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## Message from the President

Despite our economic downturn, the SDBP Annual Meeting this September in Boston was the largest and most successful yet. Pre-meeting workshops, research platforms and posters, concurrent sessions and SIGs on Autism, ADHD and DBPNPs drew record attendance and were positively reviewed. This year's education workshop was sponsored by the CDC and featured an introduction to the web-based Autism curriculum for resident education that will soon be available at [www.cdc.gov](http://www.cdc.gov).

Our committees have been extremely active this year. I invite you to read about their projects and progress in this newsletter. I also want to remind you that almost all of our committees (Research, Education, Practice, Advocacy, Communication, Fellowship/GME, Membership, Trainee/Recent Graduate and our new Coding Committee) as well as our special interest groups (SIGs) in Autism, ADHD & PNP/Practice Nurses are open to our membership and meet yearly at our Annual Meeting. As a SDBP member you may join any of these groups and sign up for their listserves when you renew your membership or by sending an email to [info@sdbp.org](mailto:info@sdbp.org). In particular we are recruiting for members for our newly formed Coding Committee, Co-Chaired by Lynn Wegner and Michelle Macias, and developed in conjunction with the AAP's Section on DBP.

I have just returned from DB:PREP 2010 in Chicago, the board review update course co-sponsored by the SDBP and the AAP's section on DBP. More than 350 clinicians from as far away as Qatar & Korea attended this five day intensive review, despite the chilly winter weather. The presentations were masterful, the nearby shopping on Michigan Avenue was timely (just before the holidays), but a snow storm prolonged the visit to the windy city for many. Currently the next DB:PREP is scheduled for late 2012, however, we may plan a face to face update for late 2011 or very early 2012

for those of you recertifying in 2012. Stay tuned to hear more about this.

I am pleased to announce that MCHB/HRSA has recently funded the formation of a DBP research network (DBPNet). Our own Nate Blum from the Children's Hospital of Philadelphia will lead the network and there will be 11 additional sites piloting this project — the other 9 DBP/MCHB fellowship training sites, the MIND at UC Davis and Cincinnati Children's programs. The SDBP strongly supported this idea and our liaison to their steering committee is Terri Stancin, PhD. The long term goal will be to widen this network, however, the infrastructure must be designed and built and some early pilot research projects conducted before expansion can be considered.

Another piece of news that I have for you is that DBP Fellowships had their first match this year

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*Pamela C. High, MD, President*

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# Committee Updates

## Advocacy Committee

Adiaha Spinks-Franklin, MD, Co-Chair  
Lynne Sturm, PhD, Co-Chair

The Advocacy Committee has had a productive season. During the Annual Meeting in Boston, we led a workshop entitled, "Advocating for Children with Special Needs". Presenters described three projects at the local to national level. Jean Smith organized the event; Adiaha Spinks Franklin was the moderator. Marilyn Augustyn and Pamela Tames described The Medical-Legal Partnership, in which physicians and attorneys work together to advocate for patients; such as the example of a child who had been denied necessary educational services. Begun at Boston Medical Center, the Medical-Legal Partnership now has programs across the country. Melissa Johnson reported on The Wake County Young Child Mental Health Collaborative, a state-wide project to develop legislation at the state level to improve mental health services for young children ages 0 to 3 years. Finally, Jean Smith explained her role in Healthy Development: A Summit on Young Children's Mental Health, a national conference on the mental health of young children. Jean described her advocacy at the national level through presenting the policy implications of the findings of the Summit at a briefing before the United States Senate. Feedback from workshop participants was overwhelmingly positive. The Advocacy Committee has plans to develop other workshops for future Annual Meetings.

The Advocacy and Communications Committees have teamed up to make the website more useful to parents and SDBP members who are interested in advocacy activities. We plan to provide resources on the parent link to enhance parent advocacy resources, and to provide links to

advocacy news, advocacy websites and other resources on the members only page. In addition, a new section of future newsletters will highlight advocacy efforts of individual members at the local, state and national level, in addition to advocacy initiatives of the Society.

The Advocacy Committee meets at the Annual Meeting and by periodic conference calls. Please email Adiaha Spinks Franklin at [spinks@bcm.edu](mailto:spinks@bcm.edu) or Lynne Sturm at [lsturm@iupui.edu](mailto:lsturm@iupui.edu) for more information. Members interested in joining the Listserv, please email [info@sdbp.org](mailto:info@sdbp.org) and have your email address added.

## SDBP and AAP Collaborative Coding Committee

Lynn M. Wegner, MD, Co-Chair  
Michelle M. Macias, MD, Co-Chair

In the fall of 2010, the Executive Committees of SDBP and AAP SDBP agreed to form a committee focused on issues related to medical diagnostic (ICD-9-CM) and procedural (CPT) codes. Michelle Macias, current chairperson of the SDBP EC, and I are the inaugural co-chairpersons and we have developed a preliminary statement of purpose for the Committee:

This Committee is being formed as an organized effort to support the practice of child and adolescent developmental and behavioral care. Health services must have adequately valued Current Procedural Terminology (CPT) codes. Moreover, there must be codes accurately describing services particularly used in specialty DB care as well as DB care provided by general pediatric medical providers. Diagnostic codes (International Classification of

Diseases-9th Edition, ICD-9-CM) also must be developed to enable, when possible, specific description of conditions encountered in rendering developmental and behavioral care.

Preliminary Goals:

1. To provide accurate information to membership of SDBP and SDBP on the existence of relevant CPT and ICD-9 codes through written articles in newsletters, lectures and workshops at meetings.
2. To actively solicit information about payer refusals of certain ICD-9 codes, application of edits, bundling and refusal of modifier use.
3. To advocate for all institutions to use DB-specific work relative value unit benchmarks for productivity.
4. To help membership understand ICD-10 and DSM-V when they are published.
5. To develop a comprehensive list of relevant ICD-9 codes and to crosswalk as many of the 290-319 (ie DSM series) codes with Chapter 8 (neurology) or other CPT codes for those payers who 'carve out' 290-319.
6. To train members of the Committee to present educational sessions on coding topics.
7. To work collaboratively with the SDBP Practice Management Committee to advise DB providers of the impact of code descriptors and requirements on practice habits.

The purpose of this article is to ask any interested members of the SDBP to contact me and consider joining this Committee. You do NOT have to have any coding expertise – just an interest in learning more about these issues and participat-

ing in these endeavors. What would this entail? Probably one conference call every 4 months, reviewing code proposals, occasionally working on Powerpoint slides for presentations and a face-to-face meeting if you are in the city where the annual SDBP meeting is held (likely informal breakfast or lunch).

An annual report will be submitted by the co-chairs to the EC's of the SDBP and SDBP and each group will have an official EC liaison to the Committee. Des Kelly, MD, is the current SDBP liaison.

So, please send me your name and e-mail address and let's get started!

### Communications Committee

Robert Needlman, MD, Co-Chair  
Susan Rosenthal, PhD, Co-Chair

As of the last National Meeting, the Communications Committee is flush with energetic new members, and seeking more. In particular, we are seeking a PhD co-chair and newsletter co-editor. Projects underway include an edited listing of helpful websites for parents, and (for us) a list-serve. For the latter, Damon Korb has taken great initiative in working with the AAP Section to craft the vision and work out the details. Communications is busy collaborating with several committees to get the word out about all of our Society's great work. Join us!



### Education Committee

Carolyn Bridgemohan, MD, Co-Chair  
Franklin Trimm, MD, Co-Chair

Greetings from the Education Committee! Our Committee has several workgroups:

**Teaching DBPeds Post-Meeting Workshop**  
Workgroup leader: Viren D'Sa  
Our 2010 Education Workshop featured excellent attendance and high-energy collaborative learning. The post-meeting time slot was very successful, with 118 attendees including 40 trainees who participated for free, thanks to funding from the CDC Learn the Signs Act Early Campaign. The Workshop included an Educational Scholarship poster symposium where members presented their educational research. Franklin served as moderator and outlined the increasing levels of evaluation in educational research. We hope to continue this format in future Workshops to promote scholarship in DBP education and provide peer mentoring. Following the poster symposium, participants attended a series of workshops on fellow, resident, medical student and interdisciplinary DBP education. This year we offered 8 different topics during 3 sessions. Franklin closed the workshop with an update on "Hot Topics" including ACGME competencies and resident work hour limitations. Please plan to attend our 2011 Educational Workshop and consider submitting work for the poster symposium and/or a workshop session.

