North American Society for Pediatric Gastroenterology, Hepatology & Nutrition

NEWS

VOLUME 17, NO. 2



President, NASPGHAN: James Heubi, MD



WINTER 2016

As your newly minted President, I have the sense that I may be drinking from a firehose to understand all the inner workings of **NASGPHAN**. We are extremely fortunate to have an outstanding Executive Director, Margaret Stallings, who knows EVERYTHING about our organization! With that being said, there is outstanding support

from the National Office with special thanks to Margaret and the staff including Kim Rose, Donna Murphy and Patricia Chirinos.

Here are a few items on my mind at this time that are likely important to our membership:

- ▶ We have just successfully hosted a World Congress of Pediatric Gastroenterology, Hepatology and Nutrition (WCPGHAN) in Montréal, Quebec on October 5–9, 2016. The attendance was fantastic and exceeding my, Carlo's and Ernie Seidman's expectation at 2674 registrants for the WCPGHAN and 980 for the Postgraduate Course. We have had great feedback about the quality of the meeting. A huge thanks goes out the Host Organizing Committee and all the members of committees who selected topics, speakers and abstracts. This effort is a testament to the value our members and the members of the other FISPGHAN societies place in this event. Remember that the next WCPGHAN will be in Copenhagen on June 3–6, 2020. Plan to attend because it will be an outstanding opportunity to make and renew friendships among the members of our sister societies.
- ▶ With leadership from ESPGHAN, Carlo, Margaret, Mel Heyman and I recently met in New York with Wolters-Kluwer, the publishers of *JPGN*. We discussed strategy regarding improving the quality of the journal and improving its impact factor. The impact factor has been very stable over the last 5 years at 2.314-2.724. The impact factor is based upon citations of articles in the journal. The highest cited articles relate to Guidelines, Society Commentary, Position Papers, Overviews and Consensus Statements, with Clinical Reports following. It is clear that we need to encourage our

membership to choose *JPGN* as their "go to" journal to publish their best science so that we can further enhance the journal's impact factor. A second important area we discussed related to the decision to create a peer reviewed open access journal as a companion to *JPGN*. Much additional work will need to be done to develop the concept with more to come in 2017.

- ▶ NASPGHAN leadership will be meeting at the end of January to plan for the Annual Meeting and Postgraduate Course November 1–5, 2017 in Las Vegas. The Committee Chairs will be soliciting committee members for ideas regarding speakers and topics for the Annual Meeting and it is your opportunity, as a member, to contribute to the success of the Annual Meeting.
- ▶ Kudos also go out to the Fellows Committee for the development of the Fellows' Feud and their work on developing an App for your smartphone that will include information that is extremely relevant to our patient populations.
- ▶ Remember the additional upcoming **NASPGHAN** event: Essential Pediatric GI Review Course being held February 23–25, 2017 in Scottsdale.

Wishing you and your families a wonderful holiday season with time spent away from work with your families. My email is tended on a regular basis so if you have questions, concerns or need short term psychotherapy (ha, ha!), please email me at (james.heubi@cchmc.org).

and to Eus

James Heubi, MD

Director, Center for Clinical and Translational Science and Training and Associate Dean, Clinical and Translational Research, Cincinnati Children's Hospital Medical Center

President, **NASPGHAN**

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President-Elect Report

···· President-Elect, NASPGHAN: Karen F. Murray, MD ·····



As I start my tenure as President-Elect of **NASPGHAN** my conviction regarding the greatness of our Society and its members is reinforced. We are devoted to the wellness of children with gastrointestinal ailments, and with this focus always in sight the unparalleled dedication of our members and Society staff allow **NASPGHAN** to educate, advocate, and innovate, saving lives, guiding professionals, and changing policy.

In conjunction with the many members who tirelessly commit their time to participate in and lead our Society's many committees, I am excited to serve as President-Elect, and learn from our Council members, Jim, Carlo, Athos, Barry, and the many others who have blazed trails for our Society. My first real task is to plan the Annual Meeting of 2017 which will be in Las Vegas, Nevada in November. Council members, Committee Chairs, and Officers will be getting together in a few weeks to plan the

Annual Meeting, and we look forward to putting together the best meeting possible.

Please send any suggestions, concerns, or aspirations regarding the activities of **NASPGHAN** or the Annual Meeting my way (karen. murray@seattlechildrens.org). I will do my best to represent you in **NASPGHAN** and keep the pride going for all of us who are lucky enough to be members.

Wishing you the Happiest of Holidays and the best in the New Year.

Warmly and Sincerely.

Karen F. Murray

Chief, Division of Pediatric Gastroenterology and Hepatology

Seattle Children's Hospital President-Elect, **NASPGHAN**



Secretary-Treasurer's Report

As we approach the end of 2016, I hope that all of our members have had a great year. Our membership continues to grow, adding to the vitality of our Society. Membership renewal notices will be coming soon for 2017 and I wanted to encourage all of our members to renew. If you happen to have any colleagues who are not members I would ask that you encourage them to join or rejoin our Society.

I am occasionally asked how your membership dues help members. I would first like to point out that our administrative costs are very low for our overall budget, an important issue for membership value. Did you know that your membership dues help support the following efforts?

- ▶ Providing CME at our Annual Meetings and events like the upcoming Review Course. Thanks to Margaret Stallings and her team and the Professional Education Committee, we successfully renewed our accreditation with commendation for CME this past year.
- ▶ Support for **NASPGHAN** efforts to diversify the options for MOC for our members.
- ▶ Support for either the whole projects or the initial development of projects such as our educational material, podcasts, guidelines and webinars.
- Support for advocacy efforts.
- Supplemental support for the fellow's conferences. We appreciate our industry partners who support these conferences, but recently we have had to add some supplemental funding for these conferences.

Thus, I would hope that you all agree that there is something on the list that meets a need for every member of NASPGHAN.

I would also like to acknowledge all of our members for their tremendous support of the World Congress of Pediatric Gastroenterology, Hepatology and Nutrition in October, 2016 in Montreal. We had a record attendance with 2,674 attendees at the World Congress and 980 attendees that Postgraduate Course. It is this degree of participation that keeps our Society strong and vibrant.

We look forward to seeing you at one of our upcoming events:

- ▶ Essential Pediatric GI Review Course: Feb 23-25, 2017 in Scottsdale, AZ
- ▶ NASPGHAN Annual Meeting and Postgraduate Course: November 1-5, 2017 Las Vegas NV

As always, I am happy to answer any questions or concerns you may have about membership issues or finances as they relate to **NASPGHAN**. I can be reached at (michael.narkewicz@childrenscolorado.org).

Michael Narkewicz, MD

Secretary-Treasurer, NASPGHAN





NASPGHAN Foundation News

······ Barry Wershil, MD ····· President, NASPGHAN Foundation

Dear **NASPGHAN** Colleagues:

As the holidays approach, we want to take this time to reflect on the year that has passed, as well as what the future holds for the

Foundation, and take this opportunity to celebrate the success of the World Congress meeting in Montréal and all the people that contributed to that endeavor.

Supporting research is a key objective of the Foundation, and we were delighted to present the recipients of Foundation grants at the World Congress. These include:

- ▶ Dr. Akihiro Asai from Cincinnati Children's Hospital Medical Center as the recipient of the **NASPGHAN** Foundation/George Ferry Young Investigator Development Award.
- Dr. Samar Ibrahim from the Mayo Clinic receiving the NASPGHAN Foundation/Nestlé Nutrition Young Investigator Development Award.
- ▶ Dr. Edwin de Zoeten from the Children's Hospital of Colorado Denver receiving the **NASPGHAN** Foundation Mid-Level Career Development Award.
- ▶ Dr. Ross Maltz from Nationwide Children's Hospital as the recipient of the **NASPGHAN** Foundation Fellow to Faculty Transition Award in Inflammatory Bowel Diseases.

The Foundation also recently announced grant recipients for the NASPGHAN Foundation/AstraZeneca Research Award and the NASPGHAN/APGNN Susan Moyer 2016 Nursing Research Grant. Dr. Nicola Jones from Hospital for Sick Children is the recipient of the NASPGHAN Foundation/AstraZeneca Research Award for Disorders of the Upper Gastrointestinal Tract and JoAnne Newton from Children's Hospital Colorado, Kim Osborne from Nationwide Children's Hospital and Fiona Paul from Boston Children's Hospital all are recipients of the NASPGHAN/APGNN Susan Moyer 2016 Nursing Research Grant

We were also thrilled to present a number of Special Recognition Awards to young investigators for excellence in research at the World Congress. These include:

- ▶ The William F. Balistreri Prize to Dr. Joanne Masterson at the University of Colorado Denver
- ► The Gerard Odell Prize to Dr. Sarah Taylor at Ann & Robert H. Lurie Children's Hospital of Chicago
- ▶ The Richard J Grand and John B. Watkins Prize to Dr. Ivan Fuss at the NIH
- ▶ The Teri Li Award for Education to Drs. Bram Raphael at Boston Children's Hospital and Aliza Solomon at New York Presbyterian/ Weill Cornell Medical Center.

Congratulations to all!

