Protecting Medicare & American Farmers from Sequester Cuts Act, completing a last-minute Congressional effort to stave off Medicare cuts. The law will impact 2022 Medicare payments for family physicians in several ways:
  - Increases the 2022 Medicare conversion factor (i.e., the amount Medicare pays per relative value unit under its physician fee schedule), by 3%. For 2021, Congress increased the conversion factor by 3.75%. Because the boost for 2022 is slightly less than that, the conversion factor for 2022 is still likely to be less than 2021, but not as much less as it would have been if Congress and Biden had not acted. Most 2022 Medicare payment allowances should remain similar to those in 2021.
  - Defers until 2023 cuts of 4% that were otherwise scheduled to be implemented in 2022. Mandated by the Pay-As-You-Go Act of 2010, these cuts were meant to offset increases in the federal deficit.
  - Exempts Medicare programs from Budget Control Act sequestration cuts through March 31, 2022. The sequestration reductions will then be 1% from April 1, 2022, through June 30, 2022, and 2% for the rest of 2022. Sequestration reductions apply to actual payments from Medicare administrative contractors (MACs). They’re calculated after beneficiary cost-sharing and apply to only what Medicare pays.
  - Delays cuts in Medicare fees for clinical laboratory services due to the Protecting Access to Medicare Act.
  - Additionally, the law retains an update to clinical labor pricing included in the 2022 Medicare physician fee schedule final rule. Clinical labor pricing is used to calculate the practice expense portion of Medicare physician payment rates to account for the cost of staff salaries and benefits. The Centers for Medicare & Medicaid Services (CMS) has not updated the Bureau of Labor data factored into those calculations since 2002. CMS will update clinical labor pricing over four years to account for significant increases in the cost of employing clinical staff, which will benefit family medicine.

- CMS and its MACs will be implementing the new law over the next few weeks to pay 2022 Medicare claims correctly.

Even though pediatric GI practices do not see a high percentage of Medicare patients, many fee schedules from your commercial payers are based upon a percentage of the Medicare fee schedule. Make sure that your practice administrators review payer contracts and adjust your payer’s approved amounts in your billing software effective January 1, 2022.

**SPLIT-SHARED SERVICES-INPATIENT SERVICES**

We are refining our longstanding policies for split (or shared) E/M visits to better reflect the current practice of medicine, the evolving role of non-physician practitioners (NPPs) as members of the medical team, and to clarify conditions of payment that must be met to bill Medicare for these services. In the CY 2022 PFS final rule, we are establishing the following:

- Definition of split (or shared) E/M visits as E/M visits provided in the facility setting by a physician and an NPP in the same group. The visit is billed by the physician or practitioner who provides the substantive portion of the visit.
- For 2022, the substantive portion can be history, physical exam, medical decision-making, or more than half of the total time (except for critical care, which can only be more than half of the total time). Split (or shared) visits can be reported for new as well as established patients, and initial and subsequent visits, as well as prolonged services.
- Documentation in the medical record must identify the two individuals who performed the visit. The individual providing the substantive portion must sign and date the medical record.
- The documentation must support that at least one of the providers had a face-to-face (in person) encounter with the patient but it does not necessarily have to be the provider who performed the substantive portion and bills for the visit.
- For non-critical care encounters, if history, exam or MDM is used as the substantive portion of the encounter in lieu of time, the documentation must reflect the billing provider performed the component in its entirety.
- Overlapping time may not be counted.
- By 2023, the substantive portion of the split-shared service will be defined as more than half of the total time spent in minutes, not the percentage between both providers involved in care.

**Calendar Year (CY) 2022 Medicare Physician Fee Schedule Final Rule**

**TEACHING PHYSICIAN UPDATE**

The AMA CPT office/outpatient E/M visit coding framework that CMS finalized for CY 2021 provides that practitioners can select the office/outpatient E/M visit level to bill, based either on the total time personally spent by the reporting practitioner or medical decision making (MDM). Under our existing regulations, if a resident participates in a service furnished in a teaching setting, a teaching physician can bill for the
service only if they are present for the key or critical portion of the service. Under the so-called "primary care exception," in certain teaching hospital primary care centers, the teaching physician can bill for certain services furnished independently by a resident without the physical presence of a teaching physician, but with the teaching physician’s review.

