Edward Mallinckrodt  
Department of Pediatrics

The primary aim of the teaching program of the Department of Pediatrics (http://pediatrics.wustl.edu) is to stimulate interest in developmental biology, especially human growth and development, and to provide students with a foundation sufficiently comprehensive so that they will have an appreciation of clinical pediatric problems regardless of their future career choices in medicine.

The major clinical and research facilities are in St. Louis Children's Hospital (http://slch.org), and the newborn services are at Barnes-Jewish Hospital. St. Louis Children's Hospital is a facility with 264 beds that accepts patients through 21 years of age with all types of medical and surgical problems. Hospital admissions average 11,200 annually. Pediatric medical ambulatory activity, including subspecialty and emergency visits, averages about 152,000 visits a year. Nearly 4,000 infants are born annually at the Washington University Medical Center.

Website: http://pediatrics.wustl.edu

Degrees & Requirements

While the Department of Pediatrics does not offer its own degree, some of the department's courses are open to students in the MD and MSTP (MD/PhD) programs. Further information about the MD and MSTP degrees can be found in the Degrees & Programs Offered (http://bulletin.wustl.edu/medicine/degrees) section of this Bulletin.

Research

Ana Maria Arbelaez, MD  
Northwest Tower, 10th Floor  
Phone: 314-286-1138  
Clinical Research in Diabetes Mellitus. Clinical research studies on hypoglycemia associated autonomic failure in patients with type 1 diabetes mellitus and on cystic fibrosis related diabetes.

Charles E. Canter, MD  
Northwest Tower, Division of Cardiology, 8th Floor  
Phone: 314-454-6095  
Single-center and multicenter clinical studies and trials in pediatric cardiomyopathy, heart failure, and heart transplantation.

F. Sessions Cole, MD and Jennifer Wambach, MD, MS  
Northwest Tower, 8th Floor; and McDonnell Pediatric Research Building, 5th Floor  
Phone: 314-454-6148  
Using candidate gene sequencing, exome sequencing, whole genome sequencing, and computational prediction and filtering strategies for discovery of deleterious variants in population-based cohorts, case-control cohorts, and trios of affected infant and parents, our laboratory focuses on discovering novel candidate genes associated with neonatal respiratory distress syndrome and understanding the contribution of genetic variation in candidate genes of the pulmonary surfactant metabolic pathway (including surfactant protein B, surfactant protein C, NKX2-1, and ABCA3), to risk of neonatal respiratory distress syndrome.

Vikas Dharnidharka, MD, MPH  
Northwest Tower, 10th Floor  
Phone: 314-286-1574  
Clinical and translational research in childhood kidney disease. Our group is involved in several different types of clinical and translational research, including (a) multicenter clinical intervention trials to improve teen adherence with transplant medications and test new medications in children on dialysis; (b) translational biomarker studies in transplant acute and chronic rejection and genomic studies or post-transplant lymphoproliferative disease; (c) large transplant database epidemiological analyses for associations of immunosuppressive regimens with efficacy and morbidity balance.

Allan Doctor, MD  
McDonnell Pediatric Research Building, 5th Floor  
Phone: 314-454-2527  
Role of Erythrocytes in Pathologic Vascular Signaling. We employ several novel experimental platforms to pursue a range of basic, translational, and clinical studies exploring: (1) the role of erythrocytes in context-responsive metabolism of vasoactive effectors in flowing blood; (2) molecular control of antioxidant defense in erythrocytes; (3) the role of acquired injury to normal erythrocytes in the pathophysiology of acute lung injury and multiple organ failure syndrome; and (4) the impact of genetic abnormalities in erythrocytes upon antioxidant defense and vascular signaling (modeled by sickle cell anemia). Query is modeled on many levels from isolated proteins – cell culture – isolated organ – whole mouse – to studies in humans.

Todd Druley, MD, PhD  
4444 Forest Park Avenue, Room 6203  
Phone: 314-286-2124  
Translational genomic research in pediatric oncology. The Druley lab aims to develop novel genomic and computational methodologies for characterizing the functional impact of rare acquired and germline variation on the etiology and outcomes of various pediatric malignancies.

Jennifer Duncan, MD  
McDonnell Pediatric Research Building, 3rd Floor  
Phone: 314-747-0802  
Understanding the Transgenerational Impact of Maternal Nutrition. Our lab uses Drosophila melanogaster as a model system to evaluate the impact of maternal caloric excess on
metabolism and mitochondrial function in offspring. We are currently pursuing epigenetic mechanisms, specifically the role of histone modification, for altering gene expression. In addition, we are evaluating the molecular mechanisms underlying triglyceride excess in the offspring and are evaluating tissue-specific mitochondrial function. This elective is for students interested in research in any of these areas.

Stephanie A. Fritz, MD, MSCI  
Northwest Tower, Room 10125  
Phone: 314-454-4115

Our research team studies the epidemiology, microbial virulence mechanisms, and host defenses against community-associated methicillin-resistant Staphylococcus aureus (CA-MRSA) colonization, transmission and disease. We are investigating the transmission dynamics of CA-MRSA in households and interventions to interrupt the transmission of CA-MRSA and prevent subsequent infections. Our lab also explores the microbial and host genomic determinants, as well as the host immune response to staphylococcal toxins implicated in the pathogenesis of CA-MRSA, in patients across a spectrum of disease states. Our goal is to develop novel approaches for the prevention of CA-MRSA infections.

Carmen Halabi, MD, PhD  
McDonnell Pediatric Research Building, 4th Floor, Room 4107  
Phone: 314-286-1376

Extracellular matrix in vascular development and disease:  
The research in the laboratory focuses on vascular biology. Specifically, we study extracellular matrix proteins that make up the elastic fibers of blood vessels. Elastic fibers convey elasticity to blood vessels allowing large arteries to store energy during systole and release it during diastole. Abnormalities in elastic fiber components lead to various complications including hypertension, stiff vessels, and aneurysms. In the laboratory, we utilize mouse models to understand how abnormalities in these proteins lead to disease, which helps us not only learn about the normal function of these proteins, but also identify potential novel therapeutic targets.

Robert J. Hayashi, MD  
St. Louis Children's Hospital, Suite 9S  
Phone: 314-454-4118

Clinical research interests include stem cell transplantation and its complications, including Post Transplant Lymphoproliferative Disease and long-term side effects of therapy.

Keith A. Hruska, MD  
McDonnell Pediatric Research Building, 5th Floor  
Phone: 314-286-2772

The research in the laboratory focuses on chronic kidney disease (CKD) and its complications of the chronic kidney disease mineral bone disorder syndrome that involves skeletal frailty, cardiovascular disease, and vascular calcification. The lab has discovered important new pathologic mechanisms of disease leading to vascular calcification through systemic effects of factors involved in renal repair and hyperphosphatemia.

Translational studies that continue to develop new therapeutic approaches are being aggressively pursued. New therapies for chronic kidney disease, and its complications, are being studied in clinical trials.

Paul Hruz, MD, PhD  
McDonnell Pediatric Research Building, 3rd Floor  
Phone: 314-286-2797

Research interests include structure/function relationships in facilitative glucose transporters, congenital and acquired lipodystrophy syndromes, and insulin resistance associated with HIV protease inhibitor therapy.

David A. Hunstad, MD  
McDonnell Pediatric Research Building, Room 6106  
Phone: 314-286-2710

Work in our lab focuses on the interactions of pathogenic bacteria with their hosts. We aim to elucidate the modulation of host immune responses by pathogens and to determine the mechanisms by which these bacteria present specific virulence factors on their surfaces. Currently, we use cultured bladder epithelial cell models and murine models of cystitis to investigate the ability of uropathogenic Escherichia colito modulate host innate and adaptive immune responses. In addition, we are studying the molecular mechanisms by which selected outer membrane proteins contribute to the virulence of uropathogenic E. coli. Our primary goal is to discover novel targets for interventions that will prevent and better treat bacterial infections of the urinary tract. Along these lines, we are leveraging recent discoveries in UTI pathogenesis to design nanoparticle-based therapies for prevention of acute and recurrent UTI. We have also launched a new translational study of immune responses to UTI in male and female infants, paired with an innovative new mouse model of male UTI that permits first-ever studies of sex differences in these infections.

S. Celeste Morley, MD, PhD  
McDonnell Pediatric Research Building, Room 6105  
Phone: 314-286-2136

Our laboratory investigates the molecular mechanisms underlying immune cell signaling and trafficking using mouse models. We hope to identify molecules critical for host defense against infectious organisms such as pneumococcus. Our focus is currently on an actin-binding protein called L-plastin, which is required for normal T and B cell motility.

Audrey R. Odom, MD, PhD  
McDonnell Pediatric Research Building, Room 6108  
Phone: 314-747-2370

Antimalarial therapies and diagnostics. Severe malaria due to infection with Plasmodium falciparum kills nearly a million children annually. My laboratory uses translational approaches to develop new methods to diagnose and treat malaria. Projects are available in several research areas, ranging from clinical studies to molecular parasitology approaches in the lab. We are eager to have students join either our team on campus, where we study parasite metabolism and evaluate new potential
therapies, or our team in the field in Malawi, where we are collecting samples for new malaria biomarkers.

Jose A. Pineda, MD
Northwest Tower, 10th Floor, Patient Oriented Research Unit
Phone: 314-286-1246
Mechanisms of brain injury in children. Our clinical research efforts focus on investigating the mechanisms and potential new treatments for brain injury, including strategies for implementation of best clinical practices. We utilize high-resolution physiological monitoring, biochemical analysis of clinical samples, and innovative implementation science methodologies.

Alan L. Schwartz, PhD, MD
St. Louis Children's Hospital, Suite 3S36
Phone: 314-454-6005
Investigative efforts are aimed at understanding: (1) the biology of cell surface receptors, including biochemical and molecular dissection of the mechanisms responsible for receptor-mediated endocytosis of blood coagulation proteins; and (2) the regulation of intracellular protein turnover.

Shalini Shenoy, MD
St. Louis Children's Hospital, Suite 9S
Phone: 314-454-6018
Investigation of novel reduced intensity transplant strategies for pediatric non-malignant disorders and the immunologic basis of graft versus host disease and graft rejection.

Gregory A. Storch, MD; Kristine Wylie, PhD; Todd Wylie, BS; Richard S. Buller, PhD
St. Louis Children's Hospital, Suite 2N52
Phone: 314-454-6079
Infectious disease genomics. Our laboratory is interested in applying genomic analysis to a variety of problems in infectious diseases, mostly related to viral infections. Recent studies include use of next generation sequencing to define the human virome in immunocompromised children, improved methods for detecting viruses using next generation sequencing, use of next generation sequencing for clinical diagnosis, analysis of the human transcriptome response to acute infections, sequencing of the genome of enterovirus D68 and development of a rapid diagnostic test for that virus. Students would have the opportunity to learn genomic techniques, including informatics analysis.

Phillip I. Tarr, MD
McDonnell Pediatric Research Building, Room 6103
Phone: 314-286-2848
Research in Pediatric Gastroenterology, Hepatology and Nutrition. Students have opportunities in broadly encompassing research projects. Investigators in the Division have funded and vibrant projects in liver disease (fatty liver disease, acute liver failure, biliary atresia, liver transplants, cystic fibrosis liver disease), inflammatory bowel diseases (Crohn's Disease and ulcerative colitis), infections of the gastrointestinal tract (diarrhea), acute liver failure, Hirschsprung Disease, diarrhea, gut microbiome, aflatoxin injury to the liver and stunting, health services research, necrotizing enterocolitis, antibiotic-resistant pathogens in the human gut, and quality improvement, particularly related to inflammatory bowel disease management. Short- and long-term projects can be arranged around these and other related efforts. The exact nature of the project depends on the time that the student can contribute to the effort, and the availability of any of the Division faculty, who all have established track records as mentors. Interested students should contact any of our faculty, or Dr. Tarr, to discuss the possibilities.

Neil H. White, MD, CDE
St. Louis Children's Hospital, Northwest Tower, 9th Floor
Phone: 314-286-1157
Our work involves patient-oriented research in the management of diabetes in children. Arrangements can be made for involvement in, or development of, projects aimed at improving outcome or prevention of diabetes mellitus and its complications.

David B. Wilson, MD, PhD
McDonnell Pediatric Research Building, Room 3102
Phone: 314-286-2834
Research is focused on the molecular switches that regulate control genes during early embryonic development and differentiation.