We also want to acknowledge another successful Annual Partners Meeting held at the World Congress. This meeting presents an opportunity to engage with our most active corporate partners on topics relevant to medicine and industry. The highlight of this year's meeting was a panel discussion with Dr. Andrew Mulberg on the perspective of the FDA on drug development, and a parent-patient perspective on experimental drug trials and barriers to new treatments for pediatric patients. We again want to thank all of our corporate partners, new and longstanding, for their support this year!!

We have had an outstanding number of educational events over the course of 2016. Since the last newsletter, we have added a webinar on Exocrine Pancreatic Insufficiency: Diagnosis and Management, and just recently a webinar entitled: The New Design for EnFit Connectors: New ISO Standards for Enteral Connectors.

An IBD Decision Aid Tool has been rolled out on GIKids and an IBD App for transition is being developed, to name a few projects in the works. Keep tuned for more.

We can reflect back on 2016 with a sense of accomplishment and pride, but we also want to look forward to 2017 and beyond. As we do, we recognize that your continuing support is vital. We hope that you will consider the Foundation as part of your year-end giving. Our goal is 100% participation of our membership. This will not only help support our mission, but will be a powerful message to our industry partners that **NASPGHAN** is "all in". We need your **support** and hope that you will give and give generously.

And in summary, I'd like to thank everyone who has contributed their time and money to support the activities of the Foundation. This is your Foundation, and we hope to keep it vibrant and serving you for years to come. A happy and healthy holiday season to all and your families.

Thank you again and best wishes for a happy holiday season, and a healthy 2017.

Bang Wershil, M.D.

Sincerely,

Barry K. Wershil, MD

President, NASPGHAN Foundation

Chicago, IL





On-Demand CME/CPE Webinars, Podcasts and Slide Sets

The **NASPGHAN** Foundation has produced a series of CME/CPE activities for our members, each available on demand. Listed below are the current offerings.

On-Demand CME/CPE Webinars



The New Design for ENFit® Connectors: New ISO Standards for Enteral Connectors

The new connectors will modify the delivery of enteral nutrition, and hydration as well as prescribing, dispensing, and administering enteral medications. The new ENFit® syringe design will carry a risk of dosing inaccuracy—both over-dosing and under-dosing—due to the dead space of the new ENFit® Syringe design.



Exocrine Pancreatic Insufficiency: Diagnosis and Management

Exocrine pancreatic insufficiency (EPI) results from different underlying etiologies and has negative implications on the children's growth and health. Cystic fibrosis CF is the most common etiology that leads to EPI. Other conditions that cause EPI in children include but are not limited to, Shwachman Diamond Syndrome, Pearson Marrow Syndrome and others. We, thus, need educational tools to shed the light on the most frequent presentations and the basic work up that can help health care providers recognize this entity.



Raising Awareness about Autoimmune Liver Diseases

This educational program educates physicians on evidence-based recommendations for appropriate diagnosis and treatment of PSC, AIH and ASC to enhance their ability to provide appropriate care for their patients.



Proton Pump Inhibitors: To use or not to use . . . That is the Question!

This webinar arms the physician with essential education to ensure clarity surrounding current indications for use of proton pump inhibitors in children, as well as a growing understanding of risks associated with their use.



Eosinophilic Esophagitis Diagnosis and Management

This webinar will present current state of the art findings related to Eosinophilic Esophagitis diagnosis and treatments, which include dietary restriction, pharmacologic therapy and esophageal dilation.

SLIDE SETS



Reflux & GERD

Proton Pump Inhibitors To use or not to use . . .



Eosinophilic Esophagitis

Eosinophilic Esophagitis: Diagnosis and Management (Full Reference Set)

Eosinophilic Esophagitis: Diagnosis and Management (Core Set)

NASPGHAN FOUNDATION PODCASTS

NASPGHAN Foundation podcasts offer an easy way to learn about the latest science, whether at your desk or on the go.

Enteral Nutrition as Primary Therapy for Crohn's Disease: Making it happen for pediatric patients



- **EPISODE 2:** Common Approaches to using Enteral Nutrition to Induce Remission in Pediatric Crohn's Disease.
- **EPISODE 3:** Modified Approach to the Use of Enteral Nutrition for Induction of Remission in Pediatric Crohn's Disease at the Children's Hospital of Philadelphia.
- **EPISODE 4:** How to Integrate and Acclimate the Enteral Nutrition Pediatric Crohn's Patient Back into School and Everyday Activities.
- **EPISODE 5:** Frequently Asked Questions About the Use of Enteral Nutrition for Induction of Remission in Pediatric Crohn's Disease Patients.







Encourage your Nutrition Professionals to Join NASPGHAN!

The purpose of **NASPGHAN's** Council for Pediatric Nutrition Professional (CPNP) is to advance the knowledge of nutrition professionals in normal and abnormal nutrition in children; to promote the professional development and recognition of nutrition professionals as experts in

Amber Smith, CPNP President

their respective pediatric specialties; to promote excellence in the nutrition care of children, and to foster collaboration amongst pediatric nutrition professionals in order to develop and standardize best practice.

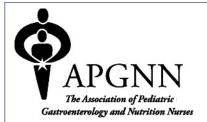
Full membership is extended to any professional with a focused interest and active involvement in pediatric nutrition in North America: Registered Dietitians; and Dietetic Technicians, Registered. The annual membership fee is \$25.

Qualifications:

- ▶ Registered Dietitians who perform supervisory, teaching, clinic, acute care, research, technical or administrative duties in the field of pediatric nutrition will be eligible for full membership.
- ▶ Dietetic Technicians, Registered who perform teaching, clinic, acute care, research or technical duties in the field of pediatric nutrition also will be eligible for full membership.
- All applicants must be employed either full or part-time and be a resident or citizen of a country in North America.

Associate membership is extended to dietetic students, Nurses, Advanced Practice Practitioners, Physicians, Fellows, Commercial company representatives, international applicants, Physician's Assistants, or any person engaged or enrolled in activities relevant to the practice of pediatric nutrition, or who works in the field of pediatric nutrition who does not meet criteria for full membership. Associate members have all the privileges of full membership with the exception of voting.

Download an application.



Fellow **NASPGHAN** members:

For those I have yet to meet, my name is Ryan Shonce, and I am the current



APGNN President. I am a NP in Charlotte, NC and have really enjoyed the professional development and networking offered by my role with APGNN. I hope many of your nurses, dietitians, psychology staff members, and ACP colleagues attended our first ever multidisciplinary conference at the World Congress in Montréal. I was humbled and blown away by seeing many of our physician partners in attendance to some of our sessions as well!

APGNN is committed to working closely with **NASPGHAN**, the **NASPGHAN** Foundation, CPNP and PCG to continue to collaborate on educational offerings for providers and patients alike. We are currently working on items for the upcoming constipation care package and are also in discussion with the **NASPGHAN** Clinical Practice Committee in efforts to gain insightful information about the nursing and ACP workforce in our field.

If you have not encouraged your staff to consider joining our organization, I hope you will do so. There are many benefits including access to a nursing Listserve, committee participation in research, patient education, clinical practice, conference planning or the newsletter. Other incentives include the ability to apply for conference travel scholarships, education awards (conference expenses), and research grants (\$500-\$5000), opportunities to speak at conferences or submit abstracts to present posters, members-only resources such as telephone triage protocols and free e-learning modules with CEU credit. Many discounted opportunities exist as well, including reduced Annual Conference registration fees, savings on your subscription to the *Journal of Pediatric Gastroenterology and Nutrition (JPGN)*, dual APGNN/NAPNAP membership rates, and reduced cost of our APGNN Clinical Handbook, Second Ed.

For providers who are willing to sign up your staff in a group rate, we are still offering an institutional Buy 3 get one free membership deal which I hope you will take advantage of! Please check out www.apgnn.org or email directly if you would like to know more! (Ryan.Shonce@carolinashealthcare.org).

Welcome New NASPGHAN Member

Aakash Goyal, MD





Essential Pediatric GI

"Everything you wanted to know about pediatric GI and are afraid to be asked"

Registration for Essential Pediatric GI Review Course Under Way

Register Now for the GI Review Course February 23–25, 2017 in Scottsdale, Arizona.

This 2½-day course will be a general overview of Pediatric GI and will address the new American Board of Pediatrics content specifications for pediatric GI. With the \$700 course, you will get the review book, small group settings and two breakfasts hosted by course speakers. In addition, at the completion of the course, you will be able to obtain MOC Part 4 and CME credit.

The subject content of this course as well as supplemental educational material will be placed on the **NASPGHAN** website (free for participants of the course). Attendees should gain a repository of basic knowledge for general GI practice that will be able to be accessed whenever needed. Between the 2½-day course and the website, the course will cover ALL of the topics required for the new pediatric GI board (luminal, liver and nutrition).

The course is being held at the Scottsdale Plaza Hotel. Housing reservations can be made through the hotel. The deadline for housing reservations is January 25, 2017.

2017 CERTIFYING EXAMINATION IN PEDIATRIC GASTROENTEROLOGY

Examination Date: November 15, 2017

Registration: February 1, 2017 through April 3, 2017 Late Registration: April 4, 2017 through May 1, 2017

If you wish to withdraw your application and receive the refundable exam fee, the ABP must receive a signed notification by September 15, 2017. The processing and late fees, if applicable, will be retained by the ABP. Fees are not transferable.