- CMS finalized and clarified that when time is used to select the office/outpatient E/M visit level, only the time spent by the teaching physician in qualifying activities, including time that the teaching physician was present with the resident performing those activities, can be included for purposes of visit level selection. Under the primary care exception, time cannot be used to select visit level. Only MDM may be used to select the E/M visit level, to guard against the possibility of inappropriate coding that reflects residents’ inefficiencies rather than a measure of the total medically necessary time required to furnish the E/M services.

2022 ICD-10 CODES—EFFECTIVE 10-1-2021

<table>
<thead>
<tr>
<th>Code</th>
<th>Action</th>
<th>Title</th>
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</thead>
<tbody>
<tr>
<td>G92.8</td>
<td>Add</td>
<td>Other toxic encephalopathy</td>
</tr>
<tr>
<td>G92.9</td>
<td>Add</td>
<td>Unspecified toxic encephalopathy</td>
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<tr>
<td>K22.81</td>
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<td>Esophageal polyp</td>
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<tr>
<td>K22.82</td>
<td>Add</td>
<td>Esophagogastric junction polyp</td>
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<tr>
<td>K22.89</td>
<td>Add</td>
<td>Other specified disease of the esophagus</td>
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<tr>
<td>K31.40</td>
<td>Add</td>
<td>Gastric intestinal metaplasia, unspecified</td>
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<tr>
<td>K31.41</td>
<td>Add</td>
<td>Gastric intestinal metaplasia without dysplasia involving the antrum</td>
</tr>
<tr>
<td>K31.42</td>
<td>Add</td>
<td>Gastric intestinal metaplasia without dysplasia involving the body (corpus)</td>
</tr>
<tr>
<td>K31.43</td>
<td>Add</td>
<td>Gastric intestinal metaplasia without dysplasia involving the fundus</td>
</tr>
<tr>
<td>K31.44</td>
<td>Add</td>
<td>Gastric intestinal metaplasia without dysplasia involving the cardia</td>
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<tr>
<td>K31.45</td>
<td>Add</td>
<td>Gastric intestinal metaplasia without dysplasia involving multiple sites</td>
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<td>A31.19</td>
<td>Add</td>
<td>Gastric intestinal metaplasia without dysplasia, unspecified site</td>
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<tr>
<td>K31.21</td>
<td>Add</td>
<td>Gastric intestinal metaplasia with low grade dysplasia</td>
</tr>
<tr>
<td>K31.22</td>
<td>Add</td>
<td>Gastric intestinal metaplasia with high grade dysplasia</td>
</tr>
<tr>
<td>K31.23</td>
<td>Add</td>
<td>Gastric intestinal metaplasia with dysplasia, unspecified</td>
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<tr>
<td>M35.08</td>
<td>Add</td>
<td>Sjogren syndrome with gastrointestinal involvement</td>
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<td>R05.1</td>
<td>Add</td>
<td>Acute cough</td>
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<tr>
<td>R05.2</td>
<td>Add</td>
<td>Subacute cough</td>
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<tr>
<td>R05.3</td>
<td>Add</td>
<td>Chronic cough</td>
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<tr>
<td>R05.4</td>
<td>Add</td>
<td>Cough syncope</td>
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<td>R05.8</td>
<td>Add</td>
<td>Other specified cough</td>
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<tr>
<td>R05.9</td>
<td>Add</td>
<td>Cough, unspecified</td>
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<td>R63.30</td>
<td>Add</td>
<td>Feeding difficulties, unspecified</td>
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<td>R63.31</td>
<td>Add</td>
<td>Pediatric feeding disorder, acute</td>
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<tr>
<td>R63.32</td>
<td>Add</td>
<td>Pediatric feeding disorder, chronic</td>
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<tr>
<td>R63.39</td>
<td>Add</td>
<td>Other feeding difficulties</td>
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<tr>
<td>R79.83</td>
<td>Add</td>
<td>Abnormal findings of blood amino-acid level</td>
</tr>
<tr>
<td>U09.9</td>
<td>Add</td>
<td>Post COVID-19 condition, unspecified</td>
</tr>
<tr>
<td>Z35.5</td>
<td>Add</td>
<td>Less than a high school diploma</td>
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<tr>
<td>Z58.6</td>
<td>Add</td>
<td>Inadequate drinking-water supply</td>
</tr>
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<td>Z59.00</td>
<td>Add</td>
<td>Homelessness, unspecified</td>
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<td>Z59.01</td>
<td>Add</td>
<td>Sheltered homelessness</td>
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<tr>
<td>Z59.02</td>
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<td>Unsheltered homelessness</td>
</tr>
<tr>
<td>Z59.41</td>
<td>Add</td>
<td>Food insecurity</td>
</tr>
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<td>Z59.48</td>
<td>Add</td>
<td>Other specified lack of adequate food</td>
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<tr>
<td>Z59.811</td>
<td>Add</td>
<td>Housing instability, housed, with risk of homelessness</td>
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<tr>
<td>Z59.812</td>
<td>Add</td>
<td>Housing instability, housed, homelessness in past 12 months</td>
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<tr>
<td>Z59.819</td>
<td>Add</td>
<td>Housing instability, housed unspecified</td>
</tr>
<tr>
<td>Z59.89</td>
<td>Add</td>
<td>Other problems related to housing and economic circumstances</td>
</tr>
<tr>
<td>Z71.85</td>
<td>Add</td>
<td>Encounter for immunization safety counseling</td>
</tr>
</tbody>
</table>