Faculty

Department Chair
Gary Silverman, MD, PhD

Department Vice Chairs
F. Sessions Cole, MD
Alexis Elward, MD, MPH
Mark Lowe, MD, PhD
Andrew White, MD, MS

Division Chiefs
Ana Maria Arbelaez, MD, MSCI
F. Sessions Cole, MD
Vikas Dharnidharka, MD, MPH
Thomas Ferkol, MD
Anthony French, MD, PhD
Robert Hayashi, MD
Abby Hollander, MD
David Hunstad, MD
Lisa Moscoso, MD, PhD
Katie Plax, MD
Kimberly Quayle, MD
Gregory Storch, MD
Phillip Tarr, MD
Michael Turmelle, MD
George Van Hare, MD
Juliane Bubeck Wardenburg, MD, PhD
Visit our website for more information about our faculty (http://pediatrics.wustl.edu/directory) and their appointments.

**A**

**Ginnie Lee Abarbanell**  
Associate Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)

**Philip Mulayara Abraham, MD**  
Instructor in Pediatrics (primary appointment)  
BS Boston College 2006  
MD Ross Univ School of Medicine 2010

**Susan E Adams, PHD, MD**  
Assistant Professor of Clinical Pediatrics (primary appointment)  
PHD University of Kansas Medical 1984  
MD Washington Univ in St. Louis 1991  
BS University of Kansas 1977  
BA University of Kansas 1977

**William S Adams, MD**  
Associate Professor of Clinical Pediatrics (primary appointment)  
BA Washington Univ in St. Louis 1985  
MD University of Missouri 1989

**Oloruntosin Adepeju Ifedadepe Adeyanju, MD**  
Instructor in Pediatrics (primary appointment)  
BS Williams College 2008  
MD Emory University 2012

**Randy Agolia, MD**  
Instructor in Clinical Pediatrics (primary appointment)  
MD St. Louis University Group of 1995

**Fahd Aqeeb Ahmad, MD**  
Assistant Professor of Pediatrics (primary appointment)  
BA University of MO Columbia 1998  
MD University of MO Columbia 2006

**Etihad S. Al-Falahi**  
Instructor in Clinical Pediatrics (primary appointment)

**Suzanne G Albrecht**  
Instructor in Clinical Pediatrics (primary appointment)

**Danielle Nicole Alfano, MD**  
Instructor in Pediatrics (primary appointment)  
BS Univ of Minnesota Twin Cities 2007  
MD Washington Univ in St. Louis 2011

**Ardis Kay Allison, DOST**  
Instructor in Clinical Pediatrics (primary appointment)  
DOST Oklahoma St University 1980

**Patricia J Amato, MD**  
Professor of Clinical Pediatrics (primary appointment)  
MD School Not Listed 1982  
BS Notre Dame College 1979

**Mohamad T Amjad, MD**  
Professor of Clinical Pediatrics (primary appointment)  
MD School Not Listed 1961  
BS School Not Listed 1957

**Jagrut Shah Anadkat, MD**  
Assistant Professor of Pediatrics (primary appointment)  
BS Ohio State University 2000  
MD Northeastern University 2005

**Anjali Patel Anders, MD**  
Instructor in Pediatrics (primary appointment)  
BS University of MO Columbia 2006  
MD University of MO Columbia 2010

**Kristen Minette Andersen**  
Instructor in Clinical Pediatrics (primary appointment)

**Dana E Ankney, MD**  
Instructor in Clinical Pediatrics (primary appointment)  
MD Wake Forest University 2005  
BA Washington Univ in St. Louis 2001

**Amal F. Antoun**  
Instructor in Clinical Pediatrics (primary appointment)

**Shafrak Anwar, MD**  
Assistant Professor of Pediatrics (primary appointment)  
BS University of Iowa 1993  
MD University of Iowa College of 1998

**Elizabeth L Atkinson, MD**  
Instructor in Clinical Pediatrics (primary appointment)  
MD Hahnemann University 1994

**Stephanie Jane Attarian, BBA, MD**  
Instructor in Pediatrics (primary appointment)  
BBA East Tennessee State Universi 2004  
MD University of Tennessee 2009

**Robert K Atteberry**  
Instructor in Clinical Pediatrics (primary appointment)

**Adrienne Denise Atzemis, MD**  
Associate Professor of Pediatrics (primary appointment)  
MD Creighton University 2000  
BS John Carroll University 1996

**Sarah Elizabeth Aubuchon, MD**  
Instructor in Clinical Pediatrics (primary appointment)  
BA University of MO Kansas City 2007  
MD University of MO Kansas City 2008

**Sara Ayers, MD**  
Instructor in Clinical Pediatrics (primary appointment)
Fariba Azarpour, MD  
X (primary appointment)  
MD School Not Listed 1971

Leonard B Bacharier, MD  
Professor of Pediatrics (primary appointment)  
Professor of Medicine  
MD Washington Univ in St. Louis 1992  
BA Johns Hopkins University 1988

Jill M Baer, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BS University of Kentucky 1972  
MD University of Kentucky 1975

Dustin M Baldridge, PHD, MD  
Instructor in Pediatrics (primary appointment)  
PHD Baylor University 2010  
MD Baylor University 2011  
BS University of Dallas 2002

Sirine A. Baltagi, MD  
Assistant Professor of Pediatrics (primary appointment)  
MD American University of Beirut 2004

David T Balzer, MD  
Professor of Pediatrics (primary appointment)  
BS University of MO Columbia 1981  
MD Saint Louis University 1985

Angela L Bard, MD  
Associate Professor of Clinical Pediatrics (primary appointment)  
BS Indiana University Bloomington 1976  
MD Indiana University Bloomington 1981

Alan Roy Barnett  
Adjunct Instructor in Pediatrics (primary appointment)

Kevin Barton, MD  
Instructor in Pediatrics (primary appointment)  
BS Haverford College 2000  
MD Tulane University 2006

Amanda Marie Musto Bashir, MD  
Instructor in Pediatrics (primary appointment)  
BS University of Notre Dame 2009  
MD University of Florida 2013

Kevin W Baszis, MD  
Assistant Professor of Pediatrics (primary appointment)  
MD University of MO Kansas City 2004

Maria S Baszis  
Instructor in Clinical Pediatrics (primary appointment)

Aimee M Baumann-Dudenhoeffer, MD  
Instructor in Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 2005  
BA Cornell University 2000

Susan L Baumer, MD  
Associate Professor of Clinical Pediatrics (primary appointment)  
MD University of Pennsylvania 1975  
BA University of Oregon 1969

Christie A. Bayer, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of MO Columbia 1990  
BA Saint Louis University 1986

Julia M. Becker, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BS University of Missouri 1993  
MD University of Missouri 1997

Jeffrey John Bednarz, PHD, MD  
Assistant Professor of Pediatrics (primary appointment)  
PHD Davenport University 2003  
MD Davenport University 2003  
BS Duke University 1995

Earl C Beeks Jr, MD  
Associate Professor of Clinical Pediatrics (primary appointment)  
MD University of Missouri 1981  
BS Howard University 1977

Avraham Beigelman, MD  
Associate Professor of Pediatrics (primary appointment)  
MD Hebrew University 2000

Walter F Benoist, MD  
Professor of Clinical Pediatrics (primary appointment)  
BA University of Pennsylvania 1968  
MD Washington Univ in St. Louis 1972

Louise E Berdan, MA, PHS  
Instructor in Clinical Pediatrics (primary appointment)  
BA Washington Univ in St. Louis 2003  
MA Univ North Carolina Greensboro 2005  
PHS Univ North Carolina Greensboro 2009

Shobha Bhaskar, MBBS  
Assistant Professor of Pediatrics (primary appointment)  
MBBS Bangalore University 1994

Priya Narayana Bhat, MS, MD  
Assistant Professor of Pediatrics (primary appointment)  
MS University of AL Hunstville 2000  
MD University of South Alabama 2004  
BS University of AL Hunstville 1999

Jean E Birmingham, MD  
Associate Professor of Clinical Pediatrics (primary appointment)  
BA Ohio Wesleyan University 1984  
MD University of Missouri 1988

Huldah C Blamoville, MD, MD1  
Associate Professor of Clinical Pediatrics (primary appointment)  
BS Queens College 1959
Instructor in Clinical Pediatrics (primary appointment)

**Juliane Bubeck-Wardenburg, PhD, MD**
Professor of Pediatrics (primary appointment)
PHD Washington Univ in St. Louis 2017
MD Washington Univ in St. Louis 2017

**Kathryn Ann Bucklen, MD, BFA**
Assistant Professor of Pediatrics (primary appointment)
MD Wake Forest University 2001
BFA New York University 1991

**Tara M. Budetti**
Instructor in Clinical Pediatrics (primary appointment)

**Lorena Buffa, MD**
Instructor in Clinical Pediatrics (primary appointment)
MD University of MO Columbia 1998

**Justin Reeves Buland, DOST**
Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)
DOST Philadelphia College Pharm&Sci 2017

**Richard S Buller, MS, PhD**
Associate Professor of Pediatrics (primary appointment)
BS Michigan Tech University 1972
MS Michigan Tech University 1974
PHD University of Montana Missoula 1983

**Rebecca Kay Bullivant, MD**
Assistant Professor of Clinical Pediatrics (primary appointment)
MD University of Illinois 1992
BS Eastern Illinois University 1988

**Max H Burgdorf, MD**
Assistant Professor of Clinical Pediatrics (primary appointment)
MD Washington Univ in St. Louis 1974
BA Washington Univ in St. Louis 1970

**Candice Marie Burns, MD**
Instructor in Pediatrics (primary appointment)
MD Indiana University Indianopoli 2008
BS Lee College 2004

**Kelley S. Caddel, MD**
Instructor in Clinical Pediatrics (primary appointment)
MD George Washington University 2008
BA Indiana University Bloomington 1998

**Archna Calfee, MD**
Instructor in Clinical Pediatrics (primary appointment)
MD Washington Univ in St. Louis 2001
BA Case Western Reserve Univ 1997

**Joseph Edward Cangas**
Assistant Professor of Clinical Pediatrics (primary appointment)

**Charles E Canter, BS1, MD**
Professor of Pediatrics (primary appointment)
John R Carile, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BS University of Kansas 1972  
MD University of Kansas Medical 1975

Michael J. Carney, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of MO Columbia 1991  
BS University of Notre Dame 1987

Erin Elizabeth Casey, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of Rochester 2012  
BS University of Rochester 2008

Rubilinda Q Casino, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BS University of Santo Tomas 1979  
MD University of Santo Tomas 1979

Timothy James Casper, MD  
Instructor in Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 2009  
BS University of Dayton 2005

Chesney Dawn Castleberry, MD  
Assistant Professor of Pediatrics (primary appointment)  
MD University Texas San Antonio 2010

Tattamangalam P Chandrika, MS  
Associate Professor of Clinical Pediatrics (primary appointment)  
MS University of Calcutta 2000

William T Chao, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of Illinois 1979  
BS University of Illinois 1975

Glenn S Cheng, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BS University of Texas Austin 1984  
MD University Texas San Antonio 1988

Wak S Chia, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD School Not Listed 1974

Jonathan C Chiles, MD  
Assistant Professor of Pediatrics (primary appointment)  
BA University of MO Kansas City 2004  
MD University of MO Kansas City 2004

Sri Sankar Chinta, MBBS, MS1  
Assistant Professor of Pediatrics (primary appointment)  
MBBS Andhra Medical College 2001  
MS1 Washington University 2015

Amy Lynn Clark, DOST  
Instructor in Pediatrics (primary appointment)  
DOST Kirkville College of Osteopat 2009  
BA Saint Louis University 2004

Regina A Clemens, MD, PHD  
Instructor in Pediatrics (primary appointment)  
MD University of Pennsylvania 2007  
PHD University of Pennsylvania 2007

Lindsay Davidson Clukies, MD  
Assistant Professor of Pediatrics (Pending Dean's Approval) (primary appointment)  
MD New York Medical College 2011  
BS McGill University 2006

Andrew Stephen Cluster, MD  
Instructor in Pediatrics (primary appointment)  
BS University of Maryland 2006  
MD University of Texas Southwest 2010

Darryl S Cohen, DOST  
Assistant Professor of Clinical Pediatrics (primary appointment)  
DOST School Not Listed 1981  
BA University of North Texas 1976

Barbara A Cohlan, MD  
Professor of Pediatrics (primary appointment)  
BA University of Michigan 1974  
MD New York University 1978

F. Sessions Cole, MD  
Park J White, M.D. Professor of Pediatrics (primary appointment)  
Assistant Vice Chancellor for Children's Health, Washington University School of Medicine  
Executive Vice Chair of the Department of Pediatrics  
Professor of Cell Biology and Physiology  
BA Amherst College 1969  
MD Yale University 1973

John C. Cole, PHD, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BA Washington Univ in St. Louis 1995  
PHD Washington Univ in St. Louis 2003  
MD Washington Univ in St. Louis 2003

