



# APPD NEWSLETTER

Winter 2004

Association of Pediatric Program Directors

## EDITOR'S COLUMN

*Robert Englander, MD, Director of Inpatient Services, Connecticut Children's Medical Center*

Let me begin by adding my congratulations to others on completion of the recruitment season and wish everyone a successful match. My comments for this edition will be short, but continue to focus on "opportunities" for members and the residents we serve. First, please take a look at the two new awards to be sponsored by the APPD for its members. I encourage you to nominate an individual who would be a worthy first recipient of each award. Second, you'll want to read the AAP Section on Resident's Column for opportunities for your

(See *EDITOR* on page 2)

## PRESIDENT'S COLUMN

*Edwin Zalneraitis, MD, Program Director, Connecticut Children's Medical Center*

### Awards Nominations, The Annual Survey and The Spring Meeting: We Need To Hear From You Soon!

Please take some time between recruitment and the match results to prepare for our future. There are some really important things that we need to be doing to improve our ability to advance our programs and our positions as program directors, and three of the most important are presented here for your consideration and action.



As you can see from the insert on this page, we have finally committed to long overdue recognition of outstanding achievement of Program Directors or Associate Program Directors for their contributions. The Robert S. Holm Award will honor those whose contributions in leadership or mentorship have resulted in significant impact on the effectiveness of pediatric residency program directors. The Walter W. Tunnessen, Jr. Award will honor those whose contributions or innovations have contributed in an extraordinary way to the advancement of pediatric graduate medical education. While there are potentially many worthy recipients, this is your chance to help decide who will be our inaugural honorees. We all can think of someone who we believe most deserves this recognition, so speak up and have your choice be considered for recognition this year!

It is time to sign up for the Annual Spring Meeting in San Francisco. The program this year will again be responsive to your needs as you have expressed them to APPD leadership. There will be many valuable opportunities to participate, and I am certain that you will return energized and better able to accomplish your goals. We will open the meeting first thing Thursday morning April 29<sup>th</sup> with the Forum for Chief Residents and the Forum for Small Programs and Affiliate Chairs. These sessions will be truncated this year to a half-day, so encourage your Chief residents to come and come early to get the most out of the session for them, as well as the rest of the meeting. If you are a small program director or affiliate chair, then you will realize the value of gathering to share issues and strategies. So please plan to be there.

The morning sessions will be shortened this year to bring you our first Kroc Foundation Workshop on the APA Educational Guidelines. Through the good work of our immediate Past-president Dr. Carol Carraccio, we have secured funding to bring you unique and timely workshops each year, utilizing experts and resources not otherwise readily available to us. How better to start than to bring an extended, hands on session by Dr. Diane Kittredge and the Project

(See *PRESIDENT* on page 2)

### APPD ANNOUNCES TWO NEW AWARDS

*Call for Nominations!*

APPD is pleased to announce two new awards, which will be awarded annually during our Spring Meeting, starting with this year's meeting in San Francisco April 29-May 1, 2004.

#### About the Awards:

**Robert S. Holm Leadership Award:** This award is to honor a Program Director or Associate Program Director (past or present) for extraordinary contribution in pediatric program director leadership or in support of other pediatric program directors as a mentor, advisor or role model for the many duties and responsibilities of the position.

**Walter W. Tunnessen, Jr. Award for the Advancement of Pediatric Resident Education:** This award is to honor a Program Director or Associate Program Director (past or present) for extraordinary or innovative contribution(s) in pediatric graduate medical education.

#### Nomination Process:

In 250 words or less, answer the question: Why should this person win the award?

This is open to current and former Program Directors and Associate Directors who are or have been APPD members.

Our deadline for nominations for both awards will be March 29, 2004.