2022 TOTAL ICD-10 CM CODES: 72,748
159 ADDITIONS | 32 DELETIONS | 20 REVISIONS

2022 CPT CODES FOR PEDIATRIC GASTROENTEROLOGY EFFECTIVE DATE 1-1-2022

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<tr>
<th>CPT Code</th>
<th>Status</th>
<th>RVUS Office</th>
<th>RVUS Facility</th>
<th>CPT Description</th>
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</thead>
<tbody>
<tr>
<td>91113</td>
<td>New</td>
<td>NA</td>
<td>28.08</td>
<td>Gastrointestinal tract imaging, intraluminal (e.g., capsule endoscopy), colon, with interpretation and report</td>
</tr>
<tr>
<td>91113-TC</td>
<td>New</td>
<td>NA</td>
<td>24.53</td>
<td>Principal care management services for a single high-risk disease, first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month</td>
</tr>
<tr>
<td>99424</td>
<td>New</td>
<td>2.18</td>
<td>2.41</td>
<td>Each additional 30 minutes provided personally by a physician or other qualified health care professional, per calendar month</td>
</tr>
<tr>
<td>99425</td>
<td>New</td>
<td>1.52</td>
<td>1.74</td>
<td>Principal care management, for a single high-risk disease, first 30 minutes of clinical staff time directed by physician or other qualified health care professional, per calendar month</td>
</tr>
<tr>
<td>99426</td>
<td>New</td>
<td>1.46</td>
<td>1.83</td>
<td>Each additional 30 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (list separately in addition to code for primary procedure)</td>
</tr>
</tbody>
</table>
JENNIFER DOTSON, MD  
Chair, NASPGHAN Public Affairs and Advocacy Committee

Grassroots advocacy isn’t difficult, but it requires persistence. Persistence at critical junctures in the legislative process is imperative to success. The role of NASPGHAN’s Public Affairs and Advocacy Committee is to foster and encourage grassroots advocacy engagement by Society members and to signal when timely action is urgent.

It has been five years since the first introduction of Medical Nutrition Equity Act, which happened under NASPGHAN’s leadership. Over the years, the legislation has matured. Fine-tuning of the language has occurred, bipartisan authors in the Senate and House have been secured, and the number of cosponsors is growing at a steady rate. NASPGHAN has invested significant resources into the operation of the Patients and Providers for Medical Nutrition Equity coalition, which now stands at more than 40 organizations unified in their pursuit of enactment of the Medical Nutrition Equity Act.