All applicants must complete applications online during the registration periods. The requirements for online applications are found on the ABP website. Additional information including eligibility requirements is found on the ABP website. Each application will be considered individually and must be acceptable to the ABP.

Additional information is available from the American Board of Pediatrics, 111 Silver Cedar Court, Chapel Hill, NC 27514-1513, (www.abp.org).

Telephone: 919-929-0461 Fax: 919-929-9255 NASPGHAN Members B Li and Christine Waasdorp-Hurtado Lead Development of 2nd Edition of Board Review Book





After months of work, the **NASPGHAN** Fellows Concise Review of Pediatric Gastroenterology, Hepatology and Nutrition is now published and available for sale.

Drs. B Li and Christine Waasdorp-Hurtado were Editors-in-Chief of this 800 page-plus book that is a second edition of the review manual, originally published in 2010. The 1st edition began as a fellow-initiated project in 2010 by Dr. Waasdorp Hurtado, and she continued her participation in the 2nd Edition. Once again, this volume represents **NASPGHAN's** staunch commitment to meet the educational needs of both fellows and members.



In the 2nd edition, the outline format was maintained to provide concentrated information telescopically and highlight clinical pearls using **bold** and *italics*. Also included are more tables and enhanced genetic information. New material is incorporated, such as the Rome IV criteria. The question section has been completely re-written thanks to Judy Sondheimer, MD, one of the 1st

edition editors. More than 200 **NASPGHAN** members served as section editors or authors of the book.

Drs. Li and Waasdorp-Hurtado stated, "We heard positive stories of its utility in board preparation, even from the co-editor, who after gorging on the 1st edition passed with his highest score ever. Beyond board preparation, we also learned of training programs that used the book as their fellows' core curriculum outline. Indeed, many of the chapters are updated to be state-of-the-art. However, this is not intended to be a sole clinical resource."

Carlo Di Lorenzo, **NASPGHAN** President commented, "We owe a huge debt of gratitude to Drs. Li and Waasdorp-Hurtado who spearheaded this effort, which has resulted in a huge benefit for our members."

In order to purchase the book online, you will need your member user name and password to access the order page. The cost is \$200 and includes shipping and handling. There is a limited supply, so please act now.

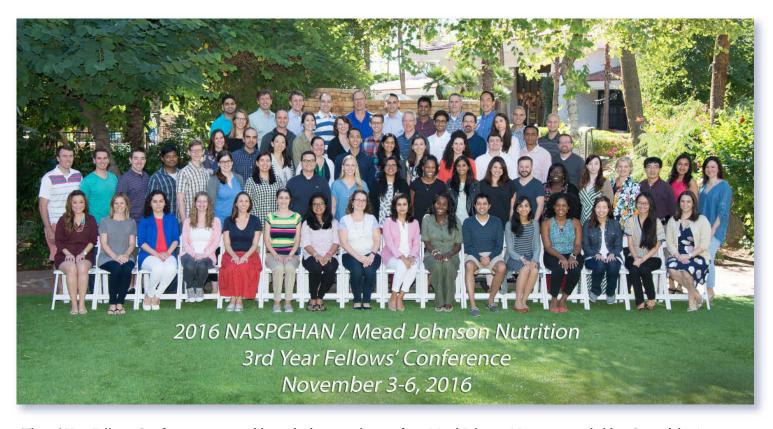
Please note that all fellows in good standing (i.e. dues are paid) will receive a complimentary copy. In addition, registrants for the February review course in Scottsdale, Arizona will receive a book as part of their registration fee.

The book was supported by a grant from Nestlé Nutrition Institute.



Third-Year Fellows Conference November 3-6, 2016

Co-Chairs: Cary Sauer, MD and Binita Kamath, MD, MBBChir, MRCP



The 3rd Year Fellows Conference supported by and educational grant from Mead Johnson Nutrition was held in Scottsdale, Arizona in November. The conference was recently shifted to November to focus on the interview process, career development, and the transition from training to practice. The outstanding faculty included Drs. John Barnard, Mike Narkewicz, Carlo DiLorenzo, Karen Murray, Steve Guthery, Melanie Greifer, Matt Riley, Steven Wu, Cary Sauer and Binita Kamath. The fellows were engaged throughout the conference with talks, discussions and panels as they carefully consider their career options and choices, and prepare to interview, transition, and build a career. Thanks to **NASPGHAN**, the faculty, the fellows, and Mead Johnson Nutrition for their continued support.







Committee Reports

NUTRITION COMMITTEE

- Chair: Justine Turner, MD, PhD

Thank you to all members of the Nutrition Committee for a successful year. In particular, thank you to the outgoing Chairman, Praveen Goday, who has been a major driving force behind many of the initiatives we are pleased to report here.

First, it was wonderful to see our nutrition interests so well represented at the 2016 World Congress. There were no less than five nutritionfocused breakfast sessions. There were concurrent sessions that covered nutrition in IBD, intestinal rehabilitation, the burden of over- and under-nutrition and of micronutrient deficiency, and over 130 posters were presented from NAPSGHAN members in the Nutritional andIntestinal Rehabilitation sessions. I would like to highlight the outstanding Nutrition Symposium held in collaboration with our Council of Pediatric Nutrition Professional colleagues (see the CPNP report of their growing successes in this newsletter, page 27). The joint symposium was an outstanding one-day program that delivered state-of-the-art updates on clinical nutrition topics relevant to our multidisciplinary patient care, including insights from world leaders on intestinal rehabilitation and gastrointestinal food allergy. For those of you that missed this amazing program, please be on the lookout for similar offerings at the NASPGHAN 2017 Annual Meeting.

During the last year, the Nutrition Committee was active in developing specific CME content: an enteral nutrition MOC has been developed and is currently available and a parenteral nutrition MOC is under way. For the first time ever the NASPGHAN Nutrition Committee collaborated with the American Society for Parenteral and Enteral Nutrition to produce a webinar highlighting the patient safety issues prompting the introduction of new standards for enteral connectors. Last but not least, NASPGHAN Nutrition University was held once again in Chicago in April. The feedback from the attending fellows, junior and senior faculty wasoverwhelmingly positive. This year we will build further on our CPNP collaboration and invite more dietitians to participate with our GI physicians, enhancing further multidisciplinary patient care and collaboration during the 2017 Nutrition University March 31-April 1. This important education initiative has been supported for the fifth year in a row by Nutricia. (see related story, page 12).

Our current Committee membership is 30 strong and I have already heard many great ideas from the members about how we can continue to keep nutrition education, research and clinical care at the forefront of our Society. I look forward to working with you all in the coming year.

PROFESSIONAL EDUCATION COMMITTEE

- Chair: Jennifer Strople, MD

The prime activity of the Professional Education Committee, the annual Postgraduate Course, was held in Montréal, Canada this October, in conjunction with the World Congress of Pediatric Gastroenterology, Hepatology and Nutrition. We continue to have great membership feedback regarding the program, and the addition of MOC part II credits to this course over the past two years has further helped meet the needs of our members. Members of the Professional Education Committee functioned as moderators, and we thank them for their help in making this course a success. Margaret Stallings and the **NASPGHAN** National Office did another phenomenal job helping with organization and we owe them our gratitude.

Our Committee is already hard at work preparing the 2017 course for the **NASPGHAN** Annual Meeting in Las Vegas! Please note that we take your evaluations seriously and we appreciate the feedback. Our goal is to generate the best possible course for all. The Professional Education Committee is interested in your input on topics and speakers for the 2017 Postgraduate Course; we strive to represent the entire membership and supporters of **NASPGHAN** and meet all educational needs. Please email your suggestions and thoughts to (jstrople@luriechildrens.org).

The Professional Education Committee continues to be involved with symposia development at other national meetings. **NASPGHAN's** presence at PAS continues to increase with our liaisons Dr. Jyoti Ramakrishna and Dr. Regy Gonzalez-Peralta participating in the conference planning. This year two amazing **NASPGHAN** sessions have been accepted for this program. Additionally, Dr. Marsha Kay is working with the American Gastroenterological Association's Growth, Development and Child Health section to create an exciting program for the DDW 2017. Many thanks to our Committee members for helping us extend our educational opportunities. We are also happy to hear any thoughts for topics and speakers for these events.

The Committee supports all educational opportunities and continues to work closely with the **NASPGHAN** Foundation on reviewing its educational offerings. There are more exciting things ahead as well... so keep your eyes and ears open!

In closing, we would like to extend our deepest appreciation to the entire membership of Professional Education Committee for contributing throughout the year. Every single member works hard and plays a role in furthering our goals.



INTEGRATIVE MEDICINE SPECIAL INTEREST GROUP FORMS

- Ashish Chogle, MD, MPH -

The **NASPGHAN** Integrative Medicine Special Interest Group is a newly formed working group that aims to promote usage of a combination of mainstream medical treatments and complementary-alternative medicine (CAM) for which there is some high quality evidence of safety and effectiveness.

We've all seen the words "complementary," "alternative," and "integrative," but what do they really mean? If a non-mainstream practice is used together with conventional medicine, it's considered "complementary." If a non-mainstream practice is used in place of conventional medicine, it's considered "alternative." We use "integrative medicine" when we talk about incorporating complementary approaches into mainstream health care. Integrative medicine is supposed to "cherry pick" the very best, scientifically validated therapies from both conventional and CAM systems, a philosophy that neither rejects conventional medicine nor accepts alternative therapies uncritically.