**PAS Invited Science Program Planning**  
Workgroup leader: Bob Voigt  
SDBP members were well represented at the 2010 Pediatric Academic Societies meeting in Vancouver, as abstract reviewers, session chairs and moderators. The meeting included invited science presentations on autism and hearing loss. Plans are underway for PAS 2011. Abstracts have been submitted and SDBP members are the primary reviewers for DBP, autism and NDD.

**Web-Based Learning Resources**  
Workgroup leader: Erik Flake  
We hope to begin posting educational resources on our members-only section of the SDBP website. Please consider joining this workgroup if you are interested!

**Medical Student Education**  
Workgroup leader: Neel Soares  
The Medical Student Education

Workgroup is completing a survey of DBP faculty involved with medical student teaching. The Workgroup plans to develop a brief curriculum for a DBP elective or shadowing experience. Members will also be working on compiling materials that describe the field of DBP to help with recruitment of young trainees.

**Consultation Services for Residency Rotation Directors**  
Workgroup leader: Nancy Powers  
This new workgroup will collaborate with the Fellowship Training Committee to provide technical support to DBP Rotation Directors and potentially to Fellowship Directors. The first goal will be to develop a consultation request form.

**Maintenance of Certification**  
The Society continues to collaborate with the American Academy of Pediatrics (AAP) in DBP education. DBPrep, jointly sponsored by SDBP and the AAP, was held in Chicago last December. PrepDBPeds provides subscribers with 8 questions per month and helps satisfy requirements for Maintenance of Certification through the American Board of Pediatrics (ABP).

The Education Committee is an open committee – please consider joining and sign up for one of our workgroups by going to <http://www.surveymonkey.com/s/YLRWW25>. You can review the activities of the workgroups and then make your selections.

### Fellowship Training Committee

Carol Weitzman, MD, Co-Chair  
Maris Rosenberg, MD, Co-Chair

The Fellowship Training Committee is pleased to report on the first round of participation in the NRMP subspecialty fall match. Results were posted on December 1, 2010. Of 35 accredited DBP fellowship programs, 27 enrolled in the match; one program withdrew. Of the 8 programs that did not enroll, most of these were because they were not offering a position in the coming year. Of the

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# Committee Updates

Continued from page 3

26 participating programs, 20 (77%) filled their available fellowship positions. In total, 25 fellowship positions (78%) were filled, and 7 unfilled; 10 applicants (29%) were unmatched. We are planning an on-line survey of program directors to assess satisfaction with the process, as well as to ascertain whether the majority favor implementing use of the ERAS common application form. This should be coming to program directors in the next few weeks. Further information on the match is available at [www.nrmp.org](http://www.nrmp.org). Overall, DBP seemed to have a positive experience in our first ever match.

We are continuing to update our mentor match, and request that any faculty or fellow interested in participating register through the SDBP website. Make sure to fill out the forms included so we can find the most appropriate mentor or mentee for you. Our committee is also actively exploring topic ideas for the upcoming Education Workshops in San Antonio. If any members have ideas or wish to present on topics that are relevant to fellowship training, please be in touch with us. Finally, a subcommittee of the Fellowship Training Committee is developing a work-force survey that will query programs on issues such as funding sources for fellowships and program directors. We welcome any ideas or suggestions; please feel free to contact us!

## Past Presidents Committee

Ellen C. Perrin, MD, Chair

The Past Presidents' committee was well represented at the 2010 Annual Meeting. Participants included (in no particular order) Dan Coury, Esther Wender, Robin Hansen, David Schonfeld, Barbara Howard, Glen Aylward, Paul Dworkin, John Duby, Marty Stein, Mark Wolraich, Lenny Rappaport, and Ellen Perrin, as well as secretary-treasurer Marilyn Augustyn. Among the topics of discussion:

- Oral history project: a few more interviews will be conducted this year, and next year we will work on plans for editing and distribution. Robin Hansen is leading this project.
- Presidents appreciate being chosen to be moderators and monitors at the Annual Meeting, but we don't want to deprive others of the opportunity. David Schonfeld will serve as the first Past President representative to the Program Committee.
- Presidents are happy to participate in mentoring younger members to help with career decisions, moves to administrative positions, etc.
- Workforce recruitment: Marty Stein and Neal Soares have each been involved in working with medical students. Presidents embrace various new modes of technology to improve medical and psychology students' information and interest in DBP (e.g. facebook).
- Fundraising efforts: Past presidents are redoubling efforts to raise money for the Research Award.
- Three past presidents were elected to the Nominations Committee this year. Presidents agreed to hold the number down to one per year, to let younger people participate as well.

The Committee will meet next during the Annual Meeting in September 2011.

## Practice Issues Committee

Rebecca Baum, MD, Co-Chair  
Neel Soares, MD, Co-Chair

The Practice Issues (PI) Committee had a terrific discussion at the 2010 Annual Meeting. We talked about quality improvement and benchmarks, maintenance of certification, and the use of electronic medical records in DBPeds practice. It was exciting to see a second workshop in quality improvement presented at the Annual Meeting by Bob Belknap and Eugenia Chan. Please make sure to check out the Quality Improvement Toolkit, an electronic resource developed by the PI committee that is housed on the SDBP website in the members-only section.

We are excited to begin our EMR project in the next few months. The goal of the project is to inform DBPeds practitioners about the successful use of EMRs in the areas of clinical practice, research and quality improvement. We will be developing a workshop for the 2011 Annual Meeting; we'll also work with SDBP members interested in technology and communication to make information about EMRs available electronically through the SDBP website. If you are interested in participating in the project at any level, please contact the PI committee co-chairs. Please also look for a quick survey from SDBP that briefly informs us about the degree of EMR usage in your practice.

The Committee would like to thank outgoing co-chair Chuck Morton for his leadership, and we are excited to announce that Neel Soares has agreed take on the role of co-chair. The PI committee is always looking for new members, so feel free to join us at the next Annual Meeting or to get involved along the way!

## Trainee/Recent Graduate Committee

Lauren Boyd, MD, Co-Chair  
Malia May, MD, Co-Chair  
Rob Dempster, MA, MS, Co-Chair

The Trainee and Recent Graduate Committee (TRGC) experienced an impressive turn-out at all TRGC events during the 2010 SDBP Annual Meeting. It was exciting to see TRGC event attendees from a variety of disciplines, including psychology, pediatrics, nursing, and research. During the Career Workshop, trainees and recent graduates were introduced to a variety of career opportunities in the field, including private practice, academics, public health, and research. At the TRGC luncheon, designated trainees and recent graduates acting as liaisons to the other committees of SDBP provided updates regarding individual committee meetings. TRGC liaisons were then appointed for the next year.

Lisa Ramirez finished her term as co-chair, and passed the baton to Rob Dempster (rdempster@cmh.edu), psychology trainee. Rob joins existing co-chairs Lauren Boyd (lacayton@aol.com) and Malia May (ammay@cmh.edu).

The TRGC co-chairs welcome emails with ideas regarding how the Committee may better help the needs of trainees and recent graduates of developmental and behavioral health fields. In order to make the 2011 SDBP meeting experience even better, we've developed a survey; please find it at <http://www.surveymonkey.com/s/HJMFR5N>. We welcome all your ideas, and hope to see all of you TRGs at the next SDBP Annual Meeting.