#### Send nominations to:

APPD  
6728 Old McLean Village Drive  
McLean VA 22101  
fax: 703-556-8729  
e-mail: info@appd.org

### INSIDE:

Ask the ABP ~ AAP Section on Residents ~ Coordinators' Corner  
Resident Case Logs ~ RRC Update ~ Response to RRC Revisions  
APA Educational Guidelines ~ Task Force Updates  
Spring Meeting Schedule at a Glance

**(EDITOR continued from front page)**

residents. Finally, and most importantly, please be sure to clear your calendars to join us in San Francisco for the spring meeting. The agenda is printed on page 7 and is elucidated in the President's Column. The spring meeting this year promises to be informative, invigorating, and another great opportunity to network with your comrades in pediatric residency education. Our effectiveness as an organization is a direct reflection of the participation of our members...we look forward to record participation in the spring meeting and the year to come. See you in San Francisco!

**(PRESIDENT continued from front page)**

Team at the APA on the revised and improved APA Educational Guidelines for Pediatric Residency Training? These were developed for program directors to use in their programs. They are web-based and up to date. However, we can only use them effectively, if we know how. This will be your hands-on chance to master this approach to help you in developing your program curriculum so that you can meet the challenges and mandates of the coming years. Don't come late and miss this wonderful opportunity.

At the same time Thursday afternoon, the Coordinators hold their Forum for Coordinators. This will include timely discussions of issues surrounding problem solving, the ECFMG and enrolling international graduates, and mastering networking and conflict. It will finish with a cameo presentation by the section founder Dr. Carol Berkowitz on integrating personal and professional time. The Coordinator session and the Guidelines Workshop will be followed by the Task Force meetings and a reception. If you don't belong to a Task Force, now is the time to join. Pick your passion: Curriculum, Evaluation, Faculty Development, Learning Technology or Research. These are our action groups and we need as many of our members as possible to be actively engaged.

Friday morning will set the stage for the rest of the meeting. We will start with our regional breakfasts. These will include facilitated discussions of how to form or improve your regional group. The Breakfasts will be followed by updates from the APPD and RRC, and our keynote address by Dr. Bonita Stanton: "Mother, Wife, Sister, Daughter...And Me: How Can We Make It Work Out Well For Everyone." Women's issues and work-life balance are major inadequately addressed issues, and we are anticipating that Dr. Stanton's presentation will inspire us all to begin to really take on these problems in meaningful and productive ways. From there, it's on to the SIG to discuss our more burning issues and prepare for the afternoon plenary panel. The Coordinators will hear from the ACGME on the new data systems and convene their own special interest groups.

Back by popular demand, the afternoon plenary will be very focused plenary presentations followed by an interactive ques-

tion and answer session moderated once again by Council's Dr. Bud Wiedermann. This will be followed by our second annual poster session, with a wide variety of exciting and informative work from our members and guests. The meeting continues on Saturday morning with the final Coordinators session on career development and the update from The American Board of Pediatrics, and with our workshops. This year we had a record number of abstracts for workshops submitted, and we were able to select a wonderful group of presenters to provide an extraordinary range of topics that appear to be both timely and meaningful. The meeting concludes with the workshop for "Pediatric Subspecialty (Fellowship) Program Directors and the RRC/ABP: Brave New World." Please let the subspecialty program directors at your institutions know about this very valuable session, and urge them to enroll. The expectations are changing and we can help!

Finally, through the terrific work of Dr. Adam Pallant and the committee on our annual survey, we will indeed have a new and improved survey this year, leading to valuable and interpretable data about us. This is the other extremely important task to which we should all commit. It is only through dedicated participation of all members that we can understand where we are, what needs to be done and how to proceed. With your help, we will be able to finally have reliable data to guide our efforts and to make the case(s) for those things which we believe are essential for the success in pediatric graduate medical education and as program directors. This is the next step in beginning to accurately track ourselves as program directors and identify our outcomes.

**ASK THE AMERICAN BOARD OF PEDIATRICS (ABP)**

*Gail McGuinness, MD, Senior Vice-President, American Board of Pediatrics*

***Upcoming Changes in Subspecialty Training Requirements***

The American Board of Pediatrics (ABP) has completed an extensive review of the duration, design, and content of fellowship training with wide-ranging input from individuals and organizations with an interest in graduate medical education in the subspecialties of pediatrics. The changes that have been approved by the ABP are designed to recognize the diverse roles that subspecialists play, to allow greater flexibility in the design of fellowship training, and to place greater emphasis on the evaluation of fellow training at the local level. The new training requirements will apply to fellows beginning subspecialty training July 1, 2004, and thereafter.