Several studies have looked at the use of CAM in pediatrics and have reported the usage in 36% to 72% of the studied population. Herbal medicines, dietary supplements (probiotics, vitamins and fish oils), and special diets (e.g. dairy-free, gluten-free diets) have been the most popular CAM therapies in addition to others such as psychotherapy. Reasons for using CAM were reported as "to feel better", to complement standard care, to address dissatisfaction with prescribed medications vis-à-vis adverse effects and efficacy, to follow advice from a trusted individual, and the belief that CAM is always natural and safe. Most studies reported rates of at least moderate satisfaction in perception of efficacy by more than half of the respondents.

Health care practitioners do not consistently ask patients about their CAM use. At the same time, patients and families often do not volunteer that information, and many want physicians to ask about CAM use. There is also likely to be a discrepancy in the trust factor for integrative medicine between physicians and the patients using it, sometimes with good reason due to lack of evidence for its efficacy in certain conditions.

In the world of pediatric gastroenterology, CAM is used in commonly encountered clinical conditions such as constipation, diarrhea, IBS, Crohn's disease, Ulcerative colitis, etc. The use of CAM is more common in patients with IBS than it is in nonfunctional gastrointestinal conditions. Lack of strong evidence, potential for adverse effects, and parental concern limit the utility of conventional pharmacologic options for IBS. The incidence of CAM use in pediatric patients with IBD ranges from 40% to 70%. Once again, concern over significant adverse effects and lack of efficacy of conventional therapies have been given as reasons for such use. Use of CAM is increased particularly in IBD patients who have a worse quality of life. As pediatric gastroenterologists, we have often witnessed patients who have stopped conventional IBD medications altogether and have returned later with catastrophic complications. There is clearly a need for good quality randomized controlled trials to establish the usefulness or rather the limits of usefulness of CAM therapies in IBD.

With the ever-increasing patient interest in CAM, it is of paramount importance to partner with your patients and ask about CAM use, as well as maintain an awareness of efficacy, safety, harm, drug-supplement interactions, and appropriate referral sources.

NASPGHAN FOUNDATION FELLOW TO FACULTY TRANSITION AWARD IN INFLAMMATORY BOWEL DISEASE

······ Grant Deadline March 27 ·····

This award provides \$75,000 salary support to enable promising senior pediatric gastroenterology fellows to spend an additional year engaged in full-time research and patient care related to pediatric inflammatory bowel diseases (IBD). The goal is to prepare physicians for independent research careers in IBD by allowing them:

- ◆ To further develop a promising clinical, epidemiologic, outcomes or basic science project, or
- To build on previously acquired skills and make a transition to IBD Research.
- ◆ To learn new techniques and/or clinical skills by pursuing a formal curriculum at either their sponsoring institution and/or as a visitor for an extended period at a pediatric or internal medicine IBD center at another institution.

Supported by a grant from Abbvie and Janssen Biotech.

Submit a grant here.



CoPS and NASPGHAN

Alan M. Leichtner, MD

What is CoPS? If you guessed a long-running reality television program following the exploits of law enforcement officers, you didn't pay attention to the small case "o". CoPS, the <u>Council of Pediatric Subspecialties</u>, was founded in 2006 to address the common needs of pediatric subspecialties and subspecialists.

Currently, 19 pediatric subspecialties are represented, with 1 or 2 representatives per specialty. In addition, CoPS includes representatives from the following affiliated organizations: American Academy of Pediatrics (AAP), American Board of Pediatrics (ABP), Association of Medical School Pediatric Department Chairs (AMSPDC), Academic Pediatric Association (APA), Association of Pediatric Program Directors (APPD), and Academic Pediatric Association (APS), and from the AAP Section on Pediatric Trainees (SOPT). CoPS has a unique and essential role for pediatric subspecialties – it is the only organization representing the subspecialties that sits at the table with the other leadership organizations in pediatrics; its mission is to enable all pediatric subspecialties to advance "child health through communication and collaboration within its network of pediatric subspecialty and liaison organizations".

Gastroenterology, Hepatology and Nutrition has a representative for **NASPGHAN** (currently Alan Leichtner) and for the AAP Section on Gastroenterology, Hepatology and Nutrition (SOGHN) (Mel Heyman, who is also the Chair of CoPS). As the **NASPGHAN** representative, I am expected to promote communication and feedback between **NASPGHAN**, the SOGHN and CoPS. As a pediatric gastroenterologist, you need to be aware of this important voice for our specialty.

So, what has CoPS accomplished? With regard to fellowship education, CoPS was instrumental in the promotion of use of the Electronic Residency Application Service (ERAS), establishing the match system for pediatric subspecialties, consolidating those matches in the fall of senior residency, and advocating for delaying the start of fellowship to July 7th, to be implemented by many programs in July 2017. CoPS has encouraged interest from medical students and pediatric residents in subspecialty fellowship training through descriptions of each **subspecialty** and lists of potential mentors on its website. CoPS has also worked with the ACGME on subspecialty program requirements, including duty hours and minimum dedicated time for program directors. Last month, CoPS established a Workforce Action Team to readdress the workforce needs in pediatric subspecialties.

With **NASPGHAN** and the other subspecialties, CoPS has challenged the ABP to reconsider current requirements for Maintenance of Certification (MOC), particularly as MOC applies to the subspecialists. To this end, and in representing your best interests, CoPS is working closely with the ABP and the other affiliated organizations (above) to help improve the MOC system.

For additional information on the CoPS strategic plan or to suggest new issues to address, please contact me at (alan.leichtner@childrens.harvard.edu) or visit the CoPS website. Mel and I are looking forward to promoting the interests of pediatric gastroenterology, hepatology and nutrition and of pediatric subspecialties in general, through CoPS, NASPGHAN, and the AAP SOGHN.



News from the Editor

Mel Heyman, MD, Editor-in-Chief, Western Hemisphere, JPGN

ORGANIZATIONAL ANNOUNCEMENTS:

NEW Section Categories!—As you may already be aware, we have subdivided Gastroenterology into two new categories.

Thus, original articles are categorized as Gastroenterology, Gastroenterology - Inflammatory Bowel Disease, Gastroenterology - Celiac Disease, Hepatology, Pancreatology, Nutrition. We encourage you to submit your best research for each of these categories!

Online Articles—We will be expanding our online articles. To date, we have primarily focused on case reports, image/video of the month and letters to the editor. Going forward, more original research and review articles will be found in our online pages (abstracts of original articles will also be published in the print issue). Please let us know if you have any suggestion to enhance your online experiences.

Reviewers— The peer review process is an essential component of any scientific journal and is dependent on reviewers to conduct an appropriately thorough, informative, and timely review. JPGN has been incentivizing reviewers by providing CME credit for conduct of reviews. Additionally, the journal now has guidelines for reviewers that will be available on the JPGN website to help guide reviewers in assessing the articles. While we do not expect reviewers to answer all of these suggestions, they do provide some guidance especially for less experienced reviewers among those of you who are just beginning to get involved in this process.

Social Media Update—JPGN Social Media Editors Dr. Charles Vanderpool (North America) and Dr. Ania Rybak (Europe) are continuing to build the JPGN presence on social media platforms. Be sure to follow JPGN on Facebook and on Twitter. We encourage you to Tweet about articles in JPGN using the hash tag (#jpgnonline). Retweeting on Twitter and sharingFacebook posts also help to increase visibility of our journal and its contents.By downloading the IPGN iPad app from the App Store, you can read the latest issue of JPGN on your iPad!

EDITORIAL MANAGER UPDATES

Instructions for Authors (IFAs)

Reporting Guidelines (EQUATOR NETWORK)— The instructions for authors are being updated periodically to reflect changes in submission requirements. The major change now will be that for original studies the editors are requesting that authors submit an appropriate checklist from the Equator Network. Specifically, studies involving (1) randomized trials (CONSORT), (2) observational studies (STROBE),

- (3) systematic reviews and meta-analysis protocols (PRISMA),
- (4) diagnostic and prognostic studies (STARD), (5) meta-analyses of observational studies (MOOSE), and (6) QI studies (SQUIRE) will require submission of the referenced or equivalent EQUATOR checklist. These checklists will help to guide authors in the submission of improved

manuscripts and will facilitate quicker assessments by the reviewers and faster decisions by the editors. Feel free to contact the editorial office or the editors if you have questions or comments regarding this new requirement.

Case Reports—As noted in last month's newsletter, we are now accepting submissions for publication of Case Reports. The report should present unique case(s) that are deemed important to the health of our patients or the advancement of the knowledge base in our field; justification must be documented in a cover letter to the editors.

Update Your Editorial Manager Contact Information—

All JPGN authors and reviewers have a profile in Editorial Manager. We encourage you to periodically visit the site and update your contact information and affiliation.

This can be done at the "Update My Information" link at the top of every page.



Updating your contact information carries several benefits. As a potential reviewer, you will be eligible to receive invitations to review manuscripts and submit commentaries and other invited content. Updating your specific interests also helps the editorial board find a good match between the reviewer and the content of the submitted manuscripts. Most important, submission and peer review processing will not be delayed because the Editorial Office is trying to contact you at the wrong address.

