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

Although 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 (http://bulletin.wustl.edu/medicine/degrees) section of this Bulletin.

Research

M65 Pediatrics

Ana Maria Arbelaez, MD
Northwest Tower, 10th Floor
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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
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Using candidate gene sequencing, exome sequencing, whole genome sequencing, and computational prediction and filtering strategies for the 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 the risk of neonatal respiratory distress syndrome.

Vikas Dharnidharka, MD, MPH
Northwest Tower, 10th Floor
Phone: 314-286-1574

The focus of this lab is on clinical and translational research in childhood kidney disease. Our group is involved in several different types of clinical and translational research, including multicenter clinical intervention trials to improve teen adherence with transplant medications and to test new medications in children on dialysis; translational biomarker studies in transplant acute and chronic rejection and genomic studies or post-transplant lymphoproliferative disease; and large transplant database epidemiological analyses for associations of immunosuppressive regimens with efficacy and morbidity balance.

Allan Doctor, MD
McDonnell Pediatric Research Building, 5th Floor
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Our focus is on the role of erythrocytes in pathologic vascular signaling. We employ several novel experimental platforms to pursue a range of basic, translational, and clinical studies exploring the role of erythrocytes in context-responsive metabolism of vasoactive effectors in flowing blood; the molecular control of antioxidant defense in erythrocytes; the role of acquired injury to normal erythrocytes in the pathophysiology of acute lung injury and multiple organ failure syndrome; and 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 to cell culture to isolated organ to whole mouse to studies in humans.

Todd Druley, MD, PhD
4444 Forest Park Avenue, Room 6203
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The Druley lab focuses on translational genomic research in pediatric oncology. We aim 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  
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Our goal is to understand 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 as well as tissue-specific mitochondrial function. This elective is for students interested in research in any of these areas.

Stephanie A. Fritz, MD, MSCI  
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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 as well as interventions to interrupt the transmission of CA-MRSA and to 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 the spectrum of disease states. Our goal is to develop novel approaches for the prevention of CA-MRSA infections.

Carmen Halabi, MD, PhD  
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Our focus is on the extracellular matrix in vascular development and disease. Specifically, we study the 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 to learn about the normal function of these proteins but also to identify potential novel therapeutic targets.

Robert J. Hayashi, MD  
St. Louis Children’s Hospital, Suite 9S  
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Our clinical research interests include stem cell transplantation and its complications, including post-transplant lymphoproliferative disease and the long-term side effects of therapy.

Keith A. Hruska, MD  
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The research in the laboratory focuses on chronic kidney disease and its complications of the chronic kidney disease mineral bone disorder syndrome, which 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  
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Our 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  
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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 the 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
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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.

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

Our focus is on antimalarial therapies and diagnostics. Severe malaria due to infection with Plasmodium falciparum kills nearly a million children annually. Our 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
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Our main area of study is the 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 the implementation of best clinical practices. We utilize high-resolution physiological monitoring, the 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

Our investigative efforts are aimed at understanding the biology of cell surface receptors, including the biochemical and molecular dissection of the mechanisms responsible for receptor-mediated endocytosis of blood coagulation proteins, and the regulation of intracellular protein turnover.

Shalini Shenoy, MD
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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; and Richard S. Buller, PhD
St. Louis Children's Hospital, Suite 2N52
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Our focus is the study of 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 the 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 the development of a rapid diagnostic test for enterovirus D68. 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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Our work involves research in the areas of 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, ulcerative colitis), infections of the gastrointestinal tract (diarrhea), acute liver failure, Hirschsprung disease, diarrhea, gut microbiome, aflatoxin injury to the liver and Bunting, 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
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Our work involves patient-oriented research in the management of diabetes in children. Arrangements can be made for involvement in or the development of projects aimed at improving outcomes of or the prevention of diabetes mellitus and its complications.

David B. Wilson, MD, PhD
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Our research is focused on the molecular switches that regulate control genes during early embryonic development and differentiation.

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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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<thead>
<tr>
<th>Name</th>
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<th>Institution</th>
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<tr>
<td>Steven Mueth, MD</td>
<td>Instructor in Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Jonathan E. Mullin, MD</td>
<td>Assistant Professor of Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Maria Ganninger Mura, MD</td>
<td>Instructor in Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
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<tr>
<td>Kevin J Murphy, MD</td>
<td>Professor of Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Gian Marco Musarra, MD</td>
<td>Assistant Professor of Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>John A Myers, MD</td>
<td>Instructor in Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Venkata S. Nagireddi</td>
<td>Instructor in Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Tasnim A Najaf, MD</td>
<td>Associate Professor of Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Alison C Nash, MD</td>
<td>Professor of Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Ameera Farhat Nauman</td>
<td>Assistant Professor of Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Lynn G Neils</td>
<td>Instructor in Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Tara Marie Neumayr, MD</td>
<td>Assistant Professor of Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Jason Guy Newland, MD, MS</td>
<td>Professor of Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
<tr>
<td>Ellen Margaret Nicastro</td>
<td>Instructor in Clinical Pediatrics (primary appointment)</td>
<td>BS Washington Univ in St. Louis 2005</td>
<td></td>
</tr>
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</table>
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Julie Margaret Nogee, MD
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MD Washington Univ in St. Louis 1967  
BA University of Texas Austin 1963  

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MBBS Ranchi University 1977  
MD Patna Medical College 1982  

Kelsey Alayne Sisti, MD  
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MD University of Arkansas 2009  
BS University of Alaska 2005  

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BS Duke University 1989  
MD U Medical-Dental Of New Jersey 1995  
MS University of Pennsylvania 1990  