Advocacy fatigue is real. It’s easy to become frustrated with the legislative process and to question whether grassroots involvement makes a difference. Yet, if we let advocacy fatigue overcome us, and we walk away from the issues we care about most, then failure is the fate of our advocacy endeavors.

Consider that since Jan. 1, 2021, 11,300 bills have been introduced in Congress. By the end of 2021, 276 of those bills received a vote—just 2 percent. On its face, this statistic is discouraging, yet it underscores why grassroots advocacy is critical. Only those bills with strong bipartisan support and legislative champions who feel supported by their constituencies will make their way up the legislative ladder and have a fighting chance at a vote and passage.

In a December conversation with Medical Nutrition Equity Act advocates, bill sponsor Rep. Jim McGovern (D-MA) pledged his commitment to passing the legislation. Increasing the number of cosponsors needs to be a top priority of NASPGHAN and other bill advocates. Here’s the sobering news. If this legislation doesn’t get on a path toward enactment in 2022, before the elections, it could take several more years to get the bill over the finish line. We can’t let that happen. Our window of opportunity is now, and it requires urgent action by each and every member of NASPGHAN. It takes just a few minutes to take action. If you took action in the past, take action again. Be the squeaky wheel.

While improving patient access to medically necessary nutrition was an important advocacy focus for NASPGHAN in 2021, other advocacy endeavors included pushing back against non-medical switching of biologics by insurers, bolstering the pediatric subspecialty workforce, and continuing to tackle the dangers of high-powered magnets. NASPGHAN members zoomed in for virtual meetings with congressional offices to discuss medical nutrition and the need for funding for the newly reauthorized Pediatric Subspecialty Loan Repayment Program. Virtual advocacy is going to stick around a bit longer, even though we long to travel to Capitol Hill. But, here’s the glass half-full perspective; virtual advocacy gives every NASPGHAN member the opportunity for grassroots engagement from home. On behalf of the Public Affair and Advocacy Committee, I ask for your resolve this year to get involved in NASPGHAN advocacy and to make a difference in the issues important to us and our patients.

NASPGHAN, APPSPGHAN JOINT WEBINARS

NASPGHAN partnered with APPSPGHAN in 2021 to produce two joint webinars offering the East and West perspectives on topics such as neonatal cholestasis, H. pylori breath tests, COVID-19 and pediatric gastroenterology and Non-IgE food allergies, now all available on LearnOnLine under Webinars.

The differing perspectives on these topics made for excellent discussions, and further strengthened the unity and collaboration between the two societies. This educational partnership will continue in 2022. Look for an announcement shortly on the first of two new joint webinars.

A Zoom joint webinar in 2021, from top left, Suporn Trepangkaruna, MD; Kenny Reff, Limelight Productions; Marion Au, MD; Nicola Jones, MD; Ji-Hyun Seo, MD; Benjamin Gold, MD; Jose Garza, MD; Kathleen Regan, NASPGHAN; Margaret Stallings, NASPGHAN; Juliet Sio Aguilar, MD; William Balistreri, MD, and Huey-Lin Chen, MD.
**NEWS** from Our Foundation Partners

**ALBIREO PHARMA, INC.**

**Albireo Advancing Science**

Albireo is a rare disease company focused on the development of novel bile acid modulators to treat rare pediatric and adult liver diseases. As part of our commitment to advancing science and improving outcomes in cholestatic liver disease, Albireo currently has three Phase 3 clinical trials ongoing to study Bylvay™ (odevixibat) for the treatment of rare pediatric cholestatic liver diseases with the PEDFIC 2 open-label extension study, the ASSERT study in Alagille syndrome and the BOLD study in biliary atresia.