Lora Pearlman Collier  
Instructor in Clinical Pediatrics (primary appointment)

Bryanne Noel Colvin, MD  
Instructor of Pediatrics (primary appointment)  
MD Saint Louis University 2010  
BA University of Dallas 2006

Susan Conger  
Instructor in Clinical Pediatrics (primary appointment)

Megan A Cooper, PHD, MD  
Assistant Professor of Pediatrics (primary appointment)  
Assistant Professor of Pathology and Immunology  
BA College of Wooster 1995
PHD Ohio State University 2002
MD Ohio State University 2004

Tara Conway Copper, MD
Assistant Professor of Medicine (Pending Executive Faculty Approval) (primary appointment)
MD University of Miami 2017

Ferdinand Louis Coste III, DOST
Assistant Professor of Pediatrics (primary appointment)
BS Cornell University 1998
DOST NY Coll of Osteopathic Med 2004

Andrea Michele Coverstone, MD
Assistant Professor of Pediatrics (primary appointment)
MD Saint Louis University 2009
BS Gonzaga University 2004

Mary Michaelleen Cradock
Assistant Professor of Clinical Pediatrics (primary appointment)
BA Rice University 1987

Andrew Cronyn, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Albert Einstein College of Med 1996
BA Princeton University 1987

Betty Cross, MD
Instructor in Clinical Pediatrics (primary appointment)
BS University of Kansas 1979
MD University of Kansas 1983

Clayton Cummings, MD, BSBA
Instructor in Pediatrics (primary appointment)
MD University of MO Columbia 2000
BSBA University of MO Columbia 1996

Aarti Sudhir Dalal, DOST
Assistant Professor of Pediatrics (primary appointment)
BA Boston University 2002
DOST Rowan College 2007

Tracey M. Daly, MD
Instructor in Clinical Pediatrics (primary appointment)
BA University of California 1991
MD Saint Louis University 1995
BS University of CA Irvine 1991

Michael E Danter, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BS University of Missouri 1983
MD University of Illinois 1987

Yasmeen Daud, MD
Associate Professor of Pediatrics (primary appointment)
MD University of MO Kansas City 2000

John C Davis, MD
Associate Professor of Clinical Pediatrics (primary appointment)
MD University of Michigan 1980

Kasey L. Davis, PHD, MS
Instructor in Clinical Pediatrics (primary appointment)
BS McKendree College 2002
PHD University of Indiana 2007
MS University of Indiana 2004

Ray S Davis, MD
Professor of Clinical Pediatrics (primary appointment)
MD University of Louisville 1978

Thomas Keefe Davis, MD
Assistant Professor of Pediatrics (primary appointment)
MD St. George's University 2004
BS Regis University 1999

Jeffrey G Dawson, MD
Professor of Pediatrics (primary appointment)
BA Northwestern University 1982
MD University of Louisville 1982

Brian J. DeBosch, MD, PHD
Assistant Professor of Pediatrics (primary appointment)
Assistant Professor of Cell Biology and Physiology
MD Washington Univ in St. Louis 2008
BS University of Michigan 2001
PHD Washington Univ in St. Louis 2008

Jane E. Defalco, MD, MS
Assistant Professor of Clinical Pediatrics (primary appointment)
MD Case Western Reserve Univ 1984
MS Rutgers University 1978
BA Rutgers University 1977

Maureen Elaine Dempsey
Instructor in Clinical Pediatrics (primary appointment)

Leanne Michelle DePalma, MD
Instructor in Pediatrics (primary appointment)
BS University of Notre Dame 2004
MD University of Louisville 2008

Gerry Deschamps, MD, PHS
Instructor in Clinical Pediatrics (primary appointment)
MD University of Missouri 1983
PHS School Not Listed 1978
BA Washington Univ in St. Louis 1976

Vikas Rammath Dharnidharka, MBBS, MD, UNKNOWN
Professor of Pediatrics (primary appointment)
MBBS Topiwala National Med College 1988
MD Topiwala National Med College 1991
UNKNOWN St Xavier's College 1982

Donald V. Dichsen, MD
Instructor in Clinical Pediatrics (primary appointment)
BA School Not Listed 1961
MD University of Nebraska 1964

Lizbeth H Didriksen
Assistant Professor of Clinical Pediatrics (primary appointment)

Mary C Dinauer, MD, PHD
Professor of Pediatrics (primary appointment)
Professor of Pathology and Immunology
MD University of Chicago 1981
BA Lawrence University 1975
PHD University of Chicago 1979

Tulay F Dincer, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
MD School Not Listed 1977

Allan Doctor, MD
Professor of Pediatrics (primary appointment)
Associate Professor of Biochemistry and Molecular Biophysics
MD University of Virginia 1989
BA University of Virginia 1984

Alla Dorfman, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Cheruovtsy State School of Med 1986

Catherine J Doty
Instructor in Clinical Pediatrics (primary appointment)

Charles H Dougherty, MD
Professor of Clinical Pediatrics (primary appointment)
MD University of Rochester 1973
BA Holy Cross College 1969

Matthew P Dougherty
Instructor in Clinical Pediatrics (primary appointment)

Joan Catherine Downey, M PH, MD
Assistant Professor of Pediatrics (primary appointment)
Assistant Dean, College of Arts & Sciences
BA Boston University 1979
M PH Harvard University 1985
MD Harvard University 1985

Todd Druley, PHD, MD
Assistant Professor of Pediatrics (primary appointment)
Assistant Professor of Developmental Biology
Assistant Professor of Genetics
PHD University of Illinois Chicago 2002
MD University of Illinois Chicago 2002
BS University of Illinois 1994

Jennifer Gries Duncan, MD
Associate Professor of Pediatrics (primary appointment)
MD University of Chicago 1997
BS Vanderbilt University 1993

Jennifer M Dunn, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BS Duke University 1996
MD Washington Univ in St. Louis 2000

E

Adam C. Eaton, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BS University of Illinois 1992
MD Washington Univ in St. Louis 1997

Lori L Eberhart
Instructor in Clinical Pediatrics (primary appointment)

Robert W Edmonds, MD
Assistant Professor Emeritus of Clinical Pediatrics (primary appointment)
BA University of Missouri 1956
MD Washington Univ in St. Louis 1960

Nathalie El Ters, ME
Instructor in Pediatrics (primary appointment)
ME American University of Beirut 2010
BS American University of Beirut 2006

Alysa G. Ellis, MD
Assistant Professor of Pediatrics (primary appointment)
BA University of MO Kansas City 2004
MD University of MO Kansas City 2005

Alexis M Elward, MD, MPH
Professor of Pediatrics (primary appointment)
Vice Chair of Quality Improvement and Safety in Pediatrics
BA Loyola College 1988
MD University of Maryland 1994
MPH Saint Louis University 2006

Amanda R. Emke, MD
Assistant Professor of Pediatrics (primary appointment)
BS St Marys University 1998
MD University of MO Rolla 2002

Jay S Epstein, MS, MD
Professor of Clinical Pediatrics (primary appointment)
MS Emory University 1978
BA Emory University 1977
MD Emory University 1983

Diane M Eschmann, MD
Instructor in Clinical Pediatrics (primary appointment)
BA Saint Louis University 1989
MD University of Missouri 1993

Jennifer Ess
Instructor in Clinical Pediatrics (primary appointment)

Laura Ann Esswein, MD
Instructor in Clinical Pediatrics (primary appointment)
MD University of Missouri 1991
BA Washington Univ in St. Louis 1987

Michele Marie Estabrook, MD, MA
Professor of Pediatrics (primary appointment)
BA Bates College 1976
MD Case Western Reserve Univ 1983
MA Stanford University 1979

**F**

**Elliott H Farberman, MD**  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BA University of Rochester 1969  
MD Saint Louis University 1973  

**Richard A. Felkel Jr, MD**  
Instructor in Clinical Pediatrics (primary appointment)  
BS Saint Louis University 1993  
MD Saint Louis University 1997  

**Thomas W Ferkol, MD**  
Professor of Pediatrics (primary appointment)  
Alexis Hartmann MD Professor of Pediatrics  
Professor of Cell Biology and Physiology  
BA Case Western Reserve Univ 1981  
MD Ohio State University 1985  

**Isabel Fernandez-Holtzman**  
Instructor in Clinical Pediatrics (primary appointment)  

**Melanie Erin Fields, MD**  
Instructor in Pediatrics (primary appointment)  
BS Tulane University 2003  
MD Univ of Texas Med Sch Houston 2008  

**Mayte Ideliz Figueroa, MD**  
Associate Professor of Pediatrics (primary appointment)  
MD Mount Sinai School of Medicine 1992  

**Gregory K Finn, MD**  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 1992  
BA Hendrix College 1985  

**Emily Faith Fishman, MD**  
Instructor in Pediatrics (primary appointment)  
BS Youngstown St University 2005  
MD Northeast Ohio Medical U 2009  

**Douglas Stewart Fitzwater**  
Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)  

**Rebecca Hope Foster**  
Instructor in Clinical Pediatrics (primary appointment)  

**Myrto Frangos, MD**  
Instructor in Clinical Pediatrics (primary appointment)  
MD Saint Louis University 1985  
BA Washington Univ in St. Louis 1981  

**Sharon Glave Frazee**  
Adjunct Assistant Professor of Pediatrics (primary appointment)  

**Anthony Raymond French, MD, PHD, MS**  
Associate Professor of Pediatrics (primary appointment)  
Associate Professor of Biomedical Engineering  
Associate Professor of Pathology and Immunology  

MD University of Illinois 1997  
PHD University of Illinois 1995  
MS University of Illinois 1993  
BS University of Minnesota 1989  

**Stuart Howard Frier, MD**  
Associate Professor of Pediatrics (primary appointment)  
BS Brown University 1985  
MD Mount Sinai School of Medicine 1999  

**Stephanie Ann Fritz, MS, MD**  
Associate Professor of Pediatrics (primary appointment)  
BS Univ of Wisconsin Milwaukee 1997  
MS Washington Univ in St. Louis 2008  
MD Medical College of Wisconsin 2001  

**G**

**John P Galgani Jr, MD**  
Associate Professor of Clinical Pediatrics (primary appointment)  
MD Saint Louis University 1982  
BS Massachusetts College of Phar 1977  

**Maria Virginia Ganninger**  
Instructor in Clinical Pediatrics (primary appointment)  

**Tessa D Gardner, MD**  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MD Harvard University 1972  
BS Mass Inst of Technology (MIT) 1968  

**Caryn Garriga**  
Assistant Professor of Clinical Pediatrics (primary appointment)  

**Sarah Kathryn Garwood, MD**  
Assistant Professor of Pediatrics (primary appointment)  
BS Truman State University 1998  
MD University of MO St Louis 2002  

**Karen J Garzia**  
Instructor in Clinical Pediatrics (primary appointment)  

**Karen Marie Gauvain, MD**  
Associate Professor of Pediatrics (primary appointment)  
BS University of MO St Louis 1989  
MD Saint Louis University 1998  

**Avihu Gazit, MD**  
Associate Professor of Pediatrics (primary appointment)  
MD Technion - Israel Inst. of Tec 1997  

**Elliott Field Gellman, MD**  
Professor of Clinical Pediatrics (primary appointment)  
BA Iowa State University 1957  
MD University of MO Columbia 1961  

**John F Gleeson Jr, MD**  
Instructor in Pediatrics (primary appointment)  
MD Saint Louis University 2007  

**Joseph K Goldenberg, MD**  
Associate Professor of Clinical Pediatrics (primary appointment)
Matthew I Goldsmith, MD, MS  
Associate Professor of Pediatrics (primary appointment)  
Assistant Professor of Genetics  
MD University of Toronto 1995  
MS University of Toronto 1990  
BS University of Toronto 1987  

Misty Lynn Good, MD  
Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)  
MD American U of Carribean SchMed 2005  
BS University of Southern Calif 2001  

Gary M Goodman, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BS Wayne State University 1977  
MD University of Michigan 1981  

Jaya Goswami, MD, MA  
Instructor in Pediatrics (primary appointment)  
BS Calcutta University 2004  
MD SUNY DOWNSTATE MED BROOKLYN 2012  
MA State University of New York 2008  

Ronald M Grady, MA, MD  
Associate Professor of Pediatrics (primary appointment)  
MA Washington Univ in St. Louis 1989  
BA Princeton University 1984  
MD Washington Univ in St. Louis 1989  

Laquita A Graham, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BA Washington Univ in St. Louis 1991  
MD Saint Louis University 1996  

Andrea Granados, MD  
Instructor in Pediatrics (primary appointment)  
MD Universidad Nacional de Columb 2015  