# SIG Updates

## Nurse Practitioner SIG

Anne DeBattista, CPNP, Co-Chair  
Susan Meyer, MSN, Co-Chair

As a special interest group in SDBP the Nurse Practitioners are focusing efforts to expand their core working group to continue to work on orientation and competencies of new nurse practitioners to Developmental and Behavioral Pediatric practices, best practice models for nurse practitioners in DBP, and helpful tools for successful NP practice in DBP. Efforts are being made to expand membership by soliciting involvement from past meeting attendees, and inviting nurse practitioners from DBP practices. A conference call is planned for early March. Anne DeBattista will be attending the National Association of Pediatric Nurse Practitioner conference in Baltimore Maryland in March and is hoping to recruit NPs to the SIG.



| Committee                         | Co-Chairs   | Email  |
|-----------------------------------|---|--|
| Advocacy Committee                | Adiaha Franklin, MD, MPH<br>Lynne Sturm, PhD                  | spinks@bcm.tmc.edu<br>lsturm@iupui.edu                           |
| Coding Committee                  | Lynn Wegner, MD<br>Michelle Macias, MD                        | lwegner@med.unc.edu<br>maciasm@musc.edu                          |
| Communications Committee          | Robert Needlman, MD<br>Susan Rosenthal, PhD                   | Rdn2@po.cwru.edu<br>slr2154@columbia.edu                         |
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| Education Committee               | Franklin Trimm, MD<br>Carolyn Bridgemohan, MD                 | rfrimm@usouthal.edu<br>Carolyn.bridgemohan@childrens.harvard.edu |
| Fellowship Training Committee     | Carol Weitzman, MD<br>Maris Rosenberg, MD                     | carol.weitzman@yale.edu<br>maris.rosenberg@einstein.yu.edu       |
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| Past Presidents Committee         | Ellen Perrin, MD  | eperrin@tufts-nemc.org   |
| Practice Issues Committee         | Neel Soares, MD<br>Rebecca Baum, MD                           | nsoar2@uky.edu<br>rebecca.baum@nationwidechildrens.org           |
| Program Committee                 | Nancy E Lanphear, MD<br>Robin Mehlenbeck, PhD                 | nlanphear@cw.bc.ca<br>rmehlenb@gmu.edu                           |
| Research Committee                | Paul Wang, MD<br>Susan Berger, PhD                            | Wangpaulp@yahoo.com<br>sberger@northwestern.edu                  |
| Trainee/Recent Graduate Committee | Lauren Boyd, MD<br>Anna Malia May, MD<br>Rob Dempster, MA, MS | lacayton@aol.com<br>ammay@cmh.edu<br>rdempste@kent.edu           |

# Journal News

Suzanne D. Dixon, MD, MPH, Editor  
Mary F. Sharkey, BA, Managing Editor

The *Journal of Developmental and Behavioral Pediatrics* welcomes Laura Sices, MD, MS as an Associate Editor. The Editors thank Robin Hansen, MD for her service to the Journal as an Associate Editor for the past 8 years.

Many exciting developments are happening on the JDBP web site, [www.jdbp.org](http://www.jdbp.org)

- Visitors to the site will find enhanced ISI citation features such as:
  - # Times Cited: Each article will display the total number of times it was cited.
  - Citing Articles: Each article will display a list of the articles that cited it with links where available. Every month new citing article data will be retrieved and displayed on the source articles. Citing article data will appear on LWW journals going back to 1995.
  - High Impact Articles: In the Most Popular Web Part, a new tab displaying a list of the journal's highest impact articles according to the ISI Hot Papers service. New high impact articles will appear every 2 months (according to the frequency that ISI calculates Hot Papers.)
- The Challenging Case blog encourages participation from Society members who can comment on a posted case.
- Quick Polls pose questions relevant to clinical practice. Members can get a snapshot of their colleagues' responses to topics such as diets and autism, medication for preschool ADHD, and corporal punishment in schools.
- Stay up-to-date! Be notified every time a new item is Published Ahead-of-Print. Receive an Email or subscribe to an RSS feed.

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The web site is only interactive with your participation. We'll see you there soon.



# Positive Developments

## New Leadership

Dr. Robert Voigt has been named the new leader of Baylor College of Medicine's section of Developmental and Behavioral Pediatrics in the Department of Pediatrics. Dr. Voigt has also been named chief of service for the Meyer Center for Developmental Pediatrics at Texas Children's Hospital. He most recently has been professor of pediatrics and adolescent medicine at the Mayo Clinic and Mayo Medical School.

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## Congratulations, Cheryl

Cheryl Tierney just took a faculty position at Hershey Penn State. September 15, 2010 she started in the department of Human Genetics, Growth and Development at Penn State Hershey Children's Hospital. Says Cheryl, "I will be responsible for resident teaching in developmental pediatrics and my clinical focus is speech and language disorders and autism. I will also be involved with the Pediatric Sleep Disorders Center seeing children with behavioral sleep problems (insomnia, parasomnias, sleep associations, etc)."



You can find Cheryl's contact information in the searchable member directory in the members only section of [SDBP.org](http://SDBP.org).

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*Please let us know when you or your colleagues are in the news, we welcome the opportunity to celebrate all accomplishments!*

-- the editors



Promotion? ROI? Nobel Prize? Let your colleagues know! Drop us an email and we'll publish your good news in our Positive Developments section.

Robert Needlman, MD  
Susan Rosenthal, PhD  
[info@sdbp.org](mailto:info@sdbp.org)



# Welcome New Members!

Debbi Andrews, MD  
Krishna Banerjee, MD  
Ami Bax, MD  
Betsy Berkovich, DO, MPH  
Julie Bickel, MD  
Deborah Boyd, MD  
Adam Braddock, MD  
Emily A. Brandt, MD  
Gray Buchanan, PhD  
Vilawan Chirdkiatgumchai, MD  
Meghan Davignon, MD  
Oana de Vinck-Baroody, DO  
Irene Cihon Dietz, MD  
Robert Dube, MD  
Beth B. Emrick, MD  
Johannes Fellingner, MD  
Teasha-Lee A. Frattarelli, DO  
Lois Freisleben-Cook, MD  
Anne-Marie E. Goyette, MD  
Jody Gurtler, MA/MS  
Elizabeth Hastings, MD  
Karen K. Imagawa, MD  
Manuel Jimenez, MD  
Melissa R. Johnson, PhD  
Persephone Jones, MD  
Elizabeth Kelley, MD  
Irene Koolwijk, MD  
Anson Koshy, MD  
Evelyn Law, MD  
Sheryl Levy, MD  
Amara Mallik, DO  
Suzanna M. Martinez, PhD  
Jan McGonagle, MD  
Margaret McKenna, MD  
Tara Mitchell, PhD  
G. Michael Nidiffer, MD  
Heather Paradis, MD, MPH  
Carolina Pena-Ricardo, MD  
Jodi E. Santosuosso, FNP, MSN  
Rebecca Scharf, MD  
Peter Joseph Smith, MD, MA  
Hemaluck Suwatanapongched, MD  
Mark Swanson, MD  
Jennifer Walton, MD  
Jeffrey H. Yang, MD  
Marshalyn Yeargin-Allsopp, MD  
Julie Youssef, MD

**SDBP** 

## “Save the Dates!”

**2011 Annual Meeting**  
**September 16-19, 2011**  
**Marriott Rivercenter**  
**San Antonio, TX**

**2012 Annual Meeting**  
**September 7-10, 2012**  
**Hyatt Regency**  
**Phoenix, AZ**

**2013 Annual Meeting**  
**September 27-30, 2013**  
**Renaissance Baltimore**  
**Harborplace**  
**Baltimore, MD**

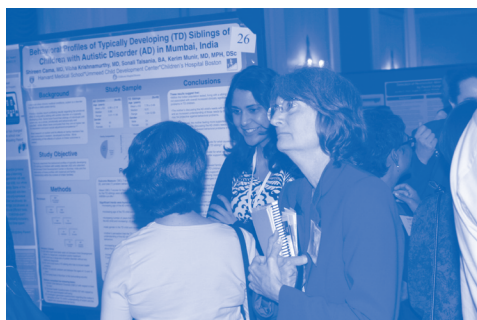
**SDBP**   
Society for Developmental  
& Behavioral Pediatrics

Visit [www.SDBP.org](http://www.SDBP.org)  
for the latest  
details!

# Annual Meeting Highlights

## Looking back at 2010 in Boston, MA

Just a few 2010 Annual Meeting highlights from the Trainee/Recent Graduate Luncheon, Poster Session and Social Dinner. To see more pictures, visit the Annual Meetings page at [www.sdpb.org](http://www.sdpb.org)!



## Looking forward to 2011 in San Antonio, TX

The Call for Workshop Proposals is now open for the **Faculty and Fellow Development in Teaching DBP: An Interactive Workshop** and the **Pre-Meeting Workshops** for the upcoming 2011 Annual Meeting! The **deadline** for proposals is **March 18, 2011**. (A call for Concurrents, Posters and Papers will go out under a separate notice in early March.)

**Congratulations to our 2011 Lectureship Recipient  
Cynthia García Coll, PhD**

Dr. García Coll specializes in socio-cultural influences on the development of immigrant children and adolescents. She uses national data to look at the specific influences of families, schools, neighborhoods and peer groups in the development of educational and behavioral pathways of immigrant youth. In addition, Dr. García Coll looks at the ways in which educational and behavioral outcomes change over time and how these outcomes differ across immigrant generations.