The ABP will continue to require three years of training in the standard fellowship and has not approved a clinical-only pathway. The ABP endorses the goal of fellowship training remaining the development of future academic pediatricians and will continue to require scholarly activity during fellowship training but will modify the requirement for meaningful accomplishment

in research to accommodate a wider variety of academic scholarly activities. In addition to biomedicine, areas of scholarly inquiry might include health services, quality improvement, biomedical ethics, education, or public policy relevant to the subspecialty. The scholarly activity must be mentored and result in the generation of a specific work "product." The ABP will require the creation of a thesis-like oversight committee for mentoring and evaluation of fellows at the local institutional level with the evaluation of scholarly accomplishments the responsibility of this committee. The details of these changes have been outlined in a document entitled "Training Requirements for Subspecialty Certification" which has recently been mailed to a wide audience including all general pediatrics program directors. Additional detailed information is available on the ABP Web site at [www.abp.org](http://www.abp.org).

### ***Accelerated Research Pathway***

The ABP has also approved a new pathway for training in general pediatrics and a subspecialty, ie, the Accelerated Research Pathway (ARP) that may be offered to individuals entering general pediatrics residency training July 1, 2004. The ARP is designed to accommodate and encourage candidates who are committed to an academic career as physician scientists with a strong research emphasis in a pediatric subspecialty. This pathway is not intended to be the only route to accomplish such a goal but provides flexibility and additional time for research training during the subspecialty fellowship without lengthening training beyond six years. Candidates entering the ARP may begin subspecialty training after completion of two years of general comprehensive pediatrics training. A structured curriculum and close observation of the progress of the trainee are essential components of the pathway.

Two core years of general pediatrics training containing 20 months of specified experiences to include four months of supervisory experience in both inpatient and outpatient settings is required. This training closely mirrors that of internal medicine/pediatrics training and incorporates the core elements of the RRC requirements for general pediatrics.

Candidates for this pathway should be identified early, preferably prior to the start of the PL-1 year but no later than nine months into the PL-1 year. This is necessary so that the second year of training can be adapted in such a way that all of the curriculum requirements will be met. The general pediatric program director and candidate will not be required to seek prospective approval by the ABP but must notify the ABP by means of the tracking roster in May of the PL-1 year. Whether a trainee may remain in the pathway will depend on the assessment of the general pediatrics program director who will be required to verify competence at the end of two years of training. The program director must be able to attest that the trainee performance has been satisfactory and that the curricular requirements have been met. The program director is advised to utilize the In-training Examination results at the beginning of the PL-2 year as a measure of medical knowledge competence. A score at or above the

mean of general pediatrics trainees nationwide would provide objective evidence of acquisition of knowledge commensurate with length of training.

Trainees will be eligible to take the pediatric certifying examination after 11 months of clinical subspecialty training and to take the subspecialty certifying examination after the completion of the six years of total training (two years of general pediatrics and four years of subspecialty training).

It should also be noted that it is not expected that all general pediatrics and subspecialty training programs would be interested or able to offer the ARP. The decision to offer this pathway will be at the discretion of the training programs. Additional detailed information is available on the ABP Web site at [www.abp.org](http://www.abp.org).

## **AAP SECTION ON RESIDENTS**

*Benjamin F. Springgate, MD, MPH, Chair, AAP Resident Section, Tulane School of Medicine*

The Resident Section of the American Academy of Pediatrics is eager to share with APPD program directors as well as with all of your students, residents, and fellows the most recent news of our programs to enhance pediatric medical education and to broaden opportunities for pediatric trainees to become involved in child advocacy.