Dorothy K. Grange, MD  
Professor of Pediatrics (primary appointment)  
MD University of Florida 1981  
BA Mount Holyoke College 1976  

Georgeann Keh-Teng Groh, MD  
Assistant Professor of Pediatrics (primary appointment)  
BS Rice University 2001  
MD Baylor College of Medicine 2006  

Jesse Brookshire Groh, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BA Rice University 2002  
MD Baylor University 2006  

Joseph Donald Gunn, MD  
Associate Professor of Pediatrics (primary appointment)  
BA Saint Louis University 1985  

MD University of Virginia 1989  
Santosh K Gupta, UNKNOWN, DC, UNKNOWN1  
Associate Professor of Clinical Pediatrics (primary appointment)  
UNKNOWN School Not Listed 1963  
DC University of London 1966  
UNKNOWN1 University of London 1970  

Allah B Haafiz  
Adjunct Associate Professor of Pediatrics (primary appointment)  

Michelle Lynn Hagene, MD  
Instructor in Pediatrics (primary appointment)  
BS Southern Illinois University 2010  
MD Southern Illinois University 2014  

Carmen Marie Halabi, MD, PHD  
Instructor in Pediatrics (primary appointment)  
MD University of Iowa 2009  
BS University of Iowa 2001  
PHD University of Iowa 2009  

Laura Evelyn Hall, MD  
Instructor in Pediatrics (primary appointment)  
MD University of Toledo 2010  
BS Allegheny College 2005  

Kim P Hamlin, MD  
Assistant Professor of Pediatrics (primary appointment)  
BS University of MO St Louis 1997  
MD University of MO St Louis 2001  

Roman E Hammes, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BA University of Iowa 1950  
MD University of Iowa 1954  

Melanie G Hampton, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MD University of Louisville 1981  
BS Georgetown College 1976  

Elinor F Hancock, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD Meharry Med College 1982  
BA Fisk University 1975  

Robin D Hanson, MD, PHD  
Instructor in Clinical Pediatrics (primary appointment)  
BA Johns Hopkins University 1985  
MD Washington Univ in St. Louis 1993  
PHD Washington Univ in St. Louis 1993  

Suzanne M Hanson, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BA Johns Hopkins University 1989  
MD Northwestern University 1993  

Michael Raymond Harris, MD, MS, PHD
Professor of Pediatrics (primary appointment)
MD Saint Louis University 1991
MS Saint Louis University 1976
BA Saint Louis University 1973
PHD Saint Louis University 1981

Elizabeth Avis Harrison, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Washington Univ in St. Louis 2006
BA Vanderbilt University 2002

Thomas J. Harrison Jr, MD
Instructor in Clinical Pediatrics (primary appointment)
BA Saint Louis University 1970
MD University of Missouri 1979

David E Hartenbach, MD
Associate Professor of Clinical Pediatrics (primary appointment)
MD University of Missouri 1987
BA Saint Louis University 1983

Mary E Hartman, M PH, MD
Assistant Professor of Pediatrics (primary appointment)
M PH University of Pittsburgh 2006
BA Mount Holyoke College 1994
MD University of Rochester 1999

John Edward Hartweger
Instructor in Clinical Pediatrics (primary appointment)

James Larry Harwell, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BA Washington Univ in St. Louis 1958
MD University of Missouri 1961

Robert J Hayashi, MD
Professor of Pediatrics (primary appointment)
BS Stanford University 1982
MD Washington Univ in St. Louis 1986

Ericka V. Hayes, MD
Associate Professor of Pediatrics (primary appointment)
BS Washington Univ in St. Louis 1994
MD Washington Univ in St. Louis 1998

Kara E Hennelly, MD
Assistant Professor of Pediatrics (primary appointment)
MD UMICCSOM 2015

Nathan Henninger
Instructor in Clinical Pediatrics (primary appointment)

Mary Jo Hernandez-Zipfel, MD
Instructor in Clinical Pediatrics (primary appointment)
BS University of North Carolina 1996
MD University of Florida 2001

Christina Kim Ahn Hickey, MD, MS
Instructor in Pediatrics (primary appointment)
MD Washington Univ in St. Louis 2009
MS Washington Univ in St. Louis 2009

BS Stanford University 2003

Tunde Hidvegi, PHD, MS
Associate Professor of Pediatrics (primary appointment)
PHD Eötvös Loránd University 1988
MS Eötvös Loránd University 1980

Laura Hill, MD
Instructor in Pediatrics (primary appointment)
BS Northwestern University 1998
MD University of Illinois Chicago 2002

Jennifer M Hinton
Instructor in Clinical Pediatrics (primary appointment)

Stanley P Hmiel, PhD, M PHIL, MD
Professor of Pediatrics (primary appointment)
BS Case Western Reserve Univ 1980
PHD Case Western Reserve Univ 1987
M PHIL Cambridge University 1981
MD Case Western Reserve Univ 1989

Sandra Jean Hodel
Instructor in Clinical Pediatrics (primary appointment)

Dee Hodge III, MD
Professor of Pediatrics (primary appointment)
MD University of CA San Francisco 1978
BA Occidental College 1974

Robert J Hoffman, MD
Professor of Clinical Pediatrics (primary appointment)
MD Saint Louis University 1976
BS University of Illinois 1972

Russell G. Hoffmann, PHD
Instructor in Clinical Pediatrics (primary appointment)
PHD University of Florida 1995

George Michael Hoganson, MD
Instructor in Pediatrics (primary appointment)
BA Loyola University Chicago 2001
MD Loyola University Chicago 2014

Nicholas Alan Holekamp, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Saint Louis University 1987
BA Dartmouth College 1982

Abby Solomon Hollander, MD
Professor of Pediatrics (primary appointment)
MD University of Cincinnati 1986
BA Cornell University 1982

Nancy E Holmes, MD
Professor of Clinical Pediatrics (primary appointment)
BA University of Kansas 1972
MD University of Missouri 1976

Lori Rachel Holtz, MD, MS
Assistant Professor of Pediatrics (primary appointment)
BS Tulane University 1999
MD Ohio State University 2003
MS Saint Louis University 2014

Rochelle LeAnn Holtzman, MS, PHD
Instructor in Clinical Pediatrics (primary appointment)
BS Loyola University 2003
MS University of Kansas 2006
PHD University of Kansas 2010

J. Joseph Horan, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Saint Louis University 1971
BA Wesleyan University 1967

Amjad Horani, MD
Assistant Professor of Pediatrics (primary appointment)
BS Hebrew University-Hadassah Med 2015
MD Hebrew University-Hadassah Med 2004

Caroline Clare Horner, MD
Associate Professor of Pediatrics (primary appointment)
BA Washington Univ in St. Louis 1993
MD Saint Louis University 2000

Jennifer A. Horst, MD
Instructor in Pediatrics (primary appointment)
BS University of Missouri Columbi 2003
MD University of Missouri Columbi 2007

Christine M Hrach, MD, BSW
Associate Professor of Pediatrics (primary appointment)
MD Saint Louis University 2002
BSW Saint Louis University 1998

Keith A Hruska, MD
Professor of Pediatrics (primary appointment)
Professor of Cell Biology and Physiology
Professor of Medicine
MD Creighton University 1969
BS Creighton University 1965

Paul W. Hruz, PhD, MD
Associate Professor of Pediatrics (primary appointment)
Associate Professor of Cell Biology and Physiology
MD Creighton University 1993
BS Marquette University 1987
MD Medical College Wisconsin 1994

Frederick Szujuei Huang, MD
Associate Professor of Pediatrics (primary appointment)
MD Baylor University 1994
BA Washington Univ in St. Louis 1990

Huiyan Huang, PhD
Instructor in Pediatrics (primary appointment)
BS Stony Brook University 2017

Anna Payton Huger
Instructor in Clinical Pediatrics (primary appointment)

Monica L Hulbert, MD
Associate Professor of Pediatrics (primary appointment)
MD Washington Univ in St. Louis 2000
BS Indiana University Bloomington 1996

David A Hunstad, MD
Associate Professor of Pediatrics (primary appointment)
Associate Professor of Molecular Microbiology
MD Washington Univ in St. Louis 1995
BA Carleton College 1991

Jane Alyce Hunt, MD
Instructor in Pediatrics (primary appointment)
BS Washington Univ in St. Louis 2014
MD Washington Univ in St. Louis 2014

Richard J Iken, MD
Instructor in Clinical Pediatrics (primary appointment)
BA Univ of Wisconsin Madison 1972
MD University of MO Columbia 1978

Carl S Ingber, MD
Instructor in Clinical Pediatrics (primary appointment)
BA University of Rochester 1968
MD Boston University 1972

Tracy Lynn Ivy, MD
Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)
MD University of Virginia 2009
BS Washington Univ in St. Louis 2004

David M Jaffe, MD
Adjunct Professor of Pediatrics (primary appointment)
BA Stanford University 1972
MD University of Chicago 1978

Patricia A Jamerson
Instructor in Clinical Pediatrics (primary appointment)

Patrick Y Jay, PhD, MD
Associate Professor of Pediatrics (primary appointment)
Associate Professor of Genetics
BS Stanford University 1987
PHD Washington Univ in St. Louis 1995
MD Washington Univ in St. Louis 1995

Yasangi Maina Jayasiha, MD
Instructor in Clinical Pediatrics (primary appointment)
MD University of CA San Francisco 2004
BA University of CA Los Angeles 1995

Shannon M. Joerger, MD
Assistant Professor of Pediatrics (primary appointment)
MD University of Missouri-Columbi 2007
Audrey Ragan Odom John, PhD, MD  
Associate Professor of Pediatrics (primary appointment)  
Associate Professor of Molecular Microbiology  
PhD Duke University 2002  
MD Duke University 2003  
BS Duke University 1996  

Denise R Johnson, MD  
Associate Professor of Clinical Pediatrics (primary appointment)  
BA Oakwood College 1979  
MD Loma Linda University 1984  

Joyce D Johnson, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MD Case Western Reserve Univ 1982  
BS Oberlin College 1977  

Mark C Johnson, MD  
Professor of Pediatrics (primary appointment)  
BA University of Rochester 1978  
MD Johns Hopkins University 1982  

Staci R. Johnson, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BS Truman State University 1997  
MD Southern Illinois University 2002  

William Lee Johnson, MD  
Associate Professor of Clinical Pediatrics (primary appointment)  
Adjunct Associate Professor of Pediatrics  
BS University of Missouri 1977  
MD University of Missouri 1981  

Angela Marie Jones, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD Universidad Nacional de Columb 1989  

Katherine McMullin Jones, MD  
Instructor in Pediatrics (primary appointment)  
BA Amherst College 2001  
MD Washington Univ in St. Louis 2007  

Larry A Jones, MBA, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MBA Washington Univ in St. Louis 1999  
BA Johns Hopkins University 1972  
MD Johns Hopkins University Med 1976  

Heather Robin Joyce, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of MO Columbia 2006  
BS University of MO Columbia 2002  

Samuel F. Julian, MD  
Assistant Professor of Pediatrics (primary appointment)  
MD University of Texas Southwest 2007  
BS University of Texas Austin 2001  

Erzsebet Jung, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD School Not Listed 1987  

Aadil Kausarali Kakajiwala, MBBS  
Instructor in Pediatrics (primary appointment)  
MBBS Topiwal National Med College 2008  

Thomas J Kasper  
Instructor in Clinical Pediatrics (primary appointment)  

Jenny E Kaufman, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 2004  
BS University of Michigan 1999  

Robert S Kebler, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD Saint Louis University 1984  
BS Muhlenberg College 1980  

Robert V Kellow  
Assistant Professor of Clinical Pediatrics (primary appointment)  

Brian J Kelly, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MD School Not Listed 1972  
BS School Not Listed 1964  

James Scott Kemp, MD  
Professor of Pediatrics (primary appointment)  
BS Creighton University 1972  
MD Creighton University 1976  

Michele E Kemp, MD  
Associate Professor of Clinical Pediatrics (primary appointment)  
BA Washington Univ in St. Louis 1977  
MD Washington Univ in St. Louis 1981  

Robert M Kennedy, MD  
Professor of Pediatrics (primary appointment)  
BS Georgia Tech 1975  
MD Medical College Georgia 1980  

Kent Leon Killian, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD Saint Louis University 1990  
BA Saint Louis University 1986  

Ellen Eunhae Kim, MD  
Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)  
MD Northwestern University 2000  
BS Northwestern University 1996  

Maleewan Kitcharoenakkul, MD  
Assistant Professor of Pediatrics (primary appointment)  
MD Mahidol University 2002  

Richard D Knight
Instructor in Clinical Pediatrics (primary appointment)