# Autism Treatment Network

Submitted by Dan Coury, MD

Led by Jim Perrin (Clinical Coordinating Center Director) and Dan Coury (Medical Director), the Autism Treatment Network (ATN) is the nation's first network of hospitals and physicians dedicated to the comprehensive medical care of children and adolescents with autism. In 2007, Autism Speaks undertook an expansion of the ATN through a competitive grant application process. This expansion resulted in the current ATN, consisting of 14 sites across the United States and Canada. In the spring of 2010 a new competitive grant application process was announced, and a new edition of the ATN was initiated in January 2011.

Patients and families who are seen at ATN sites are invited to enter the ATN Registry, completing a battery of questionnaires assessing possible gastrointestinal, sleep, neurologic and other symptoms. Analysis of Registry findings for the first 18 months has provided descriptive information regarding these problems. For example, a review of over 1200 questionnaires addressing GI symptoms found that 45% of children in the ATN have GI complaints ranging from abdominal pain to GERD. Whether or not this is more frequent than the general population, the important point is that children with ASD merit the same attention to GI symptoms as typically developing children with GI symptoms. The ATN is now evaluating an algorithm for the management of constipation in ASD, and the data obtained from this will lead to evidence-based clinical guidelines in this area.

Support for development of this and other guidelines, as well as for intervention research, is provided through a collaborative agreement with the Maternal and Child Health Bureau of HRSA which utilizes the ATN to serve as the Autism Intervention Research Network for Physical Health (AIR-P).

Difficulty with sleep is another commonly-reported problem in ASD. In the ATN population, the Child Sleep Habits Questionnaire (CSHQ) is used to characterize sleep problems. Analysis of over 1200 completed CSHQs found that 65% of children and adolescents with ASD had problems with sleep, ranging from initial insomnia to night waking to early waking. ATN investigators under the direction of Beth Malow, MD have shown that non-pharmacologic methods can be effective in many children and adolescents with ASD. As with typically developing children, good sleep hygiene is essential. The work of Dr. Malow and others has shown that families of children with ASD require significant support in the establishment and maintenance of bedtime routines to promote better sleep onset. Dr. Malow and colleagues in the ATN are studying methods of providing families with the information and training needed to manage insomnia in children with ASD. As with the guideline development work described earlier, this is supported through AIR-P funding.

The ATN Registry, like the Interactive Autism Network (IAN), provides information regarding children and adolescents with ASD across multiple domains – medical symptoms, cognitive abilities, and treatments reported. The ATN also provides an opportunity to pilot and evaluate new treatments (e.g., non-pharmacologic treatment of insomnia), evaluate management recommendations to acquire evidence for better guidelines for clinical care (current work on constipation and insomnia), and develop better descriptions of health status (nutrition status, health related quality of life). Data from the ATN Registry and associated research conducted under the auspices of the AIR-P are beginning to be disseminated through pediatric research meetings and publications, and there are plans to present workshops on topics such as providing a medical home for these children and their families.

The ATN is working with several organizations, including SDBP, the AAP, and the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN) to cultivate joint activities surrounding guideline development, assembling materials for clinical toolkits, workshops and other opportunities to promote better care for this population. The ATN is also developing collaborative activities with other MCHB funded projects such as the developmental-behavioral pediatric fellowship training programs, and the LEND programs, to promote new training, research and dissemination opportunities.

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SDBP 

## President's Message

Continued from page 1

thanks to the leadership of Carol Weitzman and the Fellowship Education Committee. Twenty five new fellows matched into twenty DBP programs. There were 10 additional pediatricians who did not match initially, who may have filled some of the 7 additional slots in 6 fellowship programs, which were open at the conclusion of the match.

Lastly, I want to open the door for members to contact me directly about ideas that you may have about how to make our Society as meaningful as possible for you. We are an international organization dedicated to improving the health of infants, children, and adolescents by promoting research, teaching and clinical practice in developmental and behavioral pediatrics. I am particularly interested in ideas about how we can promote DBP practices internationally.

Thank you for the opportunity to serve as your president. I wish you all a happy, healthy and productive New Year!

SDBP 

# Book Corner

## ADHD Solutions

Mark Bertin a developmental pediatrician in Pleasantville, NY, and SDBP member, has written *The Family ADHD Solution: A Scientific Guide to Maximizing Your Child's Attention While Minimizing Parenting Stress*, to be published in February by Macmillan Palgrave.

The book emphasizes the needs of parents and families, both by providing understandable, unbiased information about ADHD biology and executive function issues in daily life, and by offering direct tools parents can use to manage their own stress and help with decision making.

## Children and Autism

*Children and Autism: Stories of Triumph and Hope* by Ennio Cipani, PhD, presents seven heartwarming and compelling stories of children who have triumphed over the challenge of autism. These are not stories of easy or simple remedies but in the end in each instance the child is indistinguishable from their same-age peers. Parents can draw hope and inspiration from these stories while also realizing that dedication, hard work, and perseverance are key elements to success.

While these seven stories are the heart and soul of the book, *Children and Autism* is more than that. The book opens with a section on what autism and applied behavior analysis are. It closes with a comprehensive resource section that helps parents locate ABA resources, provides definitions, and offers advice on applying practices in the home.

*Children and Autism* is also a celebration of progress in treating autism using ABA. The book provides parents with a model that they can identify with, cheer on, and draw hope and inspiration from.

## Getting Motivated

Our own Dr. Suarez is proud to announce the publication of her first book, *Motivational Interviewing with Adolescents and Young Adults* by Sylvie Naar-King, PhD and Mariann Suarez, PhD, ABPP, to be published in January, 2011, by Guilford Press. According to the publisher, "This pragmatic guide spells out how to use motivational interviewing (MI) to have productive conversations about behavior change with adolescents and young adults in any clinical context. Filled with vivid examples, sample dialogues, and "dos and don'ts," the book shows how conducting MI from a developmentally informed standpoint can

help practitioners quickly build rapport with young patients, enhance their motivation to make healthy changes, and overcome ambivalence. Experts on specific adolescent problems describe MI applications in such key areas as substance abuse, smoking, sexual risk taking, eating disorders and obesity, chronic illness management, and externalizing and internalizing behavior problems." The title is part of the Applications of Motivational Interviewing Series, edited by Stephen Rollnick and William R. Miller.

## New Spina Bifida Publication and Resource

I am happy to announce the publication of "Spina Bifida: Health and Development Across the Life Course" (Pediatric Clinics of North America [www.pediatric.theclinics.com](http://www.pediatric.theclinics.com), Volume 57, 4, W.B. Saunders, 2010). In this issue, Adrian Sandler, MD, co-edited with Mark Swanson, MD, they discuss the natural history of spina bifida and the challenges and opportunities for improving health and development during childhood. They focus on optimal functional outcomes, independence and community participation for adults with spina bifida, emphasizing the key role played by pediatricians and other health professionals. The issue introduces the Life Course Model for spina bifida, developed by the Spina Bifida Transition Working Group that was established under the direction of CDC in 2006. Most of the authors were part of this group. The Life Course Model is a web-based resource - for families and clinicians - of goals in three domains: health/self management, relationships, and educational/income support. The model provides a framework for clinical service delivery and future research.



## The SDBP Research Grant – Opening Soon!

New process 2-step process this year!

1st phase - applicants will be asked to submit a 2-page summary of their research plan. All applicants will receive feedback on their initial proposal. Anticipated deadline April 15th.

Proposals deemed most worthy will be invited to submit a full proposal approx 6-8 weeks following notification

We're looking forward to your proposals!

# Joseph J. Hallett, Jr., MD Remembrance

Submitted by Viren D'Sa, MD

Joseph Hallett passed away on October 23, 2010. The cause was cancer. He is survived by his wife, Susan, their three children, Lindsay, Kathryn and Joe, and his siblings, Ellen, Irene, Brien and David. He'll be remembered and missed by many friends and colleagues at the Neurodevelopmental Center, Memorial Hospital of Rhode Island and Brown University. Born in Rochester, NY, Joe received his MD from the University of Rochester with distinction in research, completed his pediatric residency at Johns Hopkins, then a research and clinical fellowship at Massachusetts General Hospital. In 1992, he joined the faculty at the Warren Alpert Medical School of Brown University, and later served as Director of the Neurodevelopmental Center and Pediatrician-in-Chief at Memorial Hospital of Rhode Island. Joe served the clinical needs of children with disabilities in Rhode Island with distinction, even while pursuing numerous scientific interests. He co-authored articles on such topics as the impact of immune reactants on involuntary movement disorders, and participated in clinical research in autism, education, developmental screening and pediatric practice.