The Resident Section recently issued a call for applications to a new scholarship program for the AAP Legislative Conference in Washington D.C. from April 25 to 27, 2004. The Legislative Conference serves to instill knowledge of the state and federal legislative process, to develop advocacy skills and to introduce strategies and techniques for utilizing the media. Many past participants have become effective advocates at the national, state, chapter, and local levels. As many as five Resident Section members will be selected to receive funding to participate in this exciting and highly practical conference. More information on the conference is available online at <http://www.aap.org/profed/04legconf.pdf>. Inquiries regarding the scholarship may be sent to [rshannon@aap.org](mailto:rshannon@aap.org).

Efforts to enhance electronic communication of AAP news and opportunities have led to the debut of a new, bimonthly Resident Section electronic newsletter, first released in December 2003. The most recent newsletter outlines grant and scholarship application dates, Resident Section resolutions from the 2003 National Conference and Exhibition, and the AAP Federal Advocacy Action Network (FAAN). As many of you are aware, FAAN offers residents and pediatricians special alerts on federal legislation and regulations affecting children, as well as sample messages for you to forward to Congress and federal officials online. Access to our new electronic newsletter can be found at <http://aap.org/sections/resident/decbi-monthnews.htm>. More information regarding FAAN is available by emailing [faan@aap.org](mailto:faan@aap.org).

Don't forget to encourage your residents to attend the AAP National Conference and Exhibition (NCE) in San Francisco, CA from October 9<sup>th</sup> through 13<sup>th</sup>, 2004. Last year, 667 Resident Section members attended and were treated to a variety of excellent educational lectures and seminars. The Resident Section Program this year will address the theme of Pediatric Leadership and Legislative Advocacy. Online information on the NCE can be found at <https://s12.a2zinc.net/clients/aap/aap2004/>.

I hope that you will contact me via e-mail ([bspring@tulane.edu](mailto:bspring@tulane.edu)) if you have any questions about Resident Section activities or would like to learn how to involve program's trainees more actively in the AAP Resident Section. I look forward to hearing from you and working with you.

## COORDINATORS' CORNER

*Rosemary Munson, Administrative Assistant/Pediatric Residency Coordinator, The Barbara Bush Children's Hospital at Maine Medical Center*



I have always thought that "Scramble" was an important topic for discussion, and with the assistance of a distinguished panel of coordinator "experts" presented this topic at the APPD national meeting last May in Seattle. The discussion was well received and very lively. It was a chance for an exchange of ideas from those program coordinators who have actually faced the terror of "Scramble" and for those coordinators who have never gone through this – a real eye opener.

What is "Scramble" you ask? "Scramble" is when a program does not fill all of their resident slots in the match and tries to find candidates who have not matched to fill those slots. As for the candidates, they find out this year whether they matched or not on **March 15<sup>th</sup> at 12:00 noon EST**. Individual program results will be posted to the NRMP website on **March 16<sup>th</sup> at 11:30 am EST** (be patient as it sometimes takes a long time to get onto the site). Once you know your program's results then you can either celebrate your success or get ready for the "roof to cave in." Locations of all unfilled positions are released to everyone at 12:00 noon EST on March 16th. Unmatched applicants may begin contacting unfilled programs at 12:00 noon EST.

Here are a few ideas that came from our discussion in Seattle last spring:

- Don't try to figure out what went wrong and why you didn't match. That can be done after "Scramble" is done.
- Be sure that all departmental members are aware of the NRMP dates and deadlines.
- Develop a telephone questionnaire for use by designated staff as they interview prospective resident candidates. Designated staff should be your Program Director, Assistant Program Director, Coordinator, and members of your resident selection committee.

- Clear your calendar, your program director's calendar and the calendars of any other designated staff who will participate in the "Scramble" process. They must be at work and ready to "scramble" on March 16<sup>th</sup>.
- Once you know that your program has not matched you should set up a voice mail message on all of your departmental phones giving applicants information on how to forward their application to your program.
- **Be sure to have more than one fax machine available to receive applications.**
- The next few steps will go very quickly. Once you start receiving applications your program should:
  - Review all applications received
  - Designated staff should contact applicants and, using the developed form, interview them.
  - Once your candidate/s have been selected, your program should then fax a letter to the candidate/s offering a position. The candidate/s should fax the signed document back to the Program Director immediately.