Shirley M Knight, MD  
Professor of Clinical Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 1980  
BA Dillard University 1976

Joel S Koenig, MD  
Professor of Clinical Pediatrics (primary appointment)  
BS Yale University 1978  
MD Vanderbilt University 1982

Kenneth A Koerner, MD  
Associate Professor of Clinical Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 1941  
BA Washington Univ in St. Louis 1935

Nikoleta S. Kolovos, MD  
Associate Professor of Pediatrics (primary appointment)  
MD University of Pittsburgh 1996  
BS University of Pittsburgh 1991

Katherine L Komendowski, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MD School Not Listed 1984  
BS Marymount College 1980

Jamie L Kondis, MD  
Assistant Professor of Pediatrics (primary appointment)  
BS Westminster College 2002  
MD Indiana University South Bend 2006

Alok K. Kothari, MD, BS1  
Instructor in Pediatrics (primary appointment)  
MD University of Illinois Chicago 2009  
BS1 Washington Univ in St. Louis 2003  
BS Washington Univ in St. Louis 2003

Beth Ann Kozel, MD, PHD  
Adjunct Assistant Professor of Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 2004  
PHD Washington Univ in St. Louis 2004  
BA Washington Univ in St. Louis 1996

James M Krafck  
Instructor in Clinical Pediatrics (primary appointment)

Lily Tadayyon Kregenow  
Instructor in Clinical Pediatrics (primary appointment)

Katherine L Kreussner, MD  
Professor of Clinical Pediatrics (primary appointment)  
MD Indiana University Bloomington 1978  
BS University of Pennsylvania 1973

Denise Kung, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MD Yale University 1991  
BA University of Missouri 1986

Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)  
BS University of Arizona 2008  
MD Washington Univ in St. Louis 2012  
BS University of Oxford 2007

L

Jennifer S Ladage, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BS Valparaiso University 1987  
MD Saint Louis University 1991

Stacie Sharon Laff, B MUS, MD  
Instructor in Clinical Pediatrics (primary appointment)  
B MUS Lawrence University 1989  
BA Lawrence University 1989  
MD School Not Listed 1993

Li-Ling Lai  
Instructor in Clinical Pediatrics (primary appointment)

Russell K Lawrence, MD  
Adjunct Instructor in Pediatrics (primary appointment)  
MD Baylor College of Medicine 2002  
BS University of Texas Austin 1998

Leland M Laycob, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of Missouri 1966  
BA Washington Univ in St. Louis 1964

Richard Lee Lazaroff, MD  
Professor of Clinical Pediatrics (primary appointment)  
MD Saint Louis University 1978  
BA Brown University 1974

Caroline Kim Lee, MD  
Associate Professor of Pediatrics (primary appointment)  
MD University of Virginia 1999  
BA Wellesley College 1995

Kathryn B Leonard, MD  
Instructor in Pediatrics (primary appointment)  
BS Saint Louis University 2006  
MD Saint Louis University 2010

Kenneth C Levy, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BA Emory University 1983  
MD University of Chicago 1988

Philip Thaler Levy, MD  
Adjunct Instructor in Pediatrics (primary appointment)  
MD Tel-Aviv University 2003  
BS Rutgers University 2001

Christopher Bradley Lewis, MD  
Instructor in Pediatrics (primary appointment)  
MD University of Texas 2017
Steve Ming-Che Liao, MD  
Assistant Professor of Pediatrics (primary appointment)  
BS University of CA Los Angeles 1999  
MD Saint Louis University 2003

Anna Lijowska, MD  
Assistant Professor of Pediatrics (primary appointment)  
MD Jagiellonian University 1988

John Chao-Chun Lin, MD  
Assistant Professor of Pediatrics (primary appointment)  
BS University of Virginia 1994  
MD University of Virginia 1998

Robert D Lins, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BA Washington Univ in St. Louis 1965  
MD University of Missouri 1969

Blake Allen Little, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BA University of MO Kansas City 1984  
MD University of MO Kansas City 1986

Mark E Lowe, PHD, MD  
Professor of Pediatrics (primary appointment)  
Vice Chair of Clinical Affairs and Strategic Planning in Pediatrics  
PHD University of Pennsylvania 1977  
BA Washington Univ in St. Louis 1973  
MD University of Miami 1984

Margaret Lozovatsky, MD  
Associate Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)  
MD University of Wisconsin 2006  
BA Marquette University 2001

Clifford James Luke, PHD  
Associate Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)  
BS University of Liverpool 1994  
PHD University of Surrey 1999

M

John C. Madden, MD  
Instructor in Clinical Pediatrics (primary appointment)  
BS Yale University 1994  
MD Washington Univ in St. Louis 2002

Jeffrey A Magee, PHD, MD  
Assistant Professor of Pediatrics (primary appointment)  
Assistant Professor of Genetics  
PHD Washington Univ in St. Louis 2005  
BS Univ of Wisconsin Madison 1997  
MD Washington Univ in St. Louis 2005

Nitin Mahajan, MS, PHD  
Instructor in Pediatrics (primary appointment)  
MS Himachal Pradesh Agricult Unv 2002  
PHD PGIMER 2009  
BS Government Medical College 2000

Jay Randolph Malone, MD, MS  
Instructor in Pediatrics (Pending Dean's Approval) (primary appointment)  
MD University of Oklahoma 2009  
MS Creighton University 2012  
BS University of Oklahoma 2005

Mark John Manary, MD  
Helene B. Roberson Professor of Pediatrics (primary appointment)  
BS Mass Inst of Technology (MIT) 1977  
MD Washington Univ in St. Louis 1982

Arushi Manga, MD  
Professor in Pediatrics (primary appointment)  
MD McGill University 2011  
BS Franklin & Marshall 2007

Bess Adkins Marshall, MD  
Professor of Pediatrics (primary appointment)  
Professor of Cell Biology and Physiology  
BS Vanderbilt University 1982  
MD Vanderbilt University 1986

Megan Spokes Martin, MD, BA1  
Instructor in Pediatrics (primary appointment)  
BA University of Notre Dame 2007  
MD University of Kansas 2012  
BA1 University of Notre Dame 2007

Shakila Mathew, DOST, DOST  
Instructor in Pediatrics (primary appointment)  
DOST Kirksville College of Osteopat 2009  
DOST Southern Illinois University 2012  
BS Missouri Univ of Science & Tec 2004

Patrice Mathews, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of Oklahoma 1988  
BA Trinity University 1984

Amit Mathur, MD, MBBS  
Professor of Pediatrics (primary appointment)  
MD SMS Medical College 1986  
MBBS Delhi University 1982  
BS Delhi University 1976

Marvin M Maurer Jr, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BA Washington Univ in St. Louis 1968  
MD Washington Univ in St. Louis 1972

Ariane E May, MD, M PH  
Associate Professor of Clinical Pediatrics (primary appointment)  
BA Tufts University 1983  
MD School Not Listed 1993
M PH Boston University 1992

Jina L McAtee
Assistant Professor of Clinical Pediatrics (primary appointment)

Megan McBride
Instructor in Clinical Pediatrics (primary appointment)

Mark E. McGranahan, MD
Instructor in Clinical Pediatrics (primary appointment)
BS Marquette University 1993
MD Saint Louis University 1997

Thomas Casey McKinney, MD
Professor of Clinical Pediatrics (primary appointment)
BA Illinois Wesleyan University 1976
MD Washington Univ in St. Louis 1980

William A McManus, MD
Assistant Professor of Pediatrics (primary appointment)
BA Carroll College 1980
MD Saint Louis University 1986

Christopher Clayton McPherson
Assistant Professor of Clinical Pediatrics (primary appointment)

Karyn Naomi Meltz Steinberg, PHD
Instructor in Pediatrics (primary appointment)
Instructor in Medicine
PHD Emory University 2009

P Aravindaksha Menon
Instructor in Clinical Pediatrics (primary appointment)

Sarah J. Mermelstein, MD
Instructor in Pediatrics (primary appointment)
MD Drexel University 2007
BA Indiana University Bloomington 2002

Elizabeth Sarah Messer, MD
Instructor in Pediatrics (primary appointment)
BS Washington Univ in St. Louis 2009
MD University of Illinois Chicago 2013

Mary Shaughnesssey Meyer, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
MD Saint Louis University 2003
BA Saint Louis University 1999

Peter Howard Michelson, MD, MS
Professor of Pediatrics (primary appointment)
MD Jefferson Medical College 1983
BS Bowdoin College 1978
MS University of Pittsburgh 2007

Jenny Lynn Miele, MD
Instructor in Clinical Pediatrics (primary appointment)
BS Valparaiso University 2001
MD University of Illinois at Chic 2005

Donna C Miller, MD
Instructor in Clinical Pediatrics (primary appointment)
BS Boston College 1978
MD University of Miami 1982

Suzanne Lee Miller, MD
Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)
BS University of Illinois 1974
MD University of Illinois 1978

Elena Minakova, MS, MD
Instructor in Pediatrics (primary appointment)
BS University of CA San Diego 2004
MS University of CA San Diego 2006
MD University of CA Davis 2011

Christopher Molitor
Instructor in Clinical Pediatrics (primary appointment)

Gail Lynn Moolsintong, MD
Instructor in Clinical Pediatrics (primary appointment)
MD University of MO Columbia 2001
BS University of MO Columbia 1997

Darlene A. Moore, MD
Instructor in Clinical Pediatrics (primary appointment)
MD University of Illinois 1978
BS Eastern Illinois University 1974

Mary R Morgan, MD
Instructor in Clinical Pediatrics (primary appointment)
BA Miami University 1984
MD Washington Univ in St. Louis 1990

Sharon Celeste Morley, MD, PHD
Assistant Professor of Pediatrics (primary appointment)
Assistant Professor of Pathology and Immunology
MD Harvard University 2002
PHD Harvard University 2002

Daniel R. Morra
Instructor in Clinical Pediatrics (primary appointment)

Lisa Mae Moscoso, MD, PHD
Associate Professor of Pediatrics (primary appointment)
Associate Dean for Student Affairs
BS Univ of Wisconsin Madison 1989
MD Washington Univ in St. Louis 1998
PHD Washington Univ in St. Louis 1998

Janet Gwen Mueller, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
MD Washington Univ in St. Louis 1992
BA Kansas State University 1985

Margaret M Mueller
Instructor in Clinical Pediatrics (primary appointment)

Steven Mueth
Instructor in Clinical Pediatrics (primary appointment)

Jonathan E. Mullin, MD
Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)
BS Washington Univ in St. Louis 2005
MD Case Western Reserve Univ 2010

Manohara Munimuddappa
Instructor in Clinical Pediatrics (primary appointment)

Kevin J Murphy, MD
Professor of Clinical Pediatrics (primary appointment)
BS Birmingham Southern College 1974
MD Saint Louis University 1978

Gian Marco Musarra, MD
Assistant Professor of Pediatrics (primary appointment)
BS University of Central Florida 1998
MD University of Miami 2003

John A Myers, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Southern Illinois University 1997
BA Washington Univ in St. Louis 1993

Venkata S. Nagireddi
Instructor in Clinical Pediatrics (primary appointment)

Tasnim A Najaf, MD
Associate Professor of Pediatrics (primary appointment)
MD Dow Medical College Karachi 1991

Ayesha Najib
Instructor in Clinical Pediatrics (primary appointment)

Alison C Nash, MD
Professor of Clinical Pediatrics (primary appointment)
BS Howard University 1977
MD Baylor University 1981

Lynn G Nelms
Instructor in Clinical Pediatrics (primary appointment)

April Erwin Nesin
Instructor in Clinical Pediatrics (primary appointment)

Tara Marie Neumayr, MD
Assistant Professor of Pediatrics (primary appointment)
MD Univ South Dakota Vermillion 2003
BA Duke University 1999

Jason Guy Newland, MD, MS
Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)
MD University of Oklahoma 2000
MS University of Cincinnati 2011

Khai Ngo, MD
Instructor in Clinical Pediatrics (primary appointment)
MD School Not Listed 1974

Ellen Margaret Nicastro

Instructor in Clinical Pediatrics (primary appointment)

Ramzi T Nicolas
Adjunct Associate Professor of Pediatrics (primary appointment)

David Craig Norman, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
MD School Not Listed 1992
BS University of Illinois 1988

Karen K Norton, MD
Associate Professor of Clinical Pediatrics (primary appointment)
MD Louisiana St University 1989
BS Loyola University 1985

Douglase Susumu Nozaki, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Saint Louis University 1996
BA University of CA San Diego 1991

Christian J Nunez, MD
Instructor in Pediatrics (primary appointment)
MD University of Illinois 2013
BA Washington Univ in St. Louis 2005