**PEDFIC 2 Study NCT03659916**

This phase 3 open-label extension study evaluates long-term safety and efficacy of Bylvay, an orally administered selective inhibitor of IBAT, in children with PFIC. Patients in the study will receive Bylvay 120 μg/kg once daily for 72 weeks. The study will enroll approximately 120 participants at up to 50 sites in the U.S., Canada, Europe, Australia, and Middle East. The primary efficacy endpoints are change in pruritus from baseline over 72 weeks as measured by the Albireo PRUCISION observer-reported outcome (ObsRO) scratching assessment tool and change in serum bile acid levels from baseline to week 72. Secondary endpoint measures include:

- Time to surgical bile diversion, liver transplant or death
- Change in growth from baseline to weeks 24, 48, and 72
- Change in aspartate aminotransferase-to-platelet ratio index (APRI) score from baseline to week 72
- Change in fibrosis-4 (FIB-4) score from baseline to week 72
- Change in pediatric end-stage liver disease (PELD)/model for end-stage liver disease (MELD) score from baseline to week 72
- Change in use of antipruritic medication from baseline to weeks 24, 48, and 72

**ASSERT Study NCT04674761**

The phase 3 double-blind, randomized, placebo-controlled global Phase 3 trial to evaluate the safety and efficacy of Bylvay in relieving pruritus in patients with Alagille syndrome. The trial is designed to evaluate the safety and efficacy of 120 μg/kg/day Bylvay for 24 weeks in relieving pruritus in patients with Alagille syndrome using the ObsRo PRUCISION instrument. Secondary endpoints will measure serum bile acid levels and safety and tolerability. Both the FDA and EMA have agreed on the study design and have indicated that a single study demonstrating safety and efficacy of Bylvay would be sufficient for regulatory filings. The trial is expected to enroll approximately 45 patients aged 0 to 17 years of age with a genetically confirmed diagnosis of ALGS across 35 sites in North America, Europe, Middle East and Asia Pacific. An additional exploratory cohort of patients ≥18 years of age with genetically confirmed diagnosis will be enrolled, not to exceed 18 patients in total. Primary efficacy endpoint is a change from baseline in scratching to Month 6 (Weeks 21 to 24) as measured by the patient using the Albireo PRUCISION PRO instrument. Key secondary efficacy endpoint is a change in serum bile acid levels from baseline to the average of Week 20 and Week 24. Following study completion, patients will be eligible to receive Bylvay through an open label extension study **NCT05035030**.

**BOLD Study NCT04336722**

The phase 3 double-blind, randomized, placebo-controlled trial to evaluate the efficacy and safety of Bylvay in children who have biliary atresia and have undergone a Kasai procedure before age three months. Children in the treatment arm will receive Bylvay and escalate to 120 μg/kg orally once daily for 24 months. The primary efficacy endpoint is improvement in the proportion of patients who are alive and have not undergone a liver transplant after two years of treatment compared to placebo, and secondary outcome measures include time to onset of any sentinel events, total bilirubin levels and serum bile acid levels. The trial will enroll approximately 200 patients at up to 75 sites globally.

For more information about the PEDFIC 2, ASSERT or BOLD studies, please visit ClinicalTrials.gov or contact medinfo@albireopharma.com.

**RECKITT/MEAD JOHNSON NUTRITION**

**The Impact of Formula Choice for the Management of Pediatric Cow’s Milk Allergy on the Occurrence of Other Allergic Manifestations: The Atopic March Cohort Study**

What is known: Cow’s milk protein allergy (CMPA) is a prevalent condition in infants, and it may be the first stage of the atopic march, optimal nutritional management is not always clear.

What this study adds: This study replicates the findings of earlier studies published in 2013 and 2017 with very similar outcomes showing lower incidence in atopic manifestations and greater immune tolerance acquisition for children with CMPA that consumed an extensively hydrolyzed casein formula with the probiotic LGG.

This was a prospective cohort study that was designed to compare the impact of different formula types on the occurrence of other atopic manifestations and the time of immune tolerance acquisition in children with cow’s milk protein allergy.