So please update your email and other contact information. As an author, your manuscript submission will automatically populate with the correct affiliation, and the JPGN Editorial Office will be able to contact you with any updates regarding your manuscript and/or review.

CALL FOR CONTENT

Rapid Communications—We welcome your best research that can be submitted as a Rapid Communication, with a 10-day turnaround to first decision.

Scientific Articles—JPGN is currently focused on attracting and publishing state-of-the-art scientific articles. As we strive to continuously improve the quality of our journal, we encourage you to submit your gastroenterology, hepatology, pancreatology and nutrition-related basic, translational and clinical scientific studies to JPGN for consideration for publication. In particular, we are seeking articles focusing on basic concepts of growth and development and pathophysiology of disease related to our fields of interest.

Filler Items—The Journal is soliciting content specifically to maximize any blank space in the print publication. This content will not appear online.

Materials considered for publication as fillers include:

- Brief articles [under 150 words] dealing with the history of pediatric gastroenterology, hepatology and nutrition
- Cartoons
- Photographs
- Original artwork
- Poetry

Please be sure to use the "Invited Filler" article type for your submission.

If you have any suggestions regarding any of these or other new initiatives for our journal, please feel free to contact me, and keep sending your papers to JPGN, your journal!





March 31–April 1, 2017 Hyatt Regency O'Hare Hotel Chicago, IL

This course is designed to provide specialized nutrition education in areas associated with the practice of pediatric gastroenterology and nutrition.

The **application site** is open. Applications must be received no later than January 13, 2017. Late applications will not be accepted.

Eligibility: Attendees must:

- ▶ Be a 3rd year pediatric GI fellow or
- ▶ Be a **NASPGHAN** member who graduated from fellowship within the last 10 years
- ▶ Be a CPNP member
- ▶ Be a member in good standing (i.e. dues paid in full by January 1, 2017)
- ▶ Be based in North America

Invited attendees will be limited to 40:

- ▶ 30 positions for 3rd year fellows and junior faculty who graduated from fellowship within the last 10 years.
- ▶ 10 positions for practicing registered dietitians with a focused interest in pediatric nutrition.

Those invited to attend will be notified in early February. All attendees will receive complimentary registration, one night's lodging, meals and round trip travel up to \$500. Any additional expenses will be the responsibility of the attendee.

Criteria for Award Selection: For 3rd year fellows and junior faculty, we will be targeting two groups of candidates: (a) candidates who received minimal nutrition education during their fellowship and (b) candidates who plan to pursue pediatric nutrition as their career focus. For CPNP members, we ask that you have at least three years GI experience.

Program Overview: The course, chaired by Justine Turner, MD, PhD, will include presentations on Nutritional Management of Allergic GI Diseases and IBD followed by Nutrition Jeopardy on Friday evening and a series of small group hands-on case-based learning of challenging cases on Saturday. As a prerequisite, participants will be required to review last year's Course on line to apply knowledge during interactive case discussions.

Topics Covered:

- ▶ Malnutrition
- ▶ Failure to thrive and feeding disorders
- ▶ Micronutrient deficiencies
- ▶ Critical care nutrition
- ▶ Short bowel syndrome/malabsorption
- ▶ Obesity/bariatric nutrition
- ▶ Failure to thrive
- ▶ Cystic fibrosis
- ▶ Nutrition in eosinophilic esophagitis, inflammatory bowel disease and liver disease

Start time: Friday March 31 2017, 5:00 p.m.

End time: Saturday, April 1, 2017, 3:30 p.m.

This educational activity is supported by an independent medical educational grant from Nutricia North America.

The North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

NASPGHAN 2017 Membership Fees Can Now be Paid Online

You can now view and pay your 2017 membership dues online. To view your account, please: 1. **Go to the Member Center** 2. Log in with your user name and password 3. Click on Pay Dues/Make Donation on the left-hand side of the page.

If you pay online, you will receive an automatically generated receipt and confirmation. Please remember that you will not receive *JPGN* after January, 2017, if you have not paid your 2017 **NASPGHAN** membership fees.

Please also 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. We would appreciate it if all changes could be made by the end of 2016.

If you have any trouble logging onto the NASPGHAN website or have any questions, please contact Donna Murphy, at (dmurphy@naspghan.org) or 215-641-9800.

Welcome 2016 First-Year Fellows

Neha Ahuja Ligia Alfaro Cruz Samer Alnabhan Jane Alookaran Muhanad Alruwaithi Netzi Carolina Arreola Valdés Roxy Ane Ayala Castro Gracielle Bahia Corey Baker Christina Baldwin Anna Banc-Husu

Andrea Livier Barajas Castro Jessica Barry

Irini Batsis Elizabeth Berg Heli Bhatt

Natalie Bhesania Liron Birimberg-Schwartz

Janice Bitong Samuel Boston Andrew Buckley Mirjam Bueno De Mesquita

Miroslava Cabrera Perez Sandra Mabel Camacho Maria Jose Carillo-Quan Jorge Miguel Caro Samaniego

Becky Biqi Chen Donna Cheung Vikram Christian Nallely Córdoba Morales

Francisco Cortes Espinosa Orlando Cortes

José Luis Cortez Montes De Oca Peter Costa

McGreggor Crowley

Carlos Augusto Cuadros Mendoza

Justin De Boer Jasbir Dhaliwal Lina Diaz Calderon Chinenye Dike

Chinenye Dike Bridget Dowd Dalya El Tawil Marc Elias

Mariana Xail Espriu Ramirez

Sarah Faasse
Anna Ferguson
Marisa Gallant
Jessica Gangaram
Annie Gao Goodwin
Anel Garcia Montalvo
Kahleb Graham
Nicole Green
Lindsey Gumer
Yoseph Gurevich
Luz Helena Gutierrez
Timothy Hadley
Temara Hajjat
Brendan Harris

Rodrigo Hernández Mora Mary Catherine Huckaby

Amir Jazayeri Jocelyn Jeong Amrita Kahlon Batul Kaj

Sara Hassan

Prasanna Kumar Kapavarapu Art Kastl Soofia Khan Alexandra Kilgore Mira Kothari Matthew Kowalik Stanley Lau Noemie Laverdure Colleen LeBlanc Rose Lee Samuel Leung Tony Ljuldjuraj

Ivan Mauricio Llanos Arango

Tu Mai

Amber McClain

Nohemi Liliana Marquez Quezada

Jennifer McPeak Robinson Megha Mehta Hilary Michel Daniela Migliarese Isaac Keisha Mitchell

Keisha Mitchell Shikib Mostamand Kiran Mudambi Shweta Namjoshi Shaida Nasiri Inessa Normatov

Ana Carolina Ogaz Campos Juan Carlos Padilla Cervantes

Brittany Parlow Trusha Patel

Andrea Natalia Pedraza Pena Stephania Peña Hernández

Carla Perez Ryan Pittman

Sittichoke Prachuapthunyachart Juana Maria Quevedo Sánchez Yazmin Berenice Quinones-Pacheco

Chathruckan Rajendra Thomas Ratchford

Fatima Azereth Reynoso-Zarzosa

LaQuatre Rhodes
Rachel Ruiz
Angela Sandell
Deepthi Sankepalli
Julie Sanville
Corey Scherer
Amit Shah
Abdul Shahein
Asiya Shakir
Vivek Shenoy
Sarah Sidhu

Asiya Shakir
Vivek Shenoy
Sarah Sidhu
Brandon Sparks
Patricia Subnaik
Nancy Swiader
Erin Syverson
Saurabh Talathi
Dimitrios Tapsas
Tsega Temtem
Ximena Tenganá Delgado
Maura Torres-Aguilera

Amy Turner

Jorge Adonai Valdez Romero

Annette Vannilam Amy Virojanapa Sharad Wadhwani Adjowa Walker Kaitlin Whaley Dong Xi Narendra Yallanki

American Academy (of Pediatrics Corner &

Greetings!

It was my pleasure to see so many of you at the World Congress meeting in Montréal and again, shortly thereafter, at the AAP National Conference & Exhibition in San Francisco!

While attending WCPGHAN and NCE, I enjoyed participating in meetings with many of you to explore new ways for AAP and **NASPGHAN** to work together on advocacy issues (e.g. button batteries and medical foods) and expand meaningful options for MOC. Stay tuned as I continue to follow-up on the great ideas we discussed.

It is my privilege to serve as the current Chair of AAP's Section on Gastroenterology, Hepatology and Nutrition (SOGHN), and I wish to acknowledge Michael Cabana and Bram Jelin for their combined 7 years of service on the Executive Committee. Effective November 1st, we welcome David Brumbaugh and Jennifer Dotson as they begin their terms of service on the Executive Committee and look forward to the new ideas and expertise they will contribute.

I am delighted to report that the 2016 AAP National Conference and Exhibition (NCE) was a tremendous success with over 15,000 attendees, including a record-setting number of international participants. There were a number of outstanding pediatric gastroenterology, hepatology and nutrition sessions presented by David Brumbaugh, Roberto Gugig, James Heubi, Danny Mallon, Michelle Pietzak and Sue Rhee. I continue to serve on the NCE Planning Group and welcome your suggestions for future topics specific to our specialty and of interest to general pediatricians. Next year's NCE will take place September 16-19, 2017, in Chicago. We hope to see many of you there!