Kevin Sullivan O'Bryan, MD
Instructor in Pediatrics (primary appointment)
MD University of Michigan 2010

Shawn David O'Connor, MD
Instructor in Pediatrics (primary appointment)
MD Medical College Georgia 2010
BS University of Georgia 2006

Jerome H O'Neil Jr, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BA University of Missouri 1977
MD Saint Louis University 1981

Justin O Obioken, MBBS
Instructor in Clinical Pediatrics (primary appointment)
MBBS University of Lagos 1982

Andrea Cohron Orr
Instructor in Clinical Pediatrics (primary appointment)
BS University of Georgia 2007

Valerie Orrico
Instructor in Clinical Pediatrics (primary appointment)

Rachel C. Orscheln, MD
Assistant Professor of Pediatrics (primary appointment)
MD University of MO Columbia 1998
BS University of MO Columbia 1994

Cynthia M. Ortinau, MD
Assistant Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)
MD University of MO Kansas City 2005
Irma I Ortiz-Arroyo, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BS University of Puerto Rico 1981  
MD University of Puerto Rico 1985

Amir Mordechai Oryan  
Visiting Assistant Professor of Pediatrics (primary appointment)

Alison H Oswald, UNKNOWN  
Instructor in Clinical Pediatrics (primary appointment)  
UNKNOWN University of Cape Town 1982

Pamela B Padda, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of Illinois 1990  
BA University of Michigan 1986

Stephen C Pak, PHD  
Associate Professor of Pediatrics (Pending Executive Faculty Approval) (primary appointment)  
BS University of Sydney 1990  
BS University of Sydney 1990  
PHD University of New South Wales 1996

Jennifer Ann Panasci  
Instructor in Clinical Pediatrics (primary appointment)

Jose A Pineda Soto, MD  
Associate Professor of Pediatrics (primary appointment)  
Associate Professor of Neurology  
MD Francisco Marroquin University 1993  
BS Francisco Marroquin University 1988

Jessica E Pittman, MD, M PH  
Assistant Professor of Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 2004  
M PH University North Carolina 2009  
BS Oberlin College 1998

Daniel S Plax, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BA Brown University 1988  
MD Washington Univ in St. Louis 1993

Kathryn L. Plax, MD  
Ferring Family Chair Professor of Pediatrics (primary appointment)  
MD University of Rochester 1996  
BA Brown University 1989

John Samuel Plowden, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BS Washington & Lee 1979  
MD Medical College Georgia 1984

Santiago Boye Plurad Jr, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BA Washington Univ in St. Louis 1982
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emanuel Rashet, MD</td>
<td>Instructor in Clinical Pediatrics</td>
<td>BS University of Illinois 1958, MD Saint Louis University 1962</td>
</tr>
<tr>
<td>Sheryl S Ream, MD</td>
<td>Instructor in Clinical Pediatrics</td>
<td>BS University of Illinois 1958, MD Saint Louis University 1962</td>
</tr>
<tr>
<td>Neil F. Rebbe, MD, PHS</td>
<td>Instructor in Clinical Pediatrics</td>
<td>BS University of Illinois 1958, MD Saint Louis University 1962, PHS Washington Univ in St. Louis 1983</td>
</tr>
<tr>
<td>Catherine R Remus, MD, MSN</td>
<td>Assistant Professor of Clinical Pediatrics</td>
<td>BS University of Illinois 1958, MD Saint Louis University 1962, MSN Rush University 1978</td>
</tr>
<tr>
<td>Kenneth Eugene Remy, MD</td>
<td>Assistant Professor of Pediatrics</td>
<td>BS University of Illinois 1958, MD Saint Louis University 1962, MD Jefferson Medical College 2004</td>
</tr>
<tr>
<td>George H Rezabek, DOST</td>
<td>Instructor in Clinical Pediatrics</td>
<td>BS St Louis College of Pharmacy 1982, DOST School Not Listed 1988</td>
</tr>
<tr>
<td>Edward K Rhee, MD</td>
<td>Adjunct Assistant Professor of Pediatrics</td>
<td>BS University of Pennsylvania 1986, MD University of Pittsburgh 1993</td>
</tr>
<tr>
<td>Noor Riaz, MD</td>
<td>Instructor in Pediatrics</td>
<td>BS University of Missouri 1996</td>
</tr>
<tr>
<td>Katherine Rivera-Spoljaric, MS, MD</td>
<td>Associate Professor of Pediatrics</td>
<td>BS University of Puerto Rico 1997, MS Washington Univ in St. Louis 2008, MD University of Puerto Rico 2001</td>
</tr>
<tr>
<td>William L. Rives, MD, MS</td>
<td>Assistant Professor of Pediatrics</td>
<td>BS University of Missouri 1996</td>
</tr>
</tbody>
</table>
Instructor in Clinical Pediatrics (primary appointment)

Joshua Bennett Rubin, PHD, MD, MS
Professor of Pediatrics (primary appointment)
Professor of Neurology
Professor of Neuroscience
PHD Albert Einstein College of Med 1994
MD Albert Einstein College of Med 1994
MS Albert Einstein College of Med 1992
BS Yale University 1982

Christina M Ruby-Ziegler, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
MD Northwestern University Med 1994
BS Loyola University 1990

Martin D Rudloff, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BA Central Methodist College 1977
MD Washington Univ in St. Louis 1981

David Rudnick, PHD, MD
Associate Professor of Pediatrics (primary appointment)
Associate Professor of Developmental Biology
PHD Washington Univ in St. Louis 1994
MD Washington Univ in St. Louis 1994
BS University of Illinois 1987

Daniel G. Rudolph, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Saint Louis University 1992
BS Saint Louis University 1988

Karen Elizabeth Ruecker, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Washington Univ in St. Louis 1996
BA Rice University 1992

Diane Mary Rup, MD, MA
Instructor in Clinical Pediatrics (primary appointment)
MD Case Western Reserve Univ 1986
MA State University of New York 1979
BA State University of New York 1976

Lisa A Ryan
Instructor in Clinical Pediatrics (primary appointment)

S

Ahmed Sameh Said, PHD, MD
Instructor in Pediatrics (primary appointment)
PHD Ain Shams University 2009
MD Ain Shams University 2000

David Schnadower, M PH, MD
Associate Professor of Pediatrics (primary appointment)
M PH Columbia University 2005
MD National Autonomous U of Mex 1993

Gretchen A Sander, MD
Instructor in Clinical Pediatrics (primary appointment)
Laura Graves Schuettpelz, MD, PHD  
Assistant Professor of Pediatrics (primary appointment)  
Assistant Professor of Developmental Biology  
MD Northwestern University Med 2005  
PHD Northwestern University 2000

Alan L Schwartz, MD, PHD  
Alumni Endowed Professor of Pediatrics (primary appointment)  
Professor of Developmental Biology  
MD Case Western Reserve Univ 1976  
BA Case Western Reserve Univ 1970  
PHD Case Western Reserve Univ 1974

Colleen Erika Seematter  
Instructor in Clinical Pediatrics (primary appointment)

Martha Papay Sewall, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD University of Missouri 1985  
BA University of Missouri 1983

Purvi Shah, MD  
Assistant Professor of Pediatrics (primary appointment)  
BA Rice University 1996  
MD Baylor University 2000

Snehal Paresh Shah, MD  
Instructor in Pediatrics (primary appointment)  
MD Ross Univ School of Medicine 2010  
BA Boston College 2003

Shabana Shahanavaz, MD  
Associate Professor of Pediatrics (primary appointment)  
MD Kasturba Medical College 2002

Eleanor Maria Shaw, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
BA University of Missouri 1978  
MD University of Missouri 1983

Megan Elizabeth Shelton  
Instructor in Clinical Pediatrics (primary appointment)

Shalini Shenoy, MD, MBBS  
Professor of Pediatrics (primary appointment)  
MD Kasturba Medical College 1985  
MBBS Kasturba Medical College 1981  
BS M.G.R. Medical University 1981

Ross William Shepherd, MBBS, MD  
Adjunct Professor of Pediatrics (primary appointment)  
MBBS University of Queensland 1970  
MD University of Queensland 1979

Marwan Shiniawi, MD  
Professor of Pediatrics (primary appointment)  
MD Technion - Israel Inst. of Tec 1996  
BS Hebrew University 1989

Min-Yi Katherin Shiue, MD  
Instructor in Clinical Pediatrics (primary appointment)  
MD Washington Univ in St. Louis 1996  
BS Washington Univ in St. Louis 1992

Michael Shoykhet, MD, PHD  
Assistant Professor of Pediatrics (primary appointment)  
MD University of Pittsburgh 2005  
PHD University of Pittsburgh 2003  
BA Cornell University 1996

Jennifer N Silva, MD  
Associate Professor of Pediatrics (primary appointment)  
BA Union College New York 1997  
MD St. George's University 2002

Gary Arthur Silverman, MD, PHD  
Harriet B Spohrer Professor of Pediatrics (primary appointment)  
Head of the Department of Pediatrics  
Professor of Cell Biology and Physiology  
Professor of Genetics  
MD University of Chicago 1984  
PHD University of Chicago 1982  
BS Washington Jefferson College 1978

Connie Darlene Simmons  
Instructor in Clinical Pediatrics (primary appointment)

Paul S Simons, MD  
Associate Professor of Pediatrics (primary appointment)  
BA University of Texas Austin 1963  
MD Washington Univ in St. Louis 1967

Kathleen Elizabeth Simpson, MD  
Assistant Professor of Pediatrics (primary appointment)  
MD University of MO Kansas City 2006

Gautam K Singh, MBBS, MD  
Professor of Pediatrics (primary appointment)  
MBBS Ranchi University 1977  
MD Patna Medical College 1982

Madhavi Singhal, MD  
Instructor in Pediatrics (primary appointment)  
BS Indiana University Bloomington 2010  
MD Indiana University Bloomington 2014

Carl Jeffrey Sippel, PHD, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
PHD Saint Louis University 1980  
BA University of Missouri 1975  
MD Saint Louis University 1983

Kelsey Alayne Sisti, MD  
Instructor in Pediatrics (primary appointment)  
MD University of Arkansas 2009  
BS University of Alaska 2005

Harold B Sitrin, MD  
Assistant Professor of Clinical Pediatrics (primary appointment)  
MD Saint Louis University 1971  
BA University of Rochester 1966
Alan Joseph Skoultchi, MS, MD
Instructor in Clinical Pediatrics (primary appointment)
MS University of Pennsylvania 1990
MD U Medical-Dental Of New Jersey 1995
BS Duke University 1989

Carolyn Anne Delaney Smith, MD
Assistant Professor of Pediatrics (primary appointment)
MD Washington Univ in St. Louis 2000
BA Rice University 1996

Joshua C Smith
Instructor in Clinical Pediatrics (primary appointment)

Nareshkumar J Solanki, UNKNOWN, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
UNKNOWN University of Nairobi 1975
MD University of Nairobi 1975

Robert D Spewak, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Saint Louis University 1979
BA Drake University 1975

Craig A Spiegel, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BA Washington Univ in St. Louis 1978
MD Case Western Reserve Univ 1982

Philip Charles Spinella, MD
Professor of Pediatrics (primary appointment)
MD New York Medical College 1995
BS Tufts University 1991

Jennifer E. Sprague, MD, PHD
Assistant Professor of Pediatrics (primary appointment)
BS Indiana University Bloomington 2000
MD Washington Univ in St. Louis 2007
PHD Washington Univ in St. Louis 2007

Mythili Srinivasan, MD, PHD, MS
Associate Professor of Pediatrics (primary appointment)
MD Saint Louis University 1996
BS University of Madras 1981
PHD Saint Louis University 1991
MS Madurai Kamaraj University 1983

Danielle R St Leger
Instructor in Clinical Pediatrics (primary appointment)

Kristin Voellinger Stahl, MD
Instructor in Clinical Neurology (primary appointment)
MD University of Missouri 1996
BA Johns Hopkins University 1992

Sarah A Stanage, MD
Instructor in Pediatrics (primary appointment)
MD University of Louisville 2008
BS Washington Univ in St. Louis 2001

Ashley L. Steed, MD, PHD
Instructor in Pediatrics (primary appointment)
BS Duke University 2001
MD Washington Univ in St. Louis 2008
PHD Washington Univ in St. Louis 2008

Norman P Steele, MD
Instructor in Clinical Pediatrics (primary appointment)
BA Indiana University Bloomington 1968
MD Indiana University Bloomington 1972

Leena Lata Stemler, MD
Instructor in Pediatrics (primary appointment)
BA Brown University 2003

Randall S Sterkel, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BA Washington Univ in St. Louis 1983
MD New York Medical College 1987