Joe's professional legacy includes his interest in carrying Developmental Behavioral Pediatrics into the 21st century in the application of principles of neuroscience to its practice and research. He had a unique ability to present such links and correlations, adapting the level of discussion to his audience, which often included parents, medical students, residents, fellows and colleagues. One could sense the strain he would experience when expected to tone down his enthusiasm and passion due to constraints of time. Joe was always available to mentor trainees, regardless of their level of DBP expertise. He would patiently begin discussions about the neurobiological origins of behavior and link them to environmental influences that were unique to the patient, fostering a timely connection between the theoretical and evidence-based approaches to clinical reasoning.

Joe's writing and editing was often amusing, not in its content, which was always exemplary, but in its style. An edited page never looked the same after Joe's edits. 'Track changes' was his favorite tool, with changes that seemed obvious in retrospect. His oft repeated sentence in the context of research and writing, "You know it's a good idea/study when you/someone looks at it and says, 'that's so obvious, why didn't I think of it?'" In that same vein, Joe had a unique sense of humor, which to those who knew him was his hallmark, and to those who didn't, required prefacing. He continues to live in our memory.



# New Director and Direction for the NICHD

Submitted by Lynne Haverkos, MD

As an SDBP member and Director of the Pediatric Behavior and Health Promotion Program at the NICHD, I'm pleased to provide an update on the new NICHD director and his Visioning Plan to identify future research directions. On July 22, 2010, Alan E. Guttmacher, MD, pediatrician, geneticist, and highly regarded leader within NIH during the last decade, was appointed director of the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD). The NICHD focuses on human health and development, from conception through the reproductive years, developmental disabilities, reproduction, and rehabilitation after injury or disease. It is one of the 27 institutes and centers that comprise the National Institutes of Health.

In June of 2010, the National Advisory Child Health and Human Development (NACHHD) Council approved a Vision process comprising nine major themes: development, plasticity, cognition, behavior, reproduction, pregnancy & pregnancy outcomes, developmental origins of health & disease, environment, and diagnostics & therapeutics. A series of cross-cutting issues were also identified: analytical & measurement tools & methods, animals & computational models, bioethics, bioinformatics, biotechnologies/bioengineering (including high throughput, assistive, & other related technologies), developmental trajectory, differences/disparities across populations, epigenetics/meta-genomics, functional status, global health, implementation science (including health economics), nutrition, prevention/personalized medicine, stem cells, systems biology, and training & mentoring. The Vision process can be seen at <http://www.nichd.nih.gov/vision/>.

A series of workshops are being conducted between January and March 2011 to facilitate focused discussions on the scientific opportunities and needs related to each of the Vision themes. White papers resulting from the workshops will form the basis of a draft scientific Vision statement which will be discussed at a large, multidisciplinary conference tentatively scheduled for June 2011. In September 2011, Dr. Guttmacher will seek comments and approval for the Vision statement from the NACHHD and in December the Vision statement should be ready for publication. It is designed to inform NICHD's partners and stakeholders and to stimulate future research activities. Public input and feedback are encouraged throughout the Vision process via [NICHDvision@mail.nih.gov](mailto:NICHDvision@mail.nih.gov).



# Thank you Contributors!

We wish to extend our sincere appreciation and recognition to the following SDBP individual donors. Listed below are the 2010 contributors to SDBP: We encourage all members to make a donation to SDBP.

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## SDBP Development Fund

The Fund provides financial support for SDBP programs such as:

- SDBP Research Grant Award
- International and Underdeveloped Countries Scholarships
- General Fund for new programs to conduct the SDBP mission

### **How You Can Help**

Support of the SDBP Development Fund is an important and vital way of promoting developmental and behavioral pediatrics through the many activities of SDBP. Contributions can be directed to the

General Fund or to programs reflecting your specific interests. Donations can be made at any time and are tax deductible to the fullest extent permitted by law.

### **Suggested Giving**

More than \$1000 Benefactor  
\$251-\$500 Supporter

\$501-\$1000 Patron  
up to \$250 Contributor

For more information or to donate, please visit [www.sdbp.org](http://www.sdbp.org) or call 703-556-9222.



# SDBP Practice Issues Survey: One Piece of the DBP Practice Picture

Submitted by Robin Adair, MD, Ellen Perrin, MD and Carol Hubbard, MD, PhD

The results of the 2006-2007 SDBP survey of practice parameters and financial factors impacting developmental-pediatrics appeared in the July/August 2010 issue of the *Journal of Developmental-Behavioral Pediatrics* (31:477-484). The most telling finding was probably no surprise to DB pediatricians – we spend a lot of time per patient, in visits and on documentation for each patient, either reviewing external documents or generating our own. We spend roughly 50% again as much time non-face-to-face as face-to-face. Illustrating this in hours, the full-time equivalent DB pediatric position averaged 39.5 hours per week in clinically related activities: 25 hours with patients and 14.5 hours on paperwork. Many respondents had academic, research and administrative responsibilities as well.

Forty two percent reported working with multi-disciplinary teams, but not necessarily same-day or including case conferences. Practice settings had nearly one support staff for every full-time equivalent DB pediatrician. Many other descriptors (gender of providers, patient populations, regional salary comparisons, etc) were included as well. The data invite discussion about the roles

of DB pediatricians in pediatric residency training, implementing the “biopsychosocial developmental assessment model,” using innovative technology such as telemedicine, and helping to meet the clinical needs arising from the widening practices of developmental, behavioral health and autism screening in pediatric primary care.

What might be found if the survey were conducted today? For one thing, more DBP providers might know more about coding and productivity (measured in RVUs) as a result of concerted procedural coding trainings. SDBP offered a coding workshop at the September Annual Meeting in Boston. The AAP offered a coding workshop at the December DB:PREP course in Chicago, as well as an on-line CME course, “Developmental and Behavioral Coding Strategies.”

In addition, as was evident at the Practice Issues Committee meeting at the Annual Meeting, many of us have transitioned to electronic medical records (EMRs). Generally, the transition from paper-dominated to electronic records is hard work, but those happiest with EMRs find they are now using templates for both internal documentation and correspondence with primary care physicians, families and schools, reducing non-face-to-face time.

The practice issues survey was a vast undertaking in scope, and opened a window on the business side of DBPeds. Sharing information – whether via future surveys, related workshops or discussion groups – appears to be vital for the financial survival of DBP providers.

SDBP 

## SDBP Web Highlights You May Have Missed!

### Advocacy Listserv Resources

Are you a recent member of the Advocacy Listserv but would like to see what you missed? In the members only section, click on the Advocacy Listserv link to see a list of resources that were sent to the members.

### QI Toolkit

The toolkit is designed to be a useful resource for those interested in Quality Improvement (QI)-to learn more about the topic in general, to learn how to improve processes in clinical practice, or to gather ideas about DBPeds-focused quality improvement projects. The Toolkit is located in the members' only section of the Society for Developmental and Behavioral Pediatrics website. There is also a mechanism to have add your own QI project to share with others. Be sure to check it out!

### Find a Clinician. . .

. . . is a database of member names that are available to members as a searchable directory. If you would like to be included, be sure to log onto the members only section and click on “Find a Clinician”.

# What's Up with Pediatric Hypnosis Training? NPHTI (Nifty)!

Submitted by Pamela Kaiser, PhD, PNP and Daniel Kohen, MD

The evidence is clear: Pediatric clinicians are eager to expand their clinical competence in Integrative Pediatric Medicine. Enrollment was capped when over 100 MDs, PNPs, pediatric psychologists, and other mental health and related pediatric clinicians from 26 states and 4 countries registered for the 3-day hypnosis training skills workshop offered by the National Pediatric Hypnosis Training Institute (NPHTI, nifty!) last October.

The 14-member multi-disciplinary faculty provided a completely revised, cutting-edge curriculum that highlighted experiential learning. Participants enjoyed multiple opportunities to practice and expand skills with the assistance of clinical experts within the camaraderie of a small group.

NPHTI continues the trainings that were offered for 24 years under the sponsorship of SDBP. All former participants from SDBP hypnosis workshops are invited to join NPHTI's listserve. The listserve offers ongoing guidance and support from NPHTI faculty, other clinical experts, and peers, to help clinicians use hypnosis to assist children with various clinical issues. To join, contact Bob Deutsch at drbobdeutsch@gmail.com.