I am pleased to report that PREP GI, launched earlier this year, is going strong with over 700 current subscribers. This online course, developed in collaboration with **NASPGHAN**, is approved for 20 points of MOC Part 2 credit by the American Board of Pediatrics. Many thanks to the very hard-working Editorial Board, currently comprised of Steve Schwarz (Editor), Judy Sondheimer (Deputy Editor), Ninfa Candela, Steve Ciciora, Christine Hurtado, Sarah Lusman, Danny Mallon, Anthony Porto, Eitan Rubinstein, Darla Shores, Rob Squires, and Kristin Van Buren.

An important reminder that calls for nomination have been issued for the 2017 Samuel J. Fomon Nutrition Award and the AAP Murray Davidson Award. Both of these awards recognize individuals for outstanding achievements in gastroenterology, hepatology and nutrition. Nomination materials for both AAP awards should be submitted to the AAP Office by March 17, 2017, and any questions should be directed to Debra Burrowes at (dburrowes@aap.org) or 847-434-4927.

Finally, I wish to extend my congratulations to Steve Schwarz, recipient of the 2016 AAP Murray Davidson Award. Steve has been active on many fronts with numerous AAP and NASPGHAN initiatives, and he truly exemplifies an outstanding clinician, teacher, scholar, and advocate for children's health. Very well deserved, Steve!

Best wishes for a healthy and joyful holiday season!

Jenifer Lightdale, MD, MPH, FAAP Chair, AAP Section on Gastroenterology,

Hepatology and Nutrition

Email: (jenifer.lightdale@umassmemorial.org)

Save these dates!

NASPGHAN Meetings & Important Deadlines

2017

- JANUARY 26–29, 2017
 2017 First-Year Fellows Conference Orlando, FL
- ▶ FEBRUARY 23–25, 2017 Review Course Scottsdale Plaza Resort—Scottsdale, AZ
- MARCH 9–12, 2017
 2017 Second-Year Fellows Conference Scottsdale, AZ
- MARCH 30–APRIL 1, 2017 2017 Nutrition University Chicago, IL
- NOVEMBER 1–5, 2017
 2017 NASPGHAN Postgraduate Course & Annual Meeting
 Caesar's Palace—Las Vegas, NV

2018

OCTOBER 25–28, 2018
 2018 NASPGHAN Postgraduate Course & Annual Meeting
 Diplomat Resort and Spa—Hollywood, Florida

2019

▶ OCTOBER 16–19, 2018 2019 NASPGHAN Postgraduate Course & Annual Meeting Sheraton Chicago Hilton and Tower—Chicago, IL

Meetings of Interest

ILTS Immunosuppression in Liver Transplantation Consensus and Guidance Conference

Date: February 9–10, 2017Location: Park City, UT

5th Annual Elite Ped. GI Congress

Date: April 26–28, 2017Location: Abu Dhabi, UAE

DDW 2017

Date: May 6–9, 2017Location: Chicago, IL

Pediatric Academic Societies Meeting

Date: May 6–9, 2017
Location: San Francisco, CA

ESPGHAN 50th Annual Meeting

Date: May 10–13, 2017
Location: Prague, Czech Republi

The 2017 Joint International Congress of ILTS, ELITA & LICAGE

• Date: May 24–27, 2017

• Location: Prague, Czech Republic

Advances in Pediatric Gastroenterology, Hepatology and Nutrition 2017

• Date: June 1–2, 2017 • Location: Cambridge, MA

XII Congreso de LASPGHAN

Date: June 22–24, 2017Location: Porto, Portugal



Billing & Coding

Provided by Kathleen A. Mueller, RN, CPC, CCS-P, CCC Healthcare Consultant in association with McVey Associates, Inc.

2017 CHANGES TO THE ANESTHESIA CODES

MODERATE (CONSCIOUS) SEDATION PER CPT 2017 INSTRUCTIONS—New codes for conscious Kathleen A. Mueller sedation by the same provider or a different provider performing the service. These will apply to all CPT codes specific to GI since the anesthesia factor (RVU) has been taken out of all GI procedures. For GI physicians who administer and monitor their patients during the procedure, there will be a G code (G0500) assigned specific for anesthesia monitoring during an endoscopic procedure with the exception of biliary procedures.

The value of RVU for anesthesia is 0.10 and that is the RVU for G0500. The final rule was released on November 15, 2016. This will be based upon time in 15 minute increments. This means that an anesthesia module will need to be part of every endoscopy note for those providers who administer and/or monitor anesthesia through their procedures.

2016 CPT CODES	
CPT CODE	CPT DESCRIPTION
99151	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient younger than 5 years of age.
99152	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient age 5 years or older.
99153	each additional 15 minutes intraservice time (List separately in addition to code for primary service)
99155	Moderate sedation services provided by the same physician or other qualified health care professional other than the physician performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient younger than 5 years of age.
99156	Moderate sedation services provided by the same physician or other qualified health care professional other than the physician performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient age years or older
99157	each additional 15 minutes intraservice time (List separately in addition to code for primary service)
G0500	Moderate sedation services provided by the same physician or other qualified health care-professional performing a gastrointestinal endoscopic service (excluding biliary procedures) that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intra-service time.

ICD-10 UPDATE—The CMS grace period for specificity of ICD-10 codes expired on 9-30-2016. This means that your claims submitted with non-specific diagnosis codes may not get automatically paid and may get pended. Make sure your systems have been updated for your providers to allow easier access to pick the more specific diagnosis codes.

Practices are seeing this new denial reason: claim lacks specificity. If this is on your EOB (Explanation of Benefits) from the payer, the note will have to be submitted for review prior to payment.



QUESTIONS AND ANSWER FORUM—

Question: For the purposes of coding, when documenting a rectal suction biopsy procedure, what information needs to be included? One specific question that has come up is whether documenting the amount of suction pressure used is necessary.

Answer: The rectal suction biopsy is reported as **45100**. As far as billing purposes, you just need to document the method of biopsy. For quality reporting and liability issues, the amount of suction pressure should be documented.

Question: We have a couple of physicians doing fecal transplants. The donors are being sent to the lab for testing prior to donating. Do you have any information on billing the donor tests to the recipient's insurance?

Answer: First, you'll have to see if the stool bank is billing any codes. If not, the only thing you can bill is **G0455** to Medicare (this includes everything, even instillation) and **44705** to commercial payers. The commercial payers may allow you to bill for the appropriate CPT code to instill (EGD or colonoscopy). These procedures will require pre-authorization to ensure coverage or any out-of-pocket expense to the patient. If the provider is performing a separate, medically appropriate procedure and not just to instill the solution then that specific procedure can be separately billable.

Here is information that was published by the AGA when the fecal transplant was first used, not really anything since then has been published.

Question: We have a patient whose parents are divorced. Both share custody but are unable to communicate. Our doctor has agreed to meet with Dad to discuss the patient's condition without the patient being there. What's the best code to use for this? Is there a Family Consult code?

Answer: As long as your payer doesn't require the patient to be present during the visit, the visit can be billed. CPT states patient and/or family member in the description so you should be able to bill an established patient visit just by time documentation. Those time increments are found in the CPT book under each level of visit. I would recommend that you check with the payer to see if that is allowed.

Apply for CCFA's Visiting IBD Fellowship Program

The Crohn's & Colitis Foundation of America (CCFA) is now accepting applications for the 2017-2018 Visiting IBD Fellow Program, supported through an educational grant from Takeda Pharmaceuticals U.S.A., Inc.

This program offers qualified gastroenterology second and third year fellows the opportunity to accelerate their career development by participating in a (most) expenses-paid, observer-ship rotation at a leading IBD center for thirty days. The host IBD centers follow a structured curriculum developed by CCFA's Professional Education Committee, a subset of the National Scientific Advisory Committee. The host centers also provide each fellow with a faculty point person who will oversee their education during the program.

For more information, including a list of planned host institutions, please **visit our program website** or **download the application form.** Applications are due by January 26, 2017.

If you have additional questions, please contact Anzee Sherap at (asherap@ccfa.org).

ESPGHAN-NASPGHAN JOINT GUIDELINE PUBLISHED IN *JPGN* ON ESOPHAGEAL ATRESIA-TRACHEOESOPHAGEAL FISTULA

A Clinical Practice Guideline was published in $\ensuremath{\textit{JPGN}}$ in November.

ESPGHAN-NASPGHAN Guidelines for the Evaluation and Treatment of Gastrointestinal and Nutritional Complications in Children With Esophageal Atresia-Tracheoesophageal Fistula. Krishnan, Usha; Mousa, Hayat; Dall'Oglio, Luigi; Homaira, Nusrat; Rosen, Rachel; Faure, Christophe; Gottrand, Frédéric (JPGN;2016:63:5:550-570)

Stay tuned: Two clinical practice guidelines entitled "A joint ESPGHAN-NASPGHAN Clinical Practice Guideline for the Evaluation of Cholestatic Jaundice in Infants" and "Clinical Practice Guideline for the Diagnosis and Treatment of Nonalcoholic Fatty Liver Disease in Children" are coming out in JPGN in early 2017!