Jeffrey R Stokes, MD
Professor of Pediatrics (Pending Executive Faculty Approval)
BS Kansas State University 1987
MD KANSAS U SCHOOL OF MEDICINE 1991

Janis Marie Stoll, MD
Assistant Professor of Pediatrics (primary appointment)
BA Washington Univ in St. Louis 2012
MD Eastern Virginia Med School 2004

Stephen I Stone, MD
Instructor in Pediatrics (primary appointment)
BS University of Illinois Chicago 2005
MD Rosalind Franklin University 2010

Gregory A Storch, MD
Ruth L. Siteman Professor of Pediatrics (primary appointment)
Professor of Medicine
Professor of Molecular Microbiology
MD New York University 1973
BA Harvard University 1969

Robert H Strashun, MD, MA
Associate Professor of Clinical Pediatrics (primary appointment)
MD New York University 1982
BA Yeshiva University 1978
MA Yeshiva University 1978

M. Anne Street, MA, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BS Defiance College 1968
MA University of Connecticut 1970
MD University of Illinois 1976
Judith M. Stucki-Simeon, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Univ of Wisconsin Madison 1987

Rosa M Suarez-Solar, MD
Instructor in Clinical Pediatrics (primary appointment)
MD School Not Listed 1991
BA University of Puerto Rico 1990

Lisa Suffian, MD
Instructor in Clinical Pediatrics (primary appointment)
BS University of MO Kansas City 1990
MD University of MO Kansas City 1996

Toshifumi Sugatani, PHD
Instructor in Pediatrics (primary appointment)
PHD Meiji University 2003

Stuart C Sweet, MD, PHD
W. Mckim O. Marriott Professor of Pediatrics (primary appointment)
MD University of Michigan 1990
BS University of Michigan 1981
PHD University of Michigan 1989

Amanda Sweetland
Instructor in Clinical Pediatrics (primary appointment)

Susan C. Sylvia
Instructor in Clinical Pediatrics (primary appointment)

Phillip Irwin Tarr, MD
Melvin E Carnahan Professor of Pediatrics (primary appointment)
Professor of Molecular Microbiology
BA Brown University 1975
MD Yale University 1980

Kristen A Terrill
Instructor in Clinical Pediatrics (primary appointment)

Donna T Thackrey, MD
Instructor in Clinical Pediatrics (primary appointment)
BS John Carroll University 1990
MD Wright State University 1994

Stephen Thierauf
Instructor in Clinical Pediatrics (primary appointment)

Michael D Thompson, MD, PHD
Instructor in Pediatrics (primary appointment)
MD University of Pittsburgh 2012
PHD University of Pittsburgh 2012
BS Washington Univ in St. Louis 2003

Mary A Tillman, MD
Professor of Clinical Pediatrics (primary appointment)
MD Howard University 1960

Robert W Tolan Jr., MA, MD
Instructor in Clinical Pediatrics (primary appointment)
BA Indiana University Bloomington 1982
MA Indiana University Bloomington 1983
MD Washington Univ in St. Louis 1987

Scott A. Trail, MD
Instructor in Clinical Pediatrics (primary appointment)
BA Saint Louis University 1985
MD University of MO Columbia 1990

Indi Trehan, MD, MPH
Associate Professor of Pediatrics (primary appointment)
BS University of CA Berkeley 1998
MD Northwestern University 2004
MPH Northwestern University 2004

Garland R Tschudin, MD
Instructor in Clinical Pediatrics (primary appointment)
MD University of Missouri 1975
BA University of Missouri 1971

Michael P Turmelle, MD
Associate Professor of Pediatrics (primary appointment)
MD Johns Hopkins University 1998
BA Bowdoin College 1994

Yumirle Padron Turmelle, AA, MD
Associate Professor of Pediatrics (primary appointment)
AA Miami Dade Community College 1993
BA University of Miami 1995
MD University of Florida 2000

April L Tyus
Instructor in Clinical Pediatrics (primary appointment)
BA Washington Univ in St. Louis 1995

Elizabeth C Utterson, MD
Assistant Professor of Pediatrics (primary appointment)
MD Creighton University 1998
BA University of Notre Dame 1994

Akshaya J Vachharajani, MD, MBBS
Professor of Pediatrics (primary appointment)
MD University of Bombay 1986
MBBS Topiwala National Med College 1984

George Van Hare, MD
Louis Larrick Ward Professor of Pediatrics (primary appointment)
MD University of Connecticut 1980
BS Bates College 1976

Laird Henry Vermont
Instructor in Clinical Pediatrics (primary appointment)

Zachary Andrew Vesoulis, MD
Instructor in Pediatrics (primary appointment)
BS Miami University 2005
MD Ohio State University 2009

W

Kathryn Kerr Wade, MD
Instructor in Clinical Pediatrics
BS Saint Louis University 2000
MD Loyola University Chicago 2005

Jean V Wagner
Instructor in Clinical Pediatrics (primary appointment)

Colleen M Wallace, MD
Assistant Professor of Pediatrics (primary appointment)
Director, Humanities Program
BS University of Notre Dame 1997
MD Washington Univ in St. Louis 2001

Jennifer Anne Wambach, MD
Assistant Professor of Pediatrics (primary appointment)
BS Vanderbilt University 1997
MD Vanderbilt University 2001

Barbara B. Warner, MS, MD
Professor of Pediatrics (primary appointment)
MS University of Massachusetts 1981
MD University of Cincinnati 1985
BS University of Dayton 1976

Michael S Watson, MS, PHD
Adjunct Professor of Pediatrics (primary appointment)
MS University of Alabama 1978
BS The American University 1974
PHD University of Alabama 1981

Benjamin David Weintraub
Instructor in Clinical Pediatrics (primary appointment)

Don Weiss, MS, MD
Instructor in Clinical Pediatrics (primary appointment)
BS Dickinson College 1979
MS Saint Louis University 1996
MD School Not Listed 1986

Valerie B. Welch, MD
Instructor in Clinical Pediatrics (primary appointment)
BA Baylor University 1994
MD University Texas San Antonio 1998

Jennifer Corinne Wessman, MD
Instructor in Pediatrics (primary appointment)
BS College of William and Mary 2001
MD Commonwealth College 2005

Andrew J White, MS, MD
James P Keating Professor of Pediatrics (primary appointment)
Vice Chair of Medical Education in Pediatrics
BA Brandeis University 1986
MS University of Chicago 1989
MD University of Texas Southwest 1994

Neil Harris White, MD
Professor of Pediatrics (primary appointment)
Professor of Medicine
BS State Univ of NY at Albany 1971
MD Albert Einstein College of Med 1975

Nicole Izetta White, MD
Instructor in Clinical Pediatrics (primary appointment)
BS University of MO Columbia 2000
MD Indiana State University 2004

Karen Whiteside
Instructor in Clinical Pediatrics (primary appointment)

Kristine G Williams, MD, MPH
Assistant Professor of Pediatrics (primary appointment)
MD Georgetown University 1994
BA Georgetown University 1989
MPH Saint Louis University 2001

Marcia Christine Willing, MD, MS, D SC
Professor of Pediatrics (primary appointment)
BS Goucher College 1973
MD University of Virginia 1982
MS University of Michigan 1976
D SC George Washington University 1981

David B Wilson, PHD, MD
Professor of Pediatrics (primary appointment)
Professor of Developmental Biology
PHD Washington Univ in St. Louis 1986
BA Kalamazoo College 1980
MD Washington Univ in St. Louis 1986

Loralee Jane Wold, MD
Instructor in Clinical Pediatrics (primary appointment)
MD Saint Louis University 1997
BA Saint Louis University 1993

Patricia Ann Wolff, MD
Professor of Clinical Pediatrics (primary appointment)
MD University of Minnesota 1972
BA University of Minnesota 1968

Mark Norman Woolley, MD
Instructor in Pediatrics (primary appointment)
BS Rockhurst College 2009
MD Saint Louis University 2013

Kathie R Wuellner, MD
Associate Professor of Clinical Pediatrics (primary appointment)
BS University of Illinois 1973
MD Saint Louis University 1978

Hayley Wurzel, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BS Brown University 1995
MD Washington Univ in St. Louis 1999

Kristine M Wylie, PHD
Assistant Professor of Pediatrics (primary appointment)
BA Southern Ill Univ Edwardsville 1996
PHD Saint Louis University 2009

Todd N Wylie
Assistant Professor of Pediatrics (primary appointment)
BS Southern Ill Univ Edwardsville 1995

X

Xunjun Xiao, MS, PHD
Assistant Professor of Pediatrics (PEFA) (primary appointment)
MS China Agriculture University 2001
PHD Virginia Tech 2005
BS China Agriculture University 1998

Y

Christina Marie Yadao
Instructor in Clinical Pediatrics (primary appointment)

Mona Yassin, MD
Instructor in Clinical Pediatrics (primary appointment)
MD School Not Listed 1979

Julia Catherine Young
Instructor in Clinical Pediatrics (primary appointment)

Cecilia H Yu, MD
Assistant Professor of Clinical Pediatrics (primary appointment)
BS Brown University 1987
MD University of Texas Southwest 1992

Z

Aurora Denise Zertuche-Sanchez
Instructor in Clinical Pediatrics (primary appointment)

Amy Christine Zimmermann, MD
Instructor in Clinical Pediatrics (primary appointment)
MD University of MO Columbia 2003
BS University of MO Columbia 1998

Bridget Bilyeu Zoeller, MD
Assistant Professor of Pediatrics (primary appointment)
BS University of Illinois 2003
MD Southern Illinois University 2007

Andrew C. Zuckerman
Instructor in Clinical Pediatrics (primary appointment)

Courses

M65 Peds 640 Pediatrics: Physicians, Patients & Society
Students are introduced to the unique nature of pediatrics as a subspecialty through a series of lectures and Team-Based Learning sessions designed to demonstrate the longitudinal nature of pediatrics through a variety of sessions addressing normal and pathologic aspects of human growth and development as well as the unique role of the physician in assessing and managing pediatric patients at all stages of development. Credit 27 units.

M65 Peds 760 Pediatric Clerkship
This six-week curriculum, which is a component of the 12-week Women's & Children's Health Clerkship, emphasizes pediatric pathophysiology and normal growth and development from birth through adolescence. Two weeks will be spent assessing newborns in the regular or special care nurseries at Barnes-Jewish or Christian NW Hospitals or spent seeing patients in the pediatric emergency department. Four weeks will be spent at St. Louis Children's Hospital on an inpatient service. Emphasis is on performing a pediatric history and physical examination and developing an appropriate differential diagnosis. Daily rounds with house staff and attending physicians as well as weekly case management conferences further this emphasis. A weekly core lecture series is also offered during this 12-week combined clerkship (Women’s & Children’s Health) with OB-GYN. Credit 231 units.

M65 Peds 801 General Pediatric Sub-Internship - St Louis Children's Hospital
This is the general pediatric sub-internship. The student will be assigned patients on one of two inpatient pediatric floor teams. They will follow patients from initial evaluation and for continuing care until discharge. Students work directly under the supervision of the senior resident and manage their own patients without co-coverage by an intern. Teaching rounds are conducted by the faculty. The elective will provide experience in the management of many pediatric medical conditions (variable depending on floor) and will include the care of patients with various diseases including pulmonary, infectious diseases, gastrointestinal, renal, neurological, endocrine, and rheumatologic issues. Additionally, patients with failure to thrive, asthmatic exacerbations, poisonings, PICU transfers and undiagnosed conditions may be seen.

M65 Peds 808 Pediatric Asthma and Allergy
In a predominantly outpatient setting, students will evaluate patients with a wide variety of allergic and immunologic disorders including asthma, allergic rhinitis, anaphylaxis, food allergy, atopic dermatitis, urticaria, angioedema and primary immunodeficiency. Rotation goals include: (1) the extension of history-taking skills to include environmental exposures, (2) the recognition of physical findings suggestive of allergic disease, (3) understanding the indications and interpretation of diagnostic testing including skin testing and assessment of pulmonary function, and (4) application of appropriate therapeutic strategies to these disorders. Weekly didactic conferences and inpatient consultations provide additional educational opportunities to the student.