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BS University of Illinois 2005  
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MD University of Nairobi 1975  
UNKNOWN University of Nairobi 1975  

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BA Drake University 1975  
MD Saint Louis University 1979  

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BS Tufts University 1991  
MD New York Medical College 1995  

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PHD Washington Univ in St. Louis 2007  
MD Washington Univ in St. Louis 2007  
BS Indiana University Bloomington 2000  

Mythili Srinivasan, MS, MD, PHD  
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MS Madurai Kamaraj University 1983  
BS University of Madras 1981  
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BA Harvard University 1969  
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BA Yeshiva University 1978

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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 that focus 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 two-week rotations and two one-week rotations. This course emphasizes pediatric pathophysiology and normal growth and development from birth through adolescence. Two weeks are spent with inpatients 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 settings: 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 in a newborn nursery in one of the following settings: the assessment nursery at 6800 Parkview Tower or the Missouri Baptist Medical Center nursery (community hospital). One week is spent in an outpatient ambulatory clinic in one of the following settings: 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 Pediatrics Subinternship
This is the general pediatric subinternship. 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 disease, gastrointestinal, renal, neurological, endocrine, and rheumatologic issues. In addition, patients with failure to gain appropriate weight, status asthmaticus, ingestions, fever of unknown origin, 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 Subinternship
On the 7100 Respiratory Unit, the subintern is an active member of a multidisciplinary care team, which consists of an attending pulmonologist or allergist, advanced practice nurses, second-year pediatric residents, unit nurses, and other care providers. The subintern takes responsibility for children with acute and chronic lung diseases admitted to the unit. The student will be co-managed and directly supervised by senior pediatric residents and attending physicians in the daily care of patients. The rotation is structured to provide students with a clinical experience that allows them to gain exposure to the breadth of lung diseases seen at St. Louis Children's Hospital. The volume of patients on the 7100 Respiratory Unit and the number covered by the subintern varies. The subintern will typically be responsible for the care of two to six patients at any given time. During the clinical rotation, 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. 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 bronchoscopy, and overnight polysomnography. Subinterns 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 Subinternship
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 pathophysiologic 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 will focus 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, cardiac neurodevelopmental, 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, and a wide variety of congenital cardiac lesions, and they will 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 the 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, including fetal echocardiography. Participation in weekly surgical conferences 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 Subinternship
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 subintern 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, and 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 autoimmune disease and disorders of the immune system will be provided. Students will participate in the evaluation of new and return patients with a variety of rheumatologic diseases, including juvenile idiopathic arthritis (JIA), systemic lupus erythematosus (SLE), juvenile dermatomyositis (JDM), autoinflammatory/periodic fever syndromes, and scleroderma. The student will also learn the approach to patients with positive autoantibodies, joint pain, muscle pain, and other common complaints that a general pediatrician may encounter. Locations include SLCH inpatient/outpatient, SLCH Specialty Care Center clinics, and Shriners Hospital clinics. Students will have the opportunity to attend multiple conferences.

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. In addition, 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 gastrointestional bleeding, malnutrition, liver failure, complications of inflammatory bowel disease, and pancreatitis as well as in 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 that 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-Resistant 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 healthcare 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 do the following: (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 healthcare settings; (4) list the social determinants that impact antimicrobial stewardship programs; and (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 from birth to the age of 18 years. Students will perform infectious disease (ID) specialty consultations on both inpatients and outpatients. Regular daily activities will include the 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 for one half-day each per week. Formal teaching includes HIV
clinical presentations of lung diseases in children; (2) learning insights into the genetics, epidemiology, pathophysiology, and goals for students include the following: (1) gaining greater sleep disorders in infants and children. Pediatric referrals will This elective provides an excellent opportunity for students 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, and so on. 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 845 Pediatric Emergency Medicine Subinternship
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 subintern in the Emergency Unit of St. Louis Children's Hospital, the student will have the opportunity to evaluate and manage patients with the adult Endocrinology and Diabetes Division (clinical 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 a weekly clinical microbiology teaching rounds in the bacteriology and molecular diagnostics labs.

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 850 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 the following: (1) gaining greater insights into the genetics, epidemiology, pathophysiology, and clinical presentations of lung diseases in children; (2) learning the importance of the physical examination using inspection, percussion, and auscultation; (3) understanding the indications and interpretation of imaging and function tests, such as chest imaging, blood gas measurements, polysomnography, pulmonary function testing, and bronchoscopy with biopsy and lavage; and (4) learning 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 trainees to develop their presentation skills.

M65 Peds 861 Newborn Medicine
The goal of this course is to allow students the opportunity to assume primary responsibility for cases of neonates in the Neonatal Intensive Care Unit (NICU) under the direct supervision of first- or second-year residents as well as fellows and attendings. Students will participate in the formulation of diagnostic and treatment plans, coordination of care, and communication with families. Throughout the rotation, the students will broaden their understanding of pathophysiology as it relates to the transition from fetal to neonatal life and in common disease states affecting neonates. There will be emphasis on improving clinical problem-solving skills as well as communication both within the team and with ancillary staff and families. Students during each rotation will have the option to rotate through the NICU at St. Louis Children's Hospital and/or the Neonatal Assessment Center/Labor and Delivery services at Parkview Tower at Barnes-Jewish Hospital. Students assigned to the Labor and Delivery Service will routinely be involved in normal newborn care and delivery room management.

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 as well, 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 postoperative care. Both inpatient and twice-weekly outpatient clinics will be available for participation and learning. The use of diagnostic tests will be explored, including flexible fiberoptic bronchoscopy with biopsies and bronchoalveolar
lavage, histopathology of infection and graft rejection, and the complexities of immunosuppression. 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 the 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.