Public Affairs & Advocacy Report

Amethyst Kurbegov, MD and Camille Bonta

Election years rarely give way to productive congressional legislative sessions, still the need for effective advocacy remains. Over the past year, members of the **NASPGHAN** Public Affairs and Advocacy Committee (PAAC) have engaged on a variety of issues, both on and off Capitol Hill, from product safety and medical foods to multi-society collaborations. It is expected there will be no shortage of opportunities in 2017 for **NASPGHAN** members to advocate for their patients and profession.

PRODUCT SAFETY

In the arena of product safety, ingested lithium button batteries continue to cause significant morbidity and mortality among young patients. The American Academy of Pediatrics (AAP) leads a multi-specialty task force on button batteries. **NASPGHAN** members and AAP liaisons David Brumbaugh, MD and Jenifer Lightdale, MD, MPH serve on this task force. **NASPGHAN** members, because of their role in removing foreign bodies from children, can serve as an early warning system of potentially hazardous products, as was the case with small, high-powered magnets. **NASPGHAN** will continue to look for opportunities to work with the U.S. Consumer Product Safety Commission and educate **NASPGHAN** members about the critical importance of reporting foreign body ingestions to the Commission through **saferproducts.gov**.

In a disappointing turn of events, in late November the 10th Circuit Court of Appeals struck down the CPSC's safety standard for high-powered magnet sets. These magnets are back on the market. **NASPGHAN** members should be alert to a possible increase in cases of multiple magnet ingestions in children and should report these instances to the CPSC. At the time of this report, the CPSC was still considering its response to the court ruling, but will continue compliance activities under its authority, including evaluation of the marketing and labeling to children under the age of 13. **NASPGHAN responded** to the ruling and encourages reporting ingestion to www.saferproducts.gov.

MEDICAL FOODS

A top priority of PAAC the last two years has been advocating for federal legislation requiring insurance coverage for medically necessary foods in a variety of diseases of the digestive system. As a starting point, in 2016 **NASPGHAN** led a campaign for coverage of medical foods for beneficiaries of the federal military insurance program (TRICARE). While TRICARE has a nutritional therapy coverage policy, coverage has been inconsistently applied and varies by region.

PAAC members met with congressional representatives in Washington, DC, in June, 2016, to press for coverage language in this year's National Defense Authorization Act (NDAA). Thanks to the advocacy efforts of so many **NASPGHAN** members and other stakeholder organizations, the final NDAA, passed in December, includes legislative language that will make it harder for TRICARE to deny coverage of medical foods for the medical management of diseases of the GI system and inherited metabolic diseases. The NDAA success hopefully paves the way for the introduction of legislation in Congress next year that will ensure access to medically necessary foods for all pediatric GI patients, regardless of their insurance.

PEDIATRIC IBD SAFETY REGISTRY

PAAC and members of the **NASPGHAN** Inflammatory Bowel Disease (IBD) Committee have been engaged in a joint, multi-organizational effort to advocate for formation of a national safety registry for pediatric-diagnosed patients with IBD. Co-led by the Pediatric IBD Foundation and **NASPGHAN**, a movement to organize a national registry to track safety information on children with IBD has garnered interest from several pertinent groups including the Crohn's and Colitis Foundation of American (CCFA), Improve Care Now (ICN), and members of the pharmaceutical industry. A similar registry for pediatric rheumatologic patients began in 2009 and provides a potential model for pediatric IBD patients. Advocacy for a pediatric IBD safety registry in the coming year will focus on funding for registry development.

HEALTH CARE REFORM

The outcome of the presidential election ensures that much of the 115th Congress will be devoted to repeal and replacement of the Affordable Care Act (ACA). More than 20 million Americans now have health care coverage as a result of the ACA, making the politics of repeal complicated, including for Republican state lawmakers who have expanded Medicaid in their states. Despite impressive gains in health care coverage among Americans, health plans are dropping out of the insurance marketplace and, in parts of the country, health care premiums have soared. **NASPGHAN's** advocacy in the next Congress will focus on preserving important health care coverage gains while working to fix what's wrong with the current system.

Keep current on **NASPGHAN's** advocacy activities and learn how you can become involved by visiting the **NASPGHAN Legislative Action**Center.



2016 WORLD CONGRESS SUPPORTERS

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Biocodex

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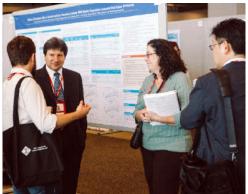


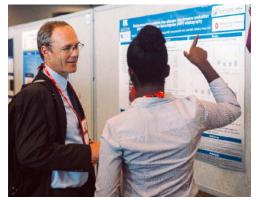






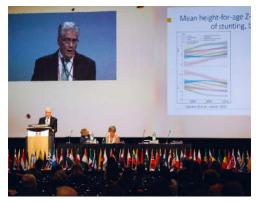
























AWARDS CEREMONY

Thursday, October 6, 2016



Harry Shwachman Award

······ Presented to Wayne Lencer, MD ······

The Shwachman award is given by **NASPGHAN** to a person who has made major, life long 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.



NASPGHAN Distinguished Service Award

·····Presented to David A. Gremse, MD·····

The **NASPGHAN** Distinguished Service Awards 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 Steven M. Schwarz, MD, FAAP······

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

NASPGHAN FOUNDATION AWARDS



NASPGHAN Foundation/George Ferry Young Investigator Development Award

Akihiro Asai, MD, PhD – Cincinnati Children's Hospital Medical Center, Cincinnati, OH
ENGINEERING HUMAN LIVER ORGANOIDS FOR MODELING OF INHERITED
CHOLESTASIS WITH SUPLEMENTATION



NASPGHAN Foundation/Nestlé Nutrition Research Young Investigator Development Award

Samar Ibrahim, MBChB - Mayo Clinic, Rochester, MN
LIPOTOXICITY AND HEPATIC INFLAMMATION



NASPGHAN Foundation Mid-Level Career Development Award Supported by a grant from Takeda Pharmaceuticals Products, Inc.

Edwin de Zoeten, MD, PhD – Children's Hospital Colorado, Aurora, CO
THE IMPACT OF THE UNFOLDED PROTEIN RESPONSE ON REGULATORY T CELLS



NASPGHAN Foundation Fellow to Faculty Transition Award in Inflammatory Bowel Diseases

Supported by a grant from Abbvie and Janssen Biotech

Ross Maltz, MD – Nationwide Children's Hospital, Columbus, OH
THE EFFECT OF SOCIAL STRESSORS ON INFLAMMATION IN A MURINE MODEL



NASPGHAN SPECIAL RECOGNITION AWARDS



William F. Balistreri Prize

Joanne Masterson, PhD – University of Colorado Denver, Aurora, CO
EPITHELIAL BARRIER FUNCTION IN EOSINOPHILIC ESOPHAGITIS IS REGULATED BY A
HIF-1a-CLAUDIN-1 AXIS



Gerard Odell Prize

Sarah Taylor, MD - Ann and Robert H. Lurie Children's Hospital of Chicago, Chicago, IL
GESTATIONAL ALLOIMMUNE LIVER DISEASE: FATE OF UNTREATED PREGNANCY IN
152 WOMEN AND OUTCOME OF AFFECTED INFANTS



Richard J. Grand and John B. Watkins Prize

Ivan Fuss, MD – National Institutes of Health, Washington, DC

THE ROLE OF A NOVEL IL-10 PRODUCING REGULATORY T CELL(TR2) IN IMMUNE
HOMEOSTASIS



Teri Li Award

Bram Raphael, MD - Children's Hospital Boston

Aliza Solomon, DO - New York Presbyterian/Weill Cornell Medicine





Marjorie Merrick, Crohn's and Colitis Foundation of America

For Outstanding Contributions to Pediatric IBD Research





ABSTRACT AWARD WINNERS

APFED Outstanding EGID Abstract Award

EPITHELIAL-FIBROBLAST INTERACTION DRIVES PRO-FIBROTIC MILIEU IN EOSINOPHILIC ESOPHAGITIS

Presented to Amanda Muir, Fiona Gambanga, Jonathan Kluger, Koji Tanaka, Alain Benitez, Prasanna Modayu, Kelly Whelan, Hiro Nakagawa. The Children's Hospital of Philadelphia, Philadelphia, PA, Perlman School of Medicine at the University of Pennsylvania, Philadelphia, PA.

APFED Outstanding EGID Abstract Award

EPITHELIAL BARRIER DYSFUNCTION IN A MOUSE MODEL OF EOSINOPHILIC ESOPHAGITIS

Presented to Nathalie Nguyen, Joanne C. Masterson, Juliet A. Hammer, Kathryn A. Biette, James J. Lee, Glenn T. Furuta. University of Colorado School of Medicine, Digestive Health Institute, Children's Hospital Colorado, Aurora, CO, Mayo Clinic, Scottsdale, AZ.

Endoscopy Prize

A SIMULATION-BASED TRAINING CURRICULUM OF PROGRESSIVE FIDELITY AND COMPLEXITY IMPROVES CLINICAL COLONOSCOPY PERFORMANCE: A BLINDED, RANDOMIZED TRIAL

Presented to Catharine M. Walsh, Michael A. Scaffidi, Ankit Garg, Ian S. Plener, Tareq Alomani, Jeffrey J. Yu, Samir C. Grover. Hospital for Sick Children and the Wilson Centre, Toronto, ON, Canada; St. Michael's Hospital, Toronto, ON, Canada, University of Toronto, Toronto, ON, Canada.