There were 365 infants enrolled, 73 in each formula cohort that were followed over 36 months. The study population consisted of children with immunoglobulin E–mediated children CMPA. Dietary management cohorts were extensively hydrolyzed casein formula containing the probiotic LGG (EHCF + LGG), rice hydrolyzed formula, soy formula, extensively hydrolyzed whey formula (EHWF), or amino acid–based formula. The data collection included the occurrence of other atopic manifestations such as eczema, urticaria, asthma, and rhinoconjunctivitis. Additionally, data was collected on the time to immune tolerance acquisition.
The incidence of atopic manifestations was 0.22 (Bonferroni-corrected 95% CI 0.09-0.34) in the EHCF + LGG cohort; 0.52 (0.37-0.67) in the rice hydrolyzed formula cohort; 0.58 (0.43-0.72) in the soy formula cohort; 0.51 (0.36-0.66) in the EHWF cohort; and 0.77 (0.64-0.89) in the amino acid–based formula cohort.

The incidence of atopic manifestations in the rice hydrolyzed formula, soy formula, EHWF, and amino acid–based formula cohorts vs the EHCF + LGG cohort was always greater than the prespecified absolute difference of 0.25 at an alpha-level of 0.0125, with corresponding risk ratios of 2.37 (1.46-3.86, P < .001) for rice hydrolyzed formula vs EHCF + LGG; 2.62 (1.63-4.22, P < .001) for soy formula vs EHCF + LGG; 2.31 (1.42-3.77, P < .001) for EHWF vs EHCF + LGG; and 3.50 (2.23-5.49, P < .001) for amino acid–based formula vs EHCF + LGG.

The immune tolerance acquisition rate was greater in the EHCF + LGG cohort during the 36-month study period.

Conclusions: There was an association found between the dietary management CMPA with EHCF + LGG and a greater rate of acquisition of immune tolerance to cow’s milk protein as well as a lower incidence of atopic manifestations. (J Pediatr 2021 May;232:183-191.e3).

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**In Memoriam**

**TAMIR MILOH, MD**

Tamir Miloh, 53, MD, a pediatric transplant hepatologist at The University of Miami, Leonard Miller School of medicine, passed away on Saturday January 1, 2022.

Dr. Miloh received his MD degree from Tel Aviv University in Israel and began his career in transplant hepatology at Mount Sinai hospital, Recanati Transplant Institute, in New York. He then moved to Phoenix Children's, and subsequently to Baylor College of Medicine to lead the pediatric transplant hepatology program there. In 2019, he moved to University of Miami, Leonard Miller School of Medicine as Professor and director of transplant hepatology.

He was passionate about helping children with liver disease. He served in various leadership positions including as a member of the PSC Forum Steering Committee, SPLIT (Studies of Pediatric Liver Transplant) Registry Committee and was the current director of the Wilson Disease Center of Excellence at the University of Miami.

Dr. Miloh was a leader in the field of pediatric hepatology and has published over 90 papers and book chapters. He was an excellent speaker and was invited internationally for talks.

An excellent clinician, he was loved by his patients, and their parents. His fun loving and easy personality lit up every room and he has touched many hearts. He was a warm friend and exceptional colleague in our field. He will be deeply missed, and his contributions to our field will remain as a legacy to children with liver diseases.

**KIMBERLY J. ISOLA, MD**

Kimberly J. Isola, 42, MD, department head of Pediatric Gastroenterology at Cooper University Hospital in Camden, NJ, passed away June 14, 2021.

She earned her undergraduate degree from the University of Pennsylvania in 2000 and earned her medical degree from UMDNJ’s Newark campus. She then served both her residency and fellowship at Mt. Sinai Hospital in New York City.

Dr. Isola practiced at Cooper University Hospital since 2012. Following her death, many of the families of her patients commented in online memorials about Dr. Isola’s caring and patient demeanor. Her obituary stated Dr. Isola was “loved and adored by all.”

Born and reared in Medford, NJ, she was a graduate of Shawnee High School, where she was an honor student and nationally ranked tennis player.

She is survived by her husband and three children and her parents and sister.
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HARRY SHWACHMAN AWARD

Presented to Glenn Furuta, MD

The Shwachman award is given by NASPGHAN to a person who has made major, lifelong scientific or educational contributions to the field of pediatric gastroenterology, hepatology or nutrition in North America. The award is designed to preferentially honor a member of NASPGHAN for his/her achievements in the field.