For an intensive, hands-on experience in pediatric hypnotherapy, we suggest NPHTI's 3-day pediatric hypnosis skills training workshop (Introductory, Intermediate, and Advanced levels) on September 15, 16, 17th, 2011. We will be gathering again in a lovely Minneapolis suburb at a hotel with incredible hotel rates (w/ reasonable course registration that includes fabulous meals). Faculty includes Drs. Karen Olness, Dan Kohen, Candace Erickson, Lonnie Zeltzer, Tim Culbert, Jud Reaney, Pamela Kaiser, Laurence Sugarman, Howard Hall, Leora Kuttner, Bob Deutsch, Melanie Gold, and Jim Warnke, LCSW.

So, join us! We welcome all those interested in active learning, revitalizing your clinical work, and providing strategic self-help coping skills for your pediatric patients. Check us out at [www.NPHTI.org](http://www.NPHTI.org), or email Pam at [drpkaiser@earthlink.net](mailto:drpkaiser@earthlink.net) or Dan at [dpkohen@umn.edu](mailto:dpkohen@umn.edu).



## SDBP MentorMatch Just one of many SDBP member benefits!

The Fellowship Training and Research Committees of the SDBP have recently established a program for on-going mentoring of junior faculty and trainees in DBP (including MDs, PhDs, and others). To be included in this great program, visit the members only section of [www.sdbp.org](http://www.sdbp.org).

*"I met with my mentor for the first time during the annual meeting. He's been a wonderful motivator and "cheerleader" so far. As an M.D. fellow looking at different career paths, I've found his experience and wisdom to be invaluable as I figure out "what next." He's been emailing me regularly to check in since SDBP, and he's made himself available by phone as well. In short, THANK YOU to the SDBP for setting this up and making it happen."*

– Andy Barnes, MD, Minneapolis, MN

## SDBP Membership

Do you have a colleague who may be interested in SDBP Membership or attending a future SDBP meeting? Please pass their name and contact information on to the SDBP management team ([info@sdbp.org](mailto:info@sdbp.org) or 703-556-9222) and/or have them visit the SDBP website: [www.sdbp.org](http://www.sdbp.org).

– Membership Committee

## Are You a Good Communicator?

If you are, why not consider signing on as Behavioral Developments co-editor? After several brilliant editions, Susan Rosenthal needs to move on to other challenges. The job is low-profile and thankless but not overly demanding, and it's fun if you like this sort of work. Moreover, you get to contribute to the non-turbulent flow of information through our organization, a worthy goal. The ideal candidate has a PhD – to maintain the disciplinary balance that's such a strong feature of SDBP -- but an earnest MD will do as well. Please let me hear from you.

– Robert Needlman

## PLAY Project Update

Submitted by: Richard Solomon, MD

In August 2007 Behavioral Developments presented an overview of the PLAY Project, an intensive early intervention program for young children with autistic spectrum disorders, based on Greenspan's DIR theoretical framework. This update includes a brief description of the home consultation program, our train-the-trainer model, and our ongoing evaluation study.

The cornerstone of the PLAY Project is a home consultation program which costs between \$3,000-\$4,000 per year. Masters-level child development specialists coach parents to engage their child with autism. A home visit lasts 3 hours with roughly 1/3 modeling, 1/3 coaching and 1/3 feedback. All visits are videotaped and parents receive written recommendations directly related to the video. The aim is to help children gain pragmatic language and social skills by promoting contingent, reciprocal, fun interactions for two hours throughout the day. With licensed projects in 27 states and 4 countries outside of the U.S., thousands of children with autism each year are being served.

Through the PLAY Project's train-the-trainer model, more than 200 masters-level child developmental specialists have been trained as home consultants. Trainees attend a 4-day intensive training followed by 12-18 months of long distance supervision where trainees send videos and reports to experienced supervisors for review. A well developed training manual and fidelity measure provide a consistent, high quality service.

Following publication of our pilot study\*, The PLAY Project was granted an NIH grant to assess the feasibility of a multi-site, RCT study. Our collaborators were Easter Seals National, who provided the sites, and Michigan State University who provided independent evaluation. The trial showed feasibility and subsequently the PLAY Project received a \$1.8 million grant to implement a Phase 2 effectiveness trial.

We are now in the second year of the three-year study. In the first year we successfully recruited sixty, 3-5 year old children, matched by age, gender, and severity, then randomized them into community standard services (special education preschool with school based language and occupational therapy services) or community standard plus PLAY Project Home Consultation. The children are followed for one year. A rigorous, pre/post evaluation design addresses whether a) parents learn and implement the model, b) PLAY children improved their functional, cognitive, and adaptive development when compared to control children and c) whether the home consultants show fidelity to the model. Altogether 120 children will be studied, making this one of the largest trials of its kind.

If The PLAY Project model proves to be effective, it will provide a replicable method of early intensive developmental interven-

tion for young children with ASD by using an efficient, low-cost train-the-trainer model.

\*Solomon, R., J. Necheles, C. Ferch, and D. Bruckman. "Pilot study of a parent training program for young children with autism: The P.L.A.Y. Project Home Consultation program." *Autism* 11, no. 3 (2007) 205-224.

## Yoga to Support Children with Emotional-Behavioral Disorders in Schools

Submitted by: Naomi Steiner, MD

NJ Steiner, PG Pop, TK Sidhu, EC Perrin (Patricia G Pop, Tahnee K Sidhu, Ellen C Perrin)

Yoga is a multimodal form of exercise that calms the body and mind through relaxation techniques such as breathing, stretching, holding postures, meditation, and mental imagery. It is receiving increased attention as a complementary therapy to support well-being and specifically, to teach stress reduction and coping skills to children.

We recently completed a pilot study using yoga to support 4th and 5th graders with emotional and behavioral disorders in an urban public school. The children received two formal yoga sessions a week in groups of 7-10 students over a 3.5 month period. A yoga teacher experienced in working with children directed the sessions. We enrolled 43 children over two school years. Parents, children and teachers completed pre- and post-assessments. Teachers reported significant decreases in problem behaviors and increases in positive social interactions and attention. Students were even spotted doing yoga in the classrooms, hallways or at home.

Convincing a room full of excited, distractible children to focus on their breath and sit still for a few minutes may seem close to impossible. We found that fun twists to traditional yoga, like using a feather to practice breathing technique, animal names for poses, or music can encourage children to practice yoga.

Yoga helps children by training them with skills they might rarely learn elsewhere, especially within disadvantaged communities. For example, children learn to gain control over their mental processes by imagining their mind as a chugging train that they

# Highlights

have the power to slow down. Instead of reprimanding children when their minds wander, we encourage them to recognize when it happens and regain focus. These techniques build self-awareness and allow disruptive children to learn how to better manage their own behavior and weigh the consequences of their behavior.

By jointly fostering self-efficacy with positive social-emotional coping skills, yoga is particularly helpful for students with emotional behavioral difficulties. With an estimated 20 to 25% of school-aged children experiencing mental health disorders, the mental effects of yoga for children have exciting implications.

## The Comfort Zone

**Submitted by: Rachael Coakley, PhD**

The Pain Treatment Service at Children's Hospital Boston is piloting the effectiveness of a one-day retreat to introduce children and their parents to strategies for improved management of chronic or recurrent pain. The Comfort Zone retreat includes simultaneous child and parent groups emphasizing the mind-body connection and offering non-invasive, non-pharmaceutical strategies for improved pain management.

The youth group provides developmentally-targeted education regarding how pain functions in the body, an introduction to biobehavioral pain management strategies (e.g., guided imagery, progressive muscle relaxation and biofeedback), and a forum for discussion of common obstacles. We introduce cognitive behavioral therapy and use motivational interviewing techniques to help each participant develop his or her own coping plan.

The concurrent parent group provides education about biobehavioral coping strategies, pain and somatization within the context of development, parent-child communication skills, and resources for how to support a child with chronic or recurrent pain at home and school. The Comfort Zone retreat is open to youth ages 10-17. Please contact Dr. Rachael Coakley for further information 617-355-7581.