Motility Prize-Basic Science (Supported by a grant from MMS/Laborie)

NEUROSTIMULATION WITH IBSTIM ATTENUATES AMYGDALA NEURONS AND PREVENTS POST-INFLAMMATORY VISCERAL AND SOMATIC HYPERALGESIA IN RATS

Presented to Adrian Miranda, Reji Babygirija. Medical College of Wisconsin, Milwaukee, WI.

Motility Prize-Clinical Science (Supported by a grant from MMS/Laborie)

SACRAL NERVE STIMULATION FOR TREATMENT OF CONSTIPATION IN CHILDREN: LONG-TERM OUTCOMES, PATIENT BENEFIT, AND PARENT SATISFACTION

Presented to Peter L. Lu, Ilan J. Koppen, Danielle K. Orsagh-Yentis, Karen Leonhart, Erica J. Ambeba, Katherine J. Deans, Peter C. Minneci, Karen A. Diefenbach, Seth A. Alpert, Marc A. Benninga, Desale Yacob, Carlo Di Lorenzo. Nationwide Children's Hospital, Columbus, OH, Emma Children's Hospital/Academic Medical Centre, Amsterdam, Netherlands.

Nutrition Prize

EARLY FECAL MICROBIOMES ARE DIFFERENT IN PREMATURE NEONATES WHO DEVELOP PARENTERAL NUTRITION ASSOCIATED CHOLESTASIS

Presented to Jasmeet S. Mokha1, Adam Matson, Zev H. Davidovics, Melissa Caimano, Justin Radolf. Connecticut Children's Medical Center, Hartford, CT, University of Connecticut Health Center, Farmington, CT.

Pancreas Prize

IMPACT OF OBESITY ON PEDIATRIC ACUTE RECURRENT AND CHRONIC PANCREATITIS

Presented to Aliye Uc, Bridget Zimmerman, Mark E. Lowe. University of Iowa, Iowa City, IA, Children's Hospital of Pittsburgh of UPMC, Pittsburgh, PA, On behalf of INSPPIRE Consortium





9TH ANNUAL AND 1ST EVER WORLD CONGRESS "HANDS ON ENDOSCOPY SESSION" LARGER AND MORE POPULAR THAN EVER

- Marsha Kay, MD -



The place to be on Thursday and Friday afternoons at the World Congress was room 519 in the Montreal Convention Center. There, more than 450 attendees and 22 international faculty participated in the 9th NASPGHAN and 1st ever World Congress Hands on Endoscopy Session. The sessions, which were free for attendees, were supported by a grant from Olympus America Inc. Using the latest in Olympus endoscopes and endotherapy devices, some of which were just commercially released, faculty members instructed participants on the techniques of basic endoscopy, hemostatic clipping, polypectomy, electrocoagulation and single balloon enteroscopy at 8 stations, and deployed literally "hundreds of clips".



Fellow participants had special reserved blocks of time to learn these important techniques. This year's faculty were from the United States, Canada, England, Australia and Italy. As always, the sessions were extremely popular and we hope to repeat this event in 2017 at the NASPGHAN Annual Meeting. If you missed the session this year, remember to sign up early next year to ensure your space. In addition to the pictures in this newsletter be sure to check out Dr. Carlo Di Lorenzo's tweets about this session below.







HANDS-ON MOTILITY SESSION

The Neurogastroenterology and Motility Committee organized two hands-on workshops at the World Congress this year. One day focused on Esophageal pH/Impedance with Dr. Marina Orsi providing a basic lecture and workshop and Drs. Rachel Rosen and Ajay Kaul conducting an advanced workshop. On the second day, Drs. Neelesh Tipnis and Leonel

Rodriguez gave Esophageal and Anorectal Manometry foundation lectures. Drs. Anil Darbari and Jose Garza then provided their expertise, reviewed interesting cases and conducted the hand-on workshops. Many Neurogastroenterology Committee members were on hand to provide their expertise.

The workshops have been supported by MMS/Laborie, Medtronic/Sierra and Sandhill/Medovations.













THE 2016 NUTRITION SYMPOSIUM AT THE WORLD CONGRESS

Jenny Crouse, MS, RD, CD, CDE -Past-chair, CPNP



This year marked the first Nutrition Symposium at a World Congress, and what a year it was! More than 120 dietitians and dozens of our physician partners attended the symposium this year. It was the first time we had to stop one of our speakers mid-session to expand the room due to fire code concerns. What a great problem to have!

We heard from world-renowned speakers on the nutrition management of motility disorders, parenteral nutrition, functional abdominal disorders, and food allergies. In a new format this year, we paired physicians and dietitian speakers on shared

topics within a single session, allowing us to learn from each other's expertise. Also new this year was our first Clinical Research session, including 6 oral abstract presentations of cutting-edge international nutrition research, and a Stump the Expert session, featuring tenured dietitians and our Nutrition Committee colleagues answering tough questions from the crowd. Several of our members participated in nutrition-focused Meet the Professor breakfasts this year as well.

This year was also the first time that we've participated in a joint program with the Association of Pediatric Gastroenterology and Nutrition Nurses (APGNN) and the new Psychology Collaborative Group (PCG). This program featured nurses, physicians, dietitians and psychologists speaking on a variety of relevant topics: liver transplant, cystic fibrosis, functional GI disorders and intestinal failure. We hope to build upon the success of the nutrition symposium and the joint program with further collaboration between our groups.

CPNP continues to grow going into its third year with close to 180 members from throughout North America. We have expanded our executive council this year with a new media chair, who will work on enhancing our website and social media presence. We worked on a number of projects with the NASPGHAN Foundation in 2016, including webinars, podcasts and educational materials. For the first time, our members were invited to attend the NASPGHAN Nutrition University sponsored by Nutricia. We are excited to see what a new year will bring for our growing council!

As always, we welcome your feedback and ideas for collaboration. Thank you for your support and the referral of your dietitian colleagues to our council!











STRONG SHOWING AT NASPGHAN 5K-

NASPGHAN had its third 5K race during the 2016 World Congress of Pediatric Gastroenterology, Hepatology and Nutrition on Saturday, October 8 in the downtown streets of Montréal. More than 200 people registered for the race that started in the dark and ended up just before the beginning of a day-long steady rainfall. Christian R. Kahrs, of Norway, was the first male to finish with a time of 15.55. Vicki Gainsberg, a NASPGHAN CPNP member from Chicago, was the first female to finish with a time of 21.99. Congratulations to all!















IT WAS A STARRY, STARRY NIGHT -

The final gala of the 2016 World Congress – Starry, Starry Nights – was held Saturday October 8 at the Windsor Station, which was once a busy passenger railway station in Montreal. Buffet stations featuring foods from Italy, Greece, the United States, Asia and Montréal were located throughout the spacious setting. And, as always, the dance floor was packed and no one wanted the music to end.



























A BIG NASPGHAN THANK YOU TO DR. ERNEST SEIDMAN



NASPGHAN thanks Dr. Ernest Seidman, of Montreal Children's Hospital, and the planning group for the World Congress of Pediatric Gastroenterology, Hepatology and Nutrition, including Montréal-based Conference Groups & Incentives (CG&I), which handled registration and many of the logistics at the October meeting in Montreal, Canada.

Holding the 2016 World Congress in Montreal was originally the idea of Canadian pediatric gastroenterologist and NASPGHAN member Claude C. Roy, who passed away in July 2015, before he could see his idea come to fruition. Dr. Seidman, a good friend and colleague of Dr. Roy, however, took over and led the World Congress to its successful conclusion in early October. The 2016 World Congress was dedicated to Dr. Roy.

Dr. Seidman was president of the local organizing committee that included Drs. Najma Ahmed, Fernando Alvarez, Colette Deslandres, Martha Dirks, Eric Drouin, Christophe Faure, Sylviane Forget, Veronique Groleau, Kelly Gryzwacz, Ugur Halac, Prevost Jantchou, Dominque Lévesque, Emile Levy, Valerie Marchand, Véronique Morinville, Massimiliano Paganelli, Terry Sigman and Ana Sant'Anna.

THE NEXT WORLD CONGRESS WILL BE JUNE 3-6, 2020 IN COPENHAGEN AND WILL BE LED BY ESPGHAN.

Complete Evaluation by December 31 to Receive 2016 Continuing Medical Education Credit

If you attended the Postgraduate Course and World Congress in October, go here to complete your evaluation for the meetings you attended and you will be able to print your certificate. Evaluations must be complete to receive CME/ CPEU Credit.

IMPORTANT! The online certificate site will be available through December 31, 2016. After that date, the site will be removed and certificates will no longer be available. If you need a CME certificate, you must complete the evaluation and certificate process prior to that date; otherwise you will forfeit your credit for the course.

To get your certificate, go here and choose the event for which you need a certificate. If you need a certificate for multiple events, repeat the process. On the site you will be asked to evaluate various aspects of the program and enter the number of hours you attended. You may then print your certificate anywhere you have Internet access. A copy of the certificate will also be emailed to you in case you need to print additional copies.

Please address any questions about the process to (Certificate@AmedcoEmail.com).

Nursing credits for the APGNN meeting and the joint meeting on Friday, October 7 are also available.