MARGARET STALLINGS NASPGHAN DISTINGUISHED SERVICE

Presented to Barry Wershil, MD

The NASPGHAN Distinguished Service Award is presented to an individual to recognize excellence and service to the field of pediatric gastroenterology, hepatology, and nutrition by achieving national and/or international recognition in their field.

AAP MURRAY DAVIDSON AWARD

Presented to Estella Alonso, MD

The Murray Davidson Award recognizes an outstanding clinician, educator, and scientist who has made significant contributions to the field of pediatric gastroenterology, hepatology and nutrition.

NASPGHAN MASTER EDUCATOR AWARD

Presented to Praveen Goday, MBBS

The NASPGHAN Master Educator Award for excellence recognizes individuals who have made a significant and sustained contribution to the field of pediatric gastroenterology, hepatology and/or nutrition through education scholarship on a national or international basis.
NASPGHAN Foundation Awards

NASPGHAN FOUNDATION/GEORGE FERRY YOUNG INVESTIGATOR DEVELOPMENT AWARD

- Rachel Chevalier, MD
  *Children’s Mercy Hospital—Kansas City, MO*

  MUCOSAL CYP3A4 AND P-GP MEDIATED DRUG METABOLISM OF BUDESONIDE IN PATIENTS WITH EOSINOPHILIC ESOPHAGITIS (EoE)

NASPGHAN FOUNDATION/NESTLÉ NUTRITION RESEARCH YOUNG INVESTIGATOR DEVELOPMENT AWARD

- Wenjing Zong, MD
  *Children’s Hospital of Philadelphia, PA—Philadelphia, PA*

  CLINICAL OUTCOME AND MICROBIOME BIOMARKERS PREDICTING SUCCESS WITH FIBER FOOD INTRODUCTION IN SHORT BOWELS SYNDROME

NASPGHAN FOUNDATION MID-LEVEL CAREER DEVELOPMENT AWARD

- Shikha Sundaram, MD
  *Children’s Hospital Colorado—Aurora, CO*

  THE ROLE OF EXTRACELLULAR VESICLES IN CHRONIC INTERMITTENT HYPOXIA MEDIATED MACROPHAGE ACTIVATION IN PEDIATRIC NON-ALCOHOLIC FATTY LIVER DISEASE

  *Supported in part by an educational grant from Albireo*

NASPGHAN FOUNDATION/TAKEDA PHARMACEUTICAL PRODUCTS INC. RESEARCH INNOVATION AWARD

- Kara Gross Margolis, MD
  *Columbia University—New York, NY*

  A STATE-OF-THE-ART GUT EPITHELIAL-TARGETED SERT ANTAGONIST TO TREAT MOOD DISORDERS

Rachel Chevalier, MD

Wenjing Zong, MD

Shikha Sundaram, MD

Kara Gross Margolis, MD
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NASPGHAN FOUNDATION/APGNN SUSAN MOYER NURSING RESEARCH AWARD

Melanie Oates, RN-BSN
Nationwide Children’s Hospital—Columbus, OH

IMPROVING IBD CARE THROUGH PARENT MENTORING

NASPGHAN FOUNDATION/QOL RESEARCH AWARD FOR THE STUDY OF DISORDERS ASSOCIATED WITH CARBOHYDRATE MALDIGESTION/MALABSORPTION IN CHILDREN

Mamata Sivagnanam, MD
Rady Children’s Hospital—San Diego, CA

USE OF HUMAN ENTEROIDS TO UNDERSTAND CARBOHYDRATE MALABSORPTION IN CONGENITAL TUFTING ENTEROPATHY

NASPGHAN FOUNDATION/CPNP NUTRITION RESEARCH

Matthew Edwards, BS
Children’s Hospital of Wisconsin—Milwaukee, WI

COMPARING PREDICTIVE ACCURACY OF KNEE HEIGHT EQUATIONS IN PEDIATRIC PATIENTS

Supported through an educational grant from QOL

NASPGHAN FOUNDATION INNOVATIONS IN CLINICAL CARE GRANT

Prashanthi Kandavel, MD
Children’s Hospital Los Angeles—Los Angeles, CA

IMPLEMENTATION OF RAPID INFLEXIMAB INFUSIONS AT A TERTIARY CARE CENTER
NASPGHAN Foundation Awards

NASPGHAN Foundation Advanced Fellowship in Pediatric Endoscopy

- Chathruckan Rajendra, MD  
  University of California—San Francisco, CA

  Developing a Pediatric Advanced Endoscopy Program at a Tertiary Children’s Hospital System