Remember that when it is all said and done.....**THE SUN WILL COME OUT TOMORROW!!!** I wish all of you a very successful match day.

## RESIDENT CASE LOGS

*Carol Carraccio, MD, Associate Chair for Education, University of Maryland Medical System*

The ACGME has developed an on-line system for residents to log both procedures and patients. The system is easy to navigate and will be phased in starting in July 2004 by requiring that incoming PGY1s log their procedures. The system developers have mapped all the CPT and ICD-9 codes for pediatrics into this database to allow for efficient data entry.

Although there have been some concerns raised about abandoning old systems and adopting a new system there are many advantages to generating a national database particularly for patient logs:

- Resident involvement in the accreditation process
- Resident participation fosters self-directed learning
- Ability to generate reports for program directors
- Potential to streamline the PIF
- Patient logs will ultimately offer alternatives for numbers in judging adequacy of clinical experience
- First step in the direction towards evidence-based education by allowing us to develop some national standards

There will be a presentation at the upcoming APPD meeting on the new requirements for residency training and the case log system. I would encourage you all to attend. There will be time for discussion during the afternoon plenary.

## RRC UPDATE

*Mary Alice Parsons, Executive Director, RRC for Pediatrics*

**Note:** Program Directors and administrators/coordinators are encouraged to review the “RRC Update” that is posted periodically on the ACGME Website ([www.acgme.org](http://www.acgme.org)). Click on Residency Review Committees, then on Pediatrics, then on RRC Update. An update is posted approximately one month after each of the two RRC meetings per year (March/April and October).

**Program Requirements:** After its meeting in October, the RRC distributed its draft of the revised program requirements to major pediatrics groups with a request that each group collate the responses received from its membership and submit them to the RRC. At its meeting in late March 2004, the RRC will review the input and will make the modifications it judges to be appropriate. The requirements will then be sent through the official ACGME channels for review, comment and approval. ACGME will review/approve the document either in September 2004 or in February 2005. The earliest possible effective date for the new requirements is July 1, 2005.

**Data Project:** The RRC’s data project, that has been mentioned at APPD workshops and in the RRC Update on the ACGME Website for the last couple of years, has been launched. In early January a notice containing the requisite details was sent to all directors of pediatrics residencies. Programs are encouraged to experiment with the system through June in order to be ready for its mandatory use by all residents who begin their training as of July 1, 2004 and thereafter. At the completion of the academic year 2006-07, the RRC will have data on the three years of training for this first group of residents to use the system.

When the RRC has the opportunity about a year from now to review the information gathered during the first six months of the project, it will discuss specific ways in which the information will be used for accreditation purposes. This will result eventually in the RRC removing certain patient data pages from the PIF.

Approximately half of the Residency Review Committees are now utilizing an ACGME electronic data system.

**RRC Officers:** The newly elected officers of the RRC are:

*Chair:* Douglas Jones, MD, Chair of the Department of Pediatrics at the University of Colorado

*Vice Chair:* Carol Carraccio, MD, Associate Chair and Program Director, Department of Pediatrics at the University of Maryland

## APPD RESPONDS TO PROPOSED RRC REVISIONS

*Bernhard Wiedermann, MD, Secretary-Treasurer, APPD, Washington, DC; Susan Guralnick, MD, Councilor, APPD, Stony Brook, New York*

The APPD sent an official response to the Residency Review Committee on Pediatrics in February 2004. The response was drafted by the authors of this column after a 6-week commentary period from APPD membership. The draft was then reviewed and discussed by members of the APPD Executive Council to reach final consensus before submission.