## Airport Access in Autism

**Submitted by: Wendy J. Ross, MD**

SDBP member Wendy J. Ross is excited to announce the launching of a collaborative airport autism accessibility program. Dr. Ross initiated the program after one of her patients was unable to adhere to airline guidelines, had a meltdown, and missed her flight home. The program trains airport and airline employees about autism and prepares families for air travel with Social Stories (TM) contributed by Carol Gray, as well as regularly-scheduled practice sessions at the airport. Piloted at Philadelphia International Airport with collaboration of the TSA and Southwest Airlines, the program was recently recognized by Congress and will soon be a national initiative. Collaborators include Roger Ideishi, an OT, Angela Jones, a psychologist, Rebecca Jackel, a speech and language pathologist, Yahaira Marquez, and nurse practitioner Clara Elizabeth Notredame, who is also an SDBP member. For more information please visit <http://www.einstein.edu/yourhealth/autism>.

## SDBP Email Lists

SDBP has created several new email lists to help members with similar interests more effectively communicate with each other. One has been established for each of the SIGs: ADHD, Autism and Nurse Practitioner's, as well as one for those active in Advocacy work.

The purpose of the ADHD, Autism and Nurse Practitioner's lists is to facilitate group communication on a more frequent basis rather than the once a year gathering at the SDBP Annual Meeting.

The Advocacy list provides interested members with time-sensitive information & resources about national public policy/advocacy issues that affect the developmental and behavioral health of children and families.

Please contact the SDBP National Office at [info@sdbp.org](mailto:info@sdbp.org) if you would like to be included! Be sure to indicate which email list(s) you are interested in joining.

**SDBP** 

# Job Classifieds

**Charlottesville, VA: Assistant Professor, Clinical Faculty Position**

The Department of Pediatrics, Division of Developmental Pediatrics at the University of Virginia seeks applicants for a tenure-ineligible clinical faculty position at the rank of Assistant Professor. The incumbent fulfills clinical, teaching and research duties and responsibilities as well as develops a research program focusing on cognitive development of children in under-developed countries and participates in the clinical inpatient and outpatient evaluations of children with developmental issues. The incumbent also attends the inpatient unit and participates in teaching fellows, residents, medical students and other trainees. This position may be eligible to convert to tenure-track at an appropriate time in the future, consistent with School of Medicine Promotion and Tenure guidelines and candidate qualifications.

An M.D. or D.O. degree is required and must be board-certified in Developmental and Behavioral or Neurodevelopmental Pediatrics. The applicant must have a commitment to clinical excellence and teaching as well as research.

To apply, visit <https://jobs.virginia.edu> and search on Posting Number 0606958, complete a Candidate Profile online, attach a cover letter, curriculum vitae, letter of research interest, and contact information for three references. The position will remain open until filled. For additional information about the position and the application process, please contact James Blackman, M.D., via email, [jab5uvirginia.edu](mailto:jab5uvirginia.edu) or telephone, 434-982-3808.

The University of Virginia is an Equal Opportunity/Affirmative Action Employer strongly committed to achieving excellence through cultural diversity. The University actively encourages applications and nominations from women and members of underrepresented groups.

**Buffalo, NY: Chief of the Division of Developmental Pediatrics**

The State University of New York, Department of Pediatrics, is recruiting for a Chief of the Division of Developmental Pediatrics, Robert Warner Center for Children with Special Needs. The Chief will be responsible for the administration and leadership of the division, discharge of clinical care and enhancing the teaching and research mission of the division. The Chief will assess neurodevelopmental and comprehensive management of children with a wide range of developmental disabilities. Special interest in autism is preferred. Requirements include M.D., board-

certified in pediatrics, board-certified in developmental/behavioral pediatrics or neurodevelopmental pediatrics. Completion of at least a 3-year fellowship in developmental pediatrics and suitable administrative clinical/teaching experience in academic developmental pediatrics. The State University of New York at Buffalo is an equal opportunity affirmative action employer/recruiter. Interested candidates may apply at: [www.ubjobs.buffalo.edu/applicants/Central?quickFind=53949](http://www.ubjobs.buffalo.edu/applicants/Central?quickFind=53949)

**Buffalo, NY: Clinical Assistant Professor**

The State University of New York, Department of Pediatrics, is recruiting for a Clinical Assistant Professor of the Division of Developmental Pediatrics, Robert Warner Center for Children with Special Needs. The candidate will be responsible for neurodevelopmental assessment and comprehensive management of children with a wide range of developmental disabilities as well as teaching of medical students, residents. Requirements include M.D., board-certified in pediatrics, board-certified or eligible in developmental/behavioral pediatrics or neurodevelopmental pediatrics. Completion of at least a 3-year fellowship in Developmental Pediatrics and suitable clinical/teaching experience in academic developmental pediatrics. The State University of New York at Buffalo is an equal opportunity affirmative action employer/recruiter.

Interested candidates may apply at: [www.ubjobs.buffalo.edu/applicants/Central?quickFind=53929](http://www.ubjobs.buffalo.edu/applicants/Central?quickFind=53929)

**Albany NY: Developmental-Behavioral Pediatrician**

Come join CapitalCare Medical Group, a recipient of the Capital Region's Best Places to Work 2010 Award!

We are seeking a full- or part-time developmental-behavioral pediatrician. CapitalCare Developmental-Behavioral Pediatrics is an established diagnostic specialty practice with a large patient base and is part of a large primary care and specialty group. Our philosophy is to provide excellent care in developmental and behavioral medicine in a family-friendly and responsive environment. The practice includes a large NICU followup program and referrals from a 20-county region. We deal with diagnostic questions in developmental disabilities such as autism, motor control, language, intellectual disability, disorders of sensation, birth defects, neurologic disorders and genetic conditions, as well as a wide a wide range of concerns in the behavioral arena. Services include diagnostic evaluations, help with adoptions, consultations with primary care providers for children with complex

neurodevelopmental issues, and parent support. Our clinicians include board certified developmental and behavioral and neurodevelopmental pediatricians, and with clinical nurse specialists. Applicants must be BC/BE in Developmental/Behavioral Pediatrics or Neurodevelopmental Disabilities. The Capital Region of New York is filled with culture, outdoors recreation and universities, and is a great place to reside.

CapitalCare Medical Group offers competitive salaries and a comprehensive benefits package, including medical, dental and life insurances, holidays, paid time off, retirement plan, and much more, in a business casual environment.

CapitalCare Medical Group is a physician-owned medical practice with more than 150 healthcare professionals. The group offers primary care services in Family Practice, Pediatrics and Internal Medicine at 25 sites throughout the Capital District. CapitalCare also provides services in Endocrinology, Pulmonary and Sleep Medicine, Developmental-Behavioral Pediatrics, Allergy, Asthma & Immunology, medical nutrition therapy, and comprehensive diabetes education and operates a state-of-the-art clinical laboratory. CapitalCare welcomes new patients and participates with most major health insurance carriers.

For information, please contact Anthony Malone M.D. at amalone@capcare.com or by phone at: (518) 782-7733. EOE M/F/D/V

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#### **Jacksonville, FL: Developmental Pediatrics**

The Department of Pediatrics at the University of Florida College of Medicine - Jacksonville, has an exceptional opportunity for an accomplished professional in Developmental Pediatrics (#00002402). The successful candidate will have the opportunity to work with the existing members of the Division of Developmental Pediatrics and to help grow and build new programs in an evolving Division. The University of Florida is committed to expanding its Division of Developmental Pediatrics and in enhancing the program. Major responsibilities include patient care and teaching of residents and medical students with opportunities in research possible.

The successful candidate will have a MD/DO degree and be a Board Certified Pediatrician, as well as Board Eligible/Board Certified in Developmental and Behavioral Pediatrics or Neurodevelopmental Disabilities. The appointment will be at the non-tenure accruing level of Assistant/Associate Professor. Academic rank will be commensurate with qualifications and salary will be negotiable.

Applications will continue to be received until the position is filled. Interested applicants should forward letter of intent, Curriculum Vitae, and the names and addresses of three references to: Mobeen H. Rathore, MD, Professor and Associate Chairman and Search Committee Chairman, Department of Pediatrics, 653-1 West 8th Street, Jacksonville, FL, 32209. Phone

904-244-3050, and/or fax to 904-244-3028, and/or e-mail: [ufpeds.recruitment@jax.ufl.edu](mailto:ufpeds.recruitment@jax.ufl.edu). The University of Florida is an equal opportunity institution dedicated to building a broadly diverse and inclusive faculty and staff. Please see our website at [www.hscj.ufl.edu/peds](http://www.hscj.ufl.edu/peds).