  Supported by an educational grant from Olympus America

NASPGHAN Foundation/Abbott Advanced Fellowship Training in Pediatric Nutrition

- Jessica Deas, MD  
  Children’s Hospital—Los Angeles, CA

  Characterization of the Intestinal Microbiome, Chronic Inflammation and Clinical Outcomes in Children with Short Bowel Syndrome

Crohn’s & Colitis Foundation/NASPGHAN IBD Young Investigator Award

- Marco Di Gioia, PhD  
  Boston Children’s Hospital—Boston, MA

  Control of Inflammatory Bowel Disease (IBD) by Endogenous Oxidized Phospholipids

IT IS NOT TOO LATE TO REGISTER TO VIEW THE DECEMBER 2021 NASPGHAN VIRTUAL MEETINGS

Did you miss the 2021 NASPGHAN virtual meeting? It’s not too late to register and view the meetings, which include the Single Topic Symposium, Postgraduate Course and Annual Meeting. You will be able to receive CME and MOC and claim certificates of attendance.

Go to this link and log in with your NASPGHAN user name and password. After registration, you will receive information with directions about how to access the December meetings. Registration will be open until December 2, 2022.
Special Recognition Awards

GERARD ODELL PRIZE FOR EXCELLENCE IN LIVER RESEARCH

- Ajay Kumar Jain, MD  
  Saint Louis University—Saint Louis, MO

  Ferroptosis inhibitors mitigate ischemia-reperfusion injury in marginal livers in a novel “Protect” model

Yuhua Zheng, MD

AMIN TJOTA PRIZE FOR EXCELLENCE IN PANCREATIC RESEARCH MALDIGESTION/MALABSORPTION IN CHILDREN

- Yuhua Zheng, MD  
  Children’s Hospital—Los Angeles, CA

  Patient-specific induced pluripotent stem cell (iPSC) with Neurog3 mutation reveal potential novel mechanism for pancreatic insufficiency

Hengqi (Betty) Zheng, MD

THE GRAND WATKINS PRIZE

- Hengqi (Betty) Zheng, MD  
  University of Washington, Seattle Children’s Research Institute, Seattle Children’s Hospital—Seattle, WA

  A treatment-naïve single cell atlas of pediatric Crohn’s disease predicts disease trajectory

Hengqi (Betty) Zheng, MD

NASPGHAN FOUNDATION TERI LI YOUNG EDUCATOR AWARD

- Sarah Lusman, MD  
  Morgan Stanley Children’s Hospital of New York—New York, NY

- Jacob Robson, MD  
  University of Utah—Salt Lake City, UT

Sarah Lusman, MD  
Jacob Robson, MD
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  Penn State Health Children's Hospital
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  Academic Faculty Physician - Pediatric Gastroenterology
  *Winston-Salem, NC*

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  Summit Medical Group
  *Bridgewater, NJ*

› **PEDIATRIC GASTROENTEROLOGIST**
  Summit Medical Group
  *Livingston, NJ*

› **PEDIATRIC NEUROGASTROENTEROLOGIST**
  Baylor College of Medicine, Texas Children’s Hospital
  *Houston, TX*

› **PEDIATRIC GASTROENTEROLOGIST**
  Baylor Scott & White Health McLane Children's Medical Center
  *Temple, TX*

› **PEDIATRIC GASTROENTEROLOGY ASSISTANT, ASSOCIATE OR FULL PROFESSOR**
  The University of California in San Diego
  *San Diego, CA*

› **ASSISTANT / ASSOCIATE PROFESSOR OF PEDIATRICS**
  Rutgers Robert Wood Johnson Medical School (RWJMS)
  *New Brunswick, NJ*

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