The proposed changes were seen as very positive, particularly those pertaining to: 1) dropping strict continuity clinic panel size requirements; 2) including a minimum percentage of effort requirement for program director positions; and 3) suggestions for measuring competencies in specific areas of training. The Council adopted a general approach that revisions requiring further restrictions of programs’ training options should not be adopted without reasonable evidence that such changes improve training outcomes. The following highlights changes suggested in the APPD’s response letter:

- A proposal to allow greater flexibility for programs justifying inpatient census limits outside the 6-10 patients per resident number.
- A request for clarification of resident involvement in emergency transport experiences, so that residents would not be required uniformly to participate in ground or air transport trips.
- A revision of continuity clinic requirements that would allow greater flexibility for those programs using night team systems, as long as the new minimum 36 clinics per year requirement is met.
- A strong opposition to limitation of numbers of medicine-pediatric residents in programs.
- A general proposal to allow programs some greater flexibility in use of measurement tools for competencies, as long as the program could document that use of a particular measurement was at least as good as those suggested in the requirements.
- A few other proposals involved minor wording changes for clarification and increased flexibility for individual programs. These covered areas of faculty supervision, emergency medicine rotations, required subspecialty rotations, and evidence-based medicine evaluations.

When the RRC meets in March, it will consider the input it receives and will prepare the final version for official distribution to the outside organizations. We all look forward to implementing these improvements!

## APA EDUCATIONAL GUIDELINES REVISION PROJECT UPDATE

*Kenneth Roberts, MD, Moses Cone Memorial Hospital; Carol Carraccio, MD, University of Maryland; Diane Kittredge, MD, Dartmouth Hitchcock Medical Center; Constance Baldwin, PhD, University of Texas Medical Branch; Miriam Bar-on, MD, Loyola University; Patricia Beach, MD, University of Texas Medical Branch; Franklin Trimm, MD, USA Children's and Women's Hospital*

Now that resident interviews are finished, we are reopening our online survey of APPD Program Directors. The survey takes only 5 minutes and can be completed at: <http://www.utmb.edu/pedi1/cce/APA/APA.asp> [If you did it last fall, many thanks! No need to repeat.] We will be using this information to assess program needs for the *Guidelines* website; we will report on the results at the May APPD meeting.

**The online APA Educational Guidelines for Pediatric Residency will debut at the APPD-PAS meetings in San Francisco.** The project team will be giving two presentations at the APPD meeting: an April 29th invited seminar and a May 1st workshop. Come test drive this exciting new educational tool!

The *APA Educational Guidelines* website provides residency programs with a comprehensive, up-to-date curricular resource, including more than 340 goals with objectives appropriate for the graduating PL-3, plus evaluation tools to help programs address ACGME competencies. This project has been supported by the Josiah Macy, Jr., Foundation.

Since last spring, the project team has created a user-friendly interface for the *Guidelines*, which are now available on our beta test website. You can use "Build-Your-Own-Rotations" to create your own customized file. Alternatively, you can obtain pre-designed sets of goals and objectives for rotations and topic areas. ACGME competency domains and elements can be adapted for evaluation planning, and can be cross-referenced to related goals and objectives. Various search strategies provide customized documents which you can adapt for your own individual programs needs. The final *Educational Guidelines* website will also include online help functions, tutorials and educational resources.

**Beta testing will continue through April.** Beta testers' comments are critical for identifying problems and solutions, so our final product will meet the needs of program directors and faculty. The website URL, for the beta testing and access to the final product is: <http://www.ambpeds.org/egweb/>. Use the "Feedback" button to share your comments with the team.

## TASK FORCE HAPPENINGS

### Faculty Development Task Force

Members of the Faculty Development Taskforce are recovering from interview season and are gearing up to get moving again. We are about to embark on an editing adventure of the American Academy of Pediatrics' Pediatrics 101 booklet. The goal is to have this booklet meet the needs of students interested in pursuing careers in pediatrics. We are also interested in participating in the selection of workshops at both the annual and fall meetings. As we get ready for the meeting in April, it is our hope to begin preparing specific topics for discussion and develop a strategic plan for getting things done. We need to channel the energy generated at our annual meeting to last through out the year.

*Miriam Bar-on, MD, Chair, Task Force on Faculty Development*  
**E-mail:** [mbar@lumc.edu](mailto:mbar@lumc.edu)

### Research Task Force

The research task force has completed an analysis of the member survey. Based on these results and input from others on the task force we will be focusing on at least three future initiatives. The first initiative focuses on increasing the generalizability of educational research studies by creating sampling frames that contain a representative number of programs from throughout the APPD that would be willing to participate in a defined number of studies. When an investigator wanted to do a study, the sampling frames would rotate participation. Other future initiatives include obtaining funding to convene a conference to improve educational research, especially as it relates to patient care outcomes, and developing a web-based educational research center.