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#### **Tucson, AZ: Developmental-Behavioral Pediatrician**

The Department of Pediatrics at the University of Arizona seeks a developmental-behavioral pediatrician at the assistant or associate professor non tenure level. The department has an active developmental-behavioral practice with clinical opportunities in all areas of neurodevelopmental disabilities. The University of Arizona has a growing, fully accredited pediatric residency program and the department of pediatrics is extensively involved with medical student education. In addition to clinical care and teaching, many research opportunities are available through the University Center on Excellence in Developmental Disabilities programs and through collaborations in the UA medical school. Affiliated with Diamond Children's Medical Center and UA Healthcare this position offers excellent benefits, tuition waiver & retirement options.

For further information, please contact Sydney Rice, MD, MS at [srice@peds.arizona.edu](mailto:srice@peds.arizona.edu). The University of Arizona is an EEO/AA - M/W/D/V Employer.

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#### **Ann Arbor, MI: Developmental-Behavioral Pediatrician**

The Department of Pediatrics and Communicable Diseases at the University of Michigan's C.S. Mott Children's Hospital seeks a Board-Certified or Board-Eligible Developmental-Behavioral Pediatrician to join 4 Developmental-Behavioral Pediatricians, 5 Pediatric Psychologists and 2 Adolescent Medicine specialists in the Division of Child Behavioral Health with an ACGME-approved Developmental-Behavioral Pediatric fellowship and Pediatric Psychology Fellowship. We seek an additional DBP faculty member to assist in expanding clinical services, divisional research/scholarly activities and opportunities for fellow, resident and medical student training. We are especially interested in individuals with interest and expertise in one or more of the following areas: Autism Spectrum Disorders, ADHD/School Functioning, Developmental Delay, Elimination Disorders and General Behavioral Concerns. The Department of Pediatrics has over 200 faculty members and a new children's hospital scheduled to open in Fall 2011. The University of Michigan is located in Ann Arbor, a vibrant community.

For immediate consideration, please send CV and letter of interest to: Barbara True Felt, MD, Director, Section of Developmental Behavioral Pediatrics, Division of Child Behavioral Health, University of Michigan, Email: [truefelt@umich.edu](mailto:truefelt@umich.edu)

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#### **Marshfield, WI: Developmental/Behavioral Pediatric Specialist**

Marshfield Clinic is seeking a Second Developmental/

Behavioral Pediatric Specialist at our regional children's service in Marshfield, Wisconsin.

- Established Developmental/Behavioral Pediatric service in multi-specialty clinic with adjoining St Joseph's Children's Hospital (24-bed pediatric unit, 8-bed PICU, 24 bed NICU), renowned research facility, and state-of-the-art medical library
- The opportunity to collaborate with other pediatric specialists in serving children with special needs through multidisciplinary clinics and consultations in a Child Development Center
- Participation in Pediatric and Med-Peds residency training programs to enhance the future of children's care and development
- A comprehensive Pediatric and Adolescent Medicine Department with excellent primary care and subspecialty providers
- The benefits of a sophisticated, integrated electronic medical record system that allows effective and efficient patient care and instant communication with referring physicians

In addition to a competitive salary, the attractive benefit package includes:

- Life, dental, health, occurrence based liability and disability insurance
- 38 days paid leave to start plus \$5800 CME allowance per year
- A fully funded retirement plan and matching 401K plan
- Generous relocation allowance and more

Marshfield is conveniently located with equal proximity to Madison, Milwaukee, the Twin Cities and the beautiful resort communities of the Midwest. Schools are among the best in the country. Housing is affordable and there are no long commutes. Contact: For more information contact: Mary Treichel, Physician Recruitment, Treichel.mary@marshfieldclinic.org, 715-221-9774 www.marshfieldclinic.org

#### **Kansas City, MO: Developmental-Behavioral Pediatrician**

The Section of Developmental and Behavioral Sciences at Children's Mercy Hospitals and Clinics, Kansas City, MO, is recruiting a full-time, Board-Certified Developmental-Behavioral (CD-B) Pediatrician with a history of research productivity and clinical experience who will

- Teach residents and fellows in both outpatient and inpatient settings
- Carry out ongoing research in the field
- Develop a strong D-B research program with mentorship of Section staff and fellows
- Maintain a part-time clinical schedule

This Section is a large collaborative of specialists who are very proud of their integrated approach to the provision of developmental, behavioral and mental health services. This approach includes an active consultation-liaison service involving psychologists who are dedicated to the care of specific pediatric

subspecialty Sections and patient populations. The Section is made up of 24 doctorate-level psychologists, 7 Developmental Pediatricians, 4 Child and Adolescent Psychiatrists and 5 licensed clinical social workers who specialize in Family Therapy. Faculty appointment is through the University of Missouri - Kansas City School of Medicine.

Children's Mercy Hospitals & Clinics is one of the country's premier free-standing, independent pediatric clinical, academic and research medical centers, with 317 licensed beds, more than 40 pediatric subspecialty clinics, and the region's only Level I pediatric trauma center. It is a Magnet™ recognized pediatric health system for excellence in nursing services. Our faculty of pediatric subspecialists is actively involved in clinical care, pediatric research, and educating the next generation of pediatric specialists.

We hope you will become one of the million reasons our families choose Children's Mercy! Salary and academic range are commensurate with experience, EOE/AAP

Contact SECTION CHIEF Michele Kilo, MD for more information or to apply online visit: <http://www.childrensmercy.org/careers/nursing/physician.asp>. Email us at: [childrensmercy@cmh.edu](mailto:childrensmercy@cmh.edu)

#### **Greenville, NC: Developmental Behavioral Pediatrician**

Eastern Psychiatric and Behavioral Specialists (EPBS) in Greenville, NC is seeking a full or part time Developmental Pediatrician. EPBS is a multidisciplinary psychiatric and behavioral practice comprised of two psychiatrists, a DB Pediatrician, three physician extenders, psychologists and psychotherapists. EPBS is an office based practice providing developmental and psychological evaluations, medication management and psychotherapy for children, adolescents and adults. We strive to optimize the management of patients with complex medical, psychiatric and behavioral problems through close collaboration between providers, schools and community supports. EPBS is affiliated with East Carolina University and the Brody School of Medicine. Greenville is a small, university city with many cultural activities and easy access to beaches and the Research Triangle Park. For more information, contact Susan Foreman, MD, [sfore31000@aol.com](mailto:sfore31000@aol.com), 252-367-6794.

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# CALENDAR OF EVENTS

## 2011

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|--|----------------------------|------------------|
| <b>Get Hyp-II, Pediatric Hypnosis Workshop</b><br>www.napnap.org   | Baltimore, MD              | March 25-27      |
| <b>2011 SRCD Biennial Meeting</b><br>www.srcd.org  | Montreal, Canada           | March 31-April 2 |
| <b>SBM Annual Meeting &amp; Scientific Sessions</b><br>www.sbm.org   | Washington, DC             | April 27-30      |
| <b>Pediatric Academic Societies Annual Meeting and Asian Society for Pediatric Research</b><br>www.pas-meeting.org | Denver, CO                 | April 30-May 3   |
| <b>11th International Congress of the European Society of Pediatric Otorhinolaryngology</b><br>www.espo2012.com    | Amsterdam, The Netherlands | May 20-23        |
| <b>AAIDD Annual Conference</b><br>www.aamr.org   | Twin Cities, MN            | June 6-9         |
| <b>Faces of a Healthy Future: Leadership Institute Conference</b><br>www.cee hd.com                                | Winston Salem, NC          | June 17-18       |
| <b>National Pediatric Hypnosis Training Institute Three Day Workshop</b><br>www.nphti.org                          | Minneapolis, MN            | September 15-17  |
| <b>SDBP Pre-Meeting Workshops &amp; Annual Meeting</b><br>www.sdbp.org   | San Antonio, TX            | September 16-19  |
| <b>AACPDM Annual Meeting</b><br>www.aacpdm.org   | Las Vegas, NV              | October 12-15    |
| <b>American Academy of Pediatrics National Conference and Exhibition</b><br>www.aapexperience.org                  | Boston, MA                 | October 15-18    |
| <b>CHADD Annual Conference</b><br>www.chadd.org  | Orlando, FL                | November 10-12   |
| <b>APM Annual Meeting</b><br>www.apm.org   | Phoenix, AZ                | November 16-20   |
| <b>Excellence in Child Mental Health</b><br>www.excellence-in-child-mentalhealth.org                               | Istanbul                   | December 1-3     |

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