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 — in particular, human growth and development — to provide students with a foundation sufficiently comprehensive to 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://www.stlouischildrens.org), and the newborn services are at the Women and Infants Center (http://www.stlouischildrens.org/women-and-infants). St. Louis Children's Hospital is a facility with 300 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
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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
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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
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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 coli to 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
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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
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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.

Audrey R. Odom, MD, PhD
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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.

Paul A. Ruscetti, MD
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required for normal T and B cell motility.

Edward Mallinckrodt Department of Pediatrics
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Washington University in St. Louis
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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
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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
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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
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Research is focused on the molecular switches that regulate control genes during early embryonic development and differentiation.

Faculty

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Phillip Tarr, MD
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Visit our website for more information about our faculty (http://pediatrics.wustl.edu/directory) and their appointments.

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Professor of Pediatrics (primary appointment)
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Instructor in Clinical Pediatrics (primary appointment)  
MD University of MO Columbia 2003  
BS University of MO Columbia 1998

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 clinically oriented lectures and team-based learning sessions focusing on the unique physiology and pathophysiology of pediatric patients. These sessions demonstrate the longitudinal nature of pediatrics by 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 is a 6-week clerkship divided into two 2-week rotations and two 1-week rotations. This course emphasizes pediatric pathophysiology and normal growth and development from birth through adolescence. Two weeks are spent inpatient at St. Louis Children's Hospital in general pediatrics on 10.100 or 11.100. Two weeks are spent in pediatric acute care in one of the following: Acute Care at St. Louis Children's Hospital, Acute Care at Missouri Baptist Medical Center (community hospital) or Acute Care at Progress West Hospital (community hospital). One week is spent on newborn nursery in one of the following: assessment nursery at 6800 Parkview Tower or Missouri Baptist Medical Center nursery (community hospital). One week is spent in outpatient ambulatory clinic in one of the following: St. Louis Children's Hospital subspecialty clinics or Children's Specialty Care Center (CSCC) on Mason Road. 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 and bedside teaching further this emphasis. 
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 811 Pediatric Critical Care Medicine**

This elective is designed to familiarize the student with 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**

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**

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**

Students will assume the responsibilities of a pediatric resident on the inpatient Hematology/Oncology service at St. Louis Children's Hospital. Serving in a classic "sub-intern" role, the student will perform evaluations and manage, under the supervision of a senior resident, patients who span the scope of diseases in our discipline. Additional educational activities include: regularly held didactic lectures, participation in our weekly "tumor board" conference, reviewing peripheral smears and bone marrow aspirate specimens obtained from our patients.

**M65 Peds 836 Pediatric Rheumatology**

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, and Nutrition**

The rotation in Pediatric Gastroenterology, Hepatology, and Nutrition provides broad exposure to specialized and common pediatric gastrointestinal and hepatobiliary problems. Division patients are seen in the outpatient suites and in the hospital. Students evaluate outpatients with common pediatric complaints like abdominal pain, constipation, and poor growth. Additionally, students experience the outgoing 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 as well as seeing patients on the pediatric gastrointestinal consultation service. Students participate in diagnostic and therapeutic endoscopic procedures. At weekly divisional conferences, faculty, 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 two 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**

This elective is designed to introduce students to the clinical aspects of routine and complex infectious diseases in children ages birth to 18 years. Students will perform ID specialty consultations on both inpatients and outpatients. Regular daily activities will include evaluation of new patients, work rounds on inpatient consults, and teaching rounds with the ID fellow and attending. Students will attend the general pediatric ID clinic and the pediatric HIV clinic, one half-day each per week. Formal teaching includes HIV and ID Core Curriculum sessions, a weekly pediatric ID case conference, a weekly joint clinical conference with the adult ID group, a weekly pediatric ID research conference, and weekly clinical microbiology teaching rounds in the bacteriology and molecular diagnostics labs.