*Dan West, MD, Chair, Task Force on Research*  
**E-mail:** [dcwest@ucdavis.edu](mailto:dcwest@ucdavis.edu)

### Association of Pediatric Program Directors Leadership

**President:** Edwin Zalneraitis, MD

**President-Elect:** Theodore Sectish, MD

**Secretary-Treasurer:** Bernhard L. Wiedermann, MD

**Past-President:** Carol Carraccio, MD

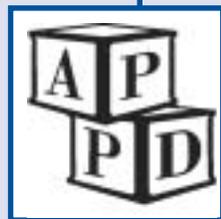
**Newsletter Editor:** Robert Englander, MD

**Councilors:** Lynn R. Campbell, MD; Robert Englander, MD;

Susan Guralnick, MD; John Mahan, MD

**Coordinators' Executive Committee**

Cindy Colpitts; June Dailey; Louise Kadane; Rosemary Munson;  
Venice VanHuse; Jeri Whitten



# 2004 Annual Spring Meeting

San Francisco Hilton ■ San Francisco, CA ■ April 29-May 1

Schedule at a Glance

## THURSDAY, APRIL 29

7:00am	Registration Begins
8:00am - 12:00pm	Forum for Chief Residents
9:00am - 12:00pm	Forum for Small Programs/Affiliate Chairs
12:00pm - 1:00pm	LUNCH ( <i>On Own</i> )
12:00pm - 6:00pm	Coordinators Session
1:00pm - 4:00pm	Invited Workshop <i>Applying the New APA Educational Guidelines to Your Program</i>
4:00pm - 6:00pm	Task Force Meetings
6:30pm - 7:30pm	Wine and Cheese Reception

## FRIDAY, APRIL 30

7:00am - 8:45am	Regional Breakfast Meetings
9:00am - 9:30am	Association of Pediatric Program Directors
9:30am - 10:00am	Mother, Wife, Sister, Daughter... And Me: How Can We Make It Work Out Well For Everyone?
10:00am - 10:30am	Update From The RRC
10:30am - 11:00am	BREAK
11:00am - 1:00pm	APPD SIG Coordinators Session
1:00pm - 2:30pm	LUNCH ( <i>On Own</i> )
2:30pm - 4:30pm	Plenary Session Update from APPD APA Educational Guidelines American Academy of Pediatrics Residency Review Committee American Board of Pediatrics Pediatric Education Steering Committee APPD Financial Update Recognize Outgoing Leaders APPD Election Results Interactive Panel Discussion
4:30pm - 5:30pm	Poster Session and Meet The Task Force Chairs

Registration Forms are now available on our website [www.appd.org](http://www.appd.org)

## SATURDAY, MAY 1

8:30am - 10:30am	Workshop Session I Coordinators Session
10:30am - 11:00am	BREAK
11:00am - 1:00pm	Workshop Session II
1:30pm - 4:30pm	The Pediatric Subspecialty (Fellowship) Program Directors And The RRC/APP: The Brave New World



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## Association of Pediatric Program Directors

*8th Annual Fall Meeting*

**October 6 - 8, 2004**

Washington, DC Metropolitan Area



**ORIENTATION AND TRAINING FOR NEW  
PROGRAM DIRECTORS  
PREPARATION FOR A SUCCESSFUL SITE VISIT**

**Reception & Dinner: *October 8***

**Meeting: *October 9 - October 10***

### **Who Should Attend?**

- ◆ *New Program Directors and New Coordinators*
- ◆ *Associate Program Directors*
- ◆ *Individuals Considering Becoming A Program Director*
- ◆ *Individuals Interested In A Comprehensive Update*
- ◆ *Individuals Preparing For A RRC Site Visit*
- ◆ *Individuals Assisting Program Directors*