M65 Peds 809 Pediatric Pulmonary Sub-Internship
On the 7 East Respiratory Unit, the sub-intern is an active member of a multidisciplinary care team, consisting of attending pulmonologist or allergist, advanced practice nurses, second-year pediatric residents, unit nurses, and other care providers and takes responsibility for children with acute and chronic lung diseases admitted to the unit. The student will be co-managed with a senior pediatric resident, and the sub-intern will be directly supervised by the pediatric residents and attending physician in the daily care of patients. The rotation is structured

26
to provide students with a primarily clinical experience to allow them to gain exposure to the breadth of lung diseases seen at St. Louis Children's Hospital. The volume of patients on the 7 East Respiratory Unit varies with the number of patients covered by the sub-intern at any time, and they will typically be responsible for the care of two to six patients at any given time. The student will be exposed to children with wide-ranging lung diseases and breathing disorders, such as asthma, cystic fibrosis, bronchopulmonary dysplasia, bronchiolitis, pneumonia, chronic respiratory insufficiency, and congenital lung anomalies during their clinical rotation. The student will also have the opportunity to participate in tests and procedures essential to the practice of pulmonary and allergy medicine, including pulmonary function studies, flexible fiberoptic bronchoscopy, and overnight polysomnography. Sub-interns do not have evening coverage responsibilities, and weekend responsibilities are limited to two days during the four-week block. They are strongly encouraged to attend departmental and divisional conferences.

M65 Peds 811 Pediatric Critical Care Medicine
This elective is designed to familiarize the student with the diagnosis and treatment of critical illness in infants and children. To this end, each student is made responsible for a small number of assigned cases under the direct supervision of pediatric residents, pediatric critical care fellows, and faculty. The teaching activities emphasize the understanding of pathophysiological processes that lead to respiratory, circulatory, and central nervous system dysfunction and their therapy in the developing subject. Students are expected to participate in all the daily activities of the Pediatric Intensive Care Unit at St. Louis Children's Hospital and be on occasional call after hours.

M65 Peds 813 Pediatric Cardiac Catheterization
This elective focuses on the interpretation of hemodynamic and angiographic data acquired in the cardiac catheterization laboratory.

M65 Peds 819 Pediatric Cardiology-Outpatient Service
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. Students will be exposed to the wide spectrum of pediatric cardiology on an outpatient basis. In addition to general cardiology clinics, several subspecialty clinics are also available, including heart failure/transplant, electrophysiology/inherited arrhythmias, pulmonary hypertension, William's syndrome, Down syndrome, and preventative cardiology clinic. Students will independently evaluate clinic patients referred for a variety of cardiac complaints, such as cardiac murmurs, chest pain, syncope, arrhythmia, as well as a wide variety of congenital cardiac lesions, and report their findings to the attending. Cardiac auscultation skills will be enhanced through auscultation of cardiac patients in a clinic environment. Students will learn basics of ECG and echocardiogram interpretation by reviewing studies performed during clinic with the attending. Clinics are held at St. Louis Children's Hospital and the Children's Specialty Care Center in West County. Students also have the option to participate in outreach clinics that occur on a monthly basis (locations include Cape Girardeau, Poplar Bluff, Rolla, Bonne Terre, and Columbia). Depending on interest, students may spend additional time in the echocardiography laboratory for more in-depth exposure to echocardiography. Participation in weekly surgical conference and daily cardiology educational conferences is encouraged.

M65 Peds 826 Genetics and Genomic Medicine
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. The goal of this senior elective is to facilitate the acquisition of clinical skills and knowledge in genetics and genomic medicine. The student will actively participate in the diagnosis and management of pediatric and adult patients with genetic disease in both the ambulatory and inpatient settings. Emphasis will be placed on application of the science of genetics to the bedside and will include a broad exposure to patients with biochemical, metabolic, structural and complex genetic diseases. Students will have an opportunity to visit clinical laboratories involved with diagnosis of genetic disorders, including the cytogenetics, molecular genetics and biochemical genetics laboratories. Students will be expected to participate in the weekly clinical case conference.

M65 Peds 827 Pediatric Hematology/Oncology Sub-Internship
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. Students will assume the responsibilities of a pediatric resident on the inpatient Hematology/Oncology service at St. Louis Children's Hospital. Credit 154 units.

M65 Peds 836 Pediatric Rheumatology
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. Opportunities are available to care for children with a variety of immunologic and rheumatologic disorders. Students will see patients in outpatient clinics and inpatient consultations. An in-depth approach to evaluating disorders of the immunologic system will be provided. Students will participate in evaluation of new patients with a variety of rheumatologic diseases including JRA, SLE, and scleroderma at both SLCH and Shriners Hospital clinics. Students may elect to participate in conferences and seminars.

M65 Peds 838 Pediatric Gastroenterology, Hepatology & Nutrition
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. The rotation in Pediatric Gastroenterology, Hepatology, and Nutrition provides broad exposure to specialized and common pediatric problems. Gastroenterology patients are seen in the outpatient suites and in the hospital. Students see outpatients with common pediatric complaints like abdominal pain, constipation, and poor growth. Additionally, students experience the ongoing outpatient care of patients with liver disease, inflammatory bowel disease, short-gut syndrome, celiac disease, and other rare disorders. The inpatient service provides experience in caring for patients with acute illnesses such as gastrointestinal bleeding, malnutrition, liver failure, complications of inflammatory bowel disease, and pancreatitis. Students participate in diagnostic and therapeutic endoscopic procedures. At weekly divisional conferences, attendings, fellows and students review pathology slides from current cases and discuss difficult patient problems and topics of interest.

M65 Peds 839 Antimicrobial Use, Resistance, and Stewardship
In 2013 the CDC estimated that 23,000 Americans die annually from antibiotic-resistant infections, and an additional 2 million are infected with one of these difficult-to-treat pathogens. The primary driver of this resistance is the use — and, more importantly, the misuse — of antibiotics. In 2015, the White
House published the National Action Plan for Combating Antibiotic Resistance Bacteria. This plan calls for improvement in antimicrobial use in human and agriculture medicine, better diagnostics, increased collaboration domestically and internationally, and accelerated development of new antibiotic agents. This fourth-year elective rotation will be focused on educating the student on the current state of domestic and global antibiotic resistance and the mechanisms by which health care systems are addressing this problem. The student will participate in the daily antimicrobial stewardship activities conducted at St. Louis Children's Hospital, attend weekly stewardship and clinical infectious diseases meetings both at the hospital and BJC system level, review antimicrobial use data, and participate in hands-on activities in the microbiology laboratory. At the end of this rotation, the student will be able to: 1. List the antimicrobials and the pathogens they effectively treat. 2. Analyze bacteria for genotypic and phenotypic resistance through standard and rapid microbiologic techniques. 3. Describe the antimicrobial stewardship interventions that can be implemented in the different health care settings. 4. List the social determinants that impact antimicrobial stewardship programs. 5. Explain how the microbiome and resistome are important in our efforts to improve antimicrobial use.

M65 Peds 840 Pediatric Infectious Diseases
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. This elective is designed to introduce students to the clinical aspects of infectious diseases in children. Students will consult on both inpatients and outpatients. Regular daily activities will include evaluation of new patients, ward rounds on inpatient consults, microbiology teaching rounds in the bacteriology and virology labs, and teaching rounds with the infectious diseases attending. Formal teaching sessions include a weekly pediatric infectious disease case conference, a weekly joint clinical conference with the adult infectious diseases group, a weekly pediatric infectious diseases research conference, and a monthly journal club.

M65 Peds 845 Pediatric Emergency Medicine
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. The goal of this elective is to provide the senior medical student with a broad introductory clinical experience in pediatric emergency medicine. Functioning as a sub-intern in the Emergency Unit of St. Louis Children’s Hospital, the student will have the opportunity to evaluate and manage patients with a wide variety of emergent and urgent medical and surgical problems. Examples include: respiratory distress, abdominal pain, lacerations, bone injuries, rashes, fever, etc. Students will work either a day shift (7:30 a.m.-3:00 p.m.) or an evening shift (3:00 p.m.-11:00 p.m.) in rotation. Daily teaching conferences are provided by the attending staff. A weekly meeting of the students and senior faculty will occur to review interesting cases. Also, attending staff and senior pediatric residents provide 24-hour on-site supervision. Each medical student will be asked to prepare a 20-minute presentation on a topic of their choosing.

M65 Peds 849 Pediatric Endocrinology and Diabetes
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. This elective is designed to include broad clinical experience in pediatric endocrinology and diabetes. The student will have an opportunity to evaluate both patients admitted to St. Louis Children's Hospital and patients referred for consultation in our three outpatient clinics each week. In addition to a divisional conference to review referred patients, several joint conferences with the adult Endocrinology and Diabetes Division (clinical rounds, journal club/research seminar, case conference) are held weekly.

M65 Peds 852 Clinical Pediatric Pulmonary Medicine
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. This elective provides an opportunity for students to be exposed to the full scope of respiratory diseases in infants and children. Pediatric referrals will be seen in both an inpatient and outpatient setting. Goals include: (1) to learn the importance of the physical exam using inspection, percussion and auscultation; (2) indications and interpretation of diagnostic tests, such as CXR, chest CT, VQ scan, pulmonary function testing, and bronchoscopy with biopsy and lavage; (3) therapeutic interventions and the use of bronchodilators, anti-inflammatory agents, et. al. Unique aspects of this rotation include a broad exposure to children with congenital lung defects, life-threatening asthma, cystic fibrosis, and end-stage cardiopulmonary diseases referred for transplantation. Weekly didactic sessions as well as weekly divisional patient care sections are an opportunity to further learn and practice presentation skills.

M65 Peds 861 Newborn Medicine
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. The goal of this course is to provide students with responsibility for caring for newborn infants who range from normal to acutely ill to chronically ill and for their families. The physiology of the transition from fetal to extraterine existence, the pathophysiology of specific diseases, and primary accountability of the student for patient management decisions and procedures will be emphasized. In addition, collaboration with nursing staff and other health care providers in decision-making (especially concerning the viability of individual infants) and family management will be regularly required. Students during each rotation will have the option to rotate through the Neonatal Intensive Care Unit at St. Louis Children’s Hospital and/or the labor and delivery services at Barnes-Jewish Hospital. Students assigned to the Neonatal Intensive Care Unit at St. Louis Children’s Hospital also will have the opportunity to become involved in the transport of acutely ill infants, while those on the Labor and Delivery Service will routinely be involved in normal newborn care and delivery room management. The student will be expected to rotate patient responsibilities every fourth night.

M65 Peds 875 Pediatric Renal Disease
Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. This course is designed to provide the student with a wide exposure to all aspects of pediatric renal disease and an opportunity to explore a desired aspect of the field in-depth. The student will be an integral part of the Renal Team and as such will see both inpatients and outpatients. Students will have an opportunity to follow the courses of patients with acute renal disease as well as those with more chronic problems and will help to plan the evaluation and therapeutic management of these patients. Discussions and rounds with the attending staff and fellows emphasize the relationship between clinical problems and the pathophysiology of the underlying disease. These informal teaching sessions are supplemented by more formal sessions. These include renal attending rounds, renal research rounds and grand rounds, which are conducted weekly in conjunction with the Renal Division of Barnes-Jewish Hospital. Renal biopsy material is reviewed with the renal pathologists. Attendance at the weekly
pediatric grand rounds and pediatric case conferences is encouraged. Opportunities in clinical and translational research projects will be discussed with interested students.

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### M65 Peds 876 Pediatric Lung Transplantation

Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. St. Louis Children's Hospital has the largest pediatric lung transplant program in North America. This unique clinical rotation will enable students to be exposed to the process of transplantation from referral and listing to the actual surgery and postoperative care. Both inpatient and twice-weekly outpatient clinics will be available for participation and learning. The use of diagnostic tests, such as flexible fiberoptic bronchoscopy with biopsies, the histopathology of infection and graft rejection, and the complexities of immunosuppression will all be explored. Weekly transplant meetings with our multidisciplinary team, as well as didactic/psychosocial and ethical and divisional care meetings will all be available. Our patient referral base is worldwide, and the primary cardiopulmonary disease states include: cystic fibrosis, pulmonary hypertension, complex congenital heart defects, and alveolar proteinosis.

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### M65 Peds 878 Clerkship In Rural Primary Care Pediatrics

Valid start weeks for two-week blocks are: Weeks 1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, 37, 39, 41 and 43. Valid start weeks for four-week blocks are: Weeks 1, 5, 9, 13, 17, 21, 25, 29, 33, 37 and 41. The clerkship in rural primary care pediatrics is designed to provide the student with first-hand experience in general pediatric practice in a rural community setting. Students will have the opportunity to see patients in a private office, participate in delivery room resuscitation, evaluate patients in the emergency department, and provide pediatric consultation to family practitioners, obstetricians and surgeons. The objective of this elective is to provide the student with the experience of serving as a general pediatrician providing comprehensive health services in a rural community. Students assume responsibility for ongoing care of patients and have opportunities to perform procedures. Two-week or four-week blocks are available. Credit 154 units.

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### M65 Peds 900 Research Elective-Pediatrics

Research opportunities may be available. If interested, please contact the Department of Pediatrics.