**M65 Peds 845 Pediatric Emergency Medicine**

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 846 Child Abuse Pediatrics**

The medical student will work with the Child Protection (CPP) team at St. Louis Children's Hospital, which consists of two Child Abuse Pediatrics attending physicians, one Child Abuse Pediatrics fellow, a Pediatric nurse practitioner, a clinic nurse, and three social workers. Pediatric residents also may be rotating with the team at the same time. The student will observe inpatient consults for physical and sexual abuse and outpatient clinic patients for physical and sexual abuse. The student may attend court cases and watch expert witness testimony by the CPP physicians/nurse practitioner. The student may see acute sexual assault cases conducted by the Sexual Assault nurse practitioners. The student will be asked to complete a short project on a topic related to child maltreatment and will present it to the team at the end of the rotation. The student will be given a list of readings/didactic activities to do during the rotation. The student will have daily (45 minute) lectures with one of the child abuse attending physicians on a variety of topics related to child maltreatment and will attend the Child Protection team meeting (one hour) every day. The student can also attend Pediatric Residency noon conference during this rotation.

**M65 Peds 849 Pediatric Endocrinology and Diabetes**

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**

This elective provides an excellent opportunity for students to be exposed to the full scope of respiratory diseases and sleep disorders in infants and children. Pediatric referrals will be seen in both an inpatient and outpatient setting.
Rotation goals for students include: 1. gain greater insights into the genetics, epidemiology, pathophysiology, and clinical presentations of lung diseases in children. 2. learn the importance of the physical examination using inspection, percussion, and auscultation. 3. understand indications and interpretation of diagnostic tests, such as chest imaging, blood gas measurements, polysomnography, pulmonary function testing, and bronchoscopy with biopsy and lavage. 4. learn to apply therapeutic interventions to common lung diseases. Unique aspects of this rotation include, a broad exposure to children with asthma, cystic fibrosis, ciliopathies, interstitial lung diseases, chronic lung disease of infancy, congenital lung malformations, and end-stage cardiopulmonary diseases referred for lung transplantation. Weekly didactic sessions, as well as divisional clinical conferences, provide opportunities for the trainee to develop his or her presentation skills.

M65 Peds 861 Newborn Medicine

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 extra-uterine 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 Neonatal Assessment Center/Labor and Delivery services at Parkview Tower, Barnes-Jewish Hospital. Students assigned to 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. Expectations during the rotation in the NICU (please check with your attending; schedules will vary): Arrive at 7 a.m. daily. On the first day of your rotation, arrive at the main desk and ask for your fellow to be paged. Examine assigned patients and write daily progress notes, discuss the plan with the supervising resident or fellow on the team. 8:00-8:30 a.m.: Attend NICU teaching rounds. Monday to Thursday. Location: West Conference Room. 8:30 to 8:45 a.m.: Radiology rounds, weekdays. Weekend schedules will vary. 8:45 to 10 a.m.: Patient care rounds, daily (please check expectations for presentations with your attending; duration and expectations will vary). 10:00-10:30 a.m.: Complete Total Parenteral Nutrition prescriptions (with help from fellow or pharmacist). 12 noon: All resident conference in SLCH auditorium. 1:00 -2:00 p.m.: Division conferences (Case Conferences, M and M and core lectures), Wednesdays only. Location: 5S28. 4:00 p.m.: Daily sign out rounds. 5:00 p.m.: On-call person stays and shadows the PL1 or PL2 on call. Post-call: Leave at noon, next day. Fridays: No teaching. Patient Care Rounds begin at 7:30 a.m. Grand Rounds at 9:15 a.m. Patient care will take precedence over attendance at conferences. A talk at the 7:45 a.m. conference is expected from students at least once during the rotation.

M65 Peds 875 Pediatric Renal Disease

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.

M65 Peds 876 Pediatric Lung Transplantation

St. Louis Children’s Hospital has the largest pediatric lung transplantation experience 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 post-operative care. Both inpatient and twice weekly outpatient clinics will be available for participation and learning. The use of diagnostic tests, including flexible fiberoptic bronchoscopy with biopsies and broncoalveolar lavage, histopathology of infection and graft rejection, and the complexities of immunosuppression will all be explored. Weekly multidisciplinary meetings with our team, as well as didactic, psychosocial, and ethical meetings will be available. Our patient referral base is worldwide, and includes infants and children with cystic fibrosis, pulmonary hypertension, complex congenital heart defects, surfactant protein defects and alveolar proteinosis.

M65 Peds 878 Clerkship In Rural Primary Care Pediatrics

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. Credit 154 units.

M65 Peds 900 Research Elective-Pediatrics

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