



The Section on Critical Care

# CRITICAL CARE NEWS

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## 1998 Business Meeting Section on Critical Care

### Future of Pediatric Education II

Dr. Yeh began the meeting with a review of events at the AAP Executive Committee Meeting. At that meeting, the preliminary statement on the Future of Pediatric Education II was discussed.

This is the report of a wide-ranging task force on pediatric education. David Jardine and Curt Steinhart represented the Section on Critical Care.

The preliminary statement recommends that sub-specialist education should lead to a fellowship, and that graduating sub-specialists

should be primarily based in academic centers. The document partially contradicts itself when a later comment states that there is a role in large pediatric groups for individuals with special interests in certain sub-specialty areas.

The commentary in the document referred to such individuals as "hobbyists". Dr. Outwater pointed out that hobbyists would not have an important role in critical care.

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### Distinguished Career Award- Dr. George Gregory

Dr. Goldstein introduced Dr. George Gregory of the University of California-San Francisco as recipient of the 1998 Distinguished Career Award. Dr. Gregory invented CPAP for respiratory distress syndrome. Dr. Gregory's inspiration came from a paper showing that grunting improves blood gases in distressed infants. His introduction of CPAP vastly increased the effectiveness of mechanical ventilation for respiratory distress syndrome. Dr. Gregory is also credited with developing the standard of treatment for meconium aspiration syndrome that we use today. Dr. Gregory has been a pioneer the respiratory and cardiovascular physiology of fetuses, neonates and infants. He founded the Pediatric Anesthesiology Program at UCSF in the 1960's. He still attends at UCSF.

Dr. Gregory's address discussed parochialism in Intensive Care Units. ❖

## **1998 Business Meeting (Continued from Page 1)**

The entire FOPE II document is on the World Wide Web at [www.aap.org/profred/prelrec.htm](http://www.aap.org/profred/prelrec.htm). Dr. Yeh encourages members to comment to him and to the Academy.

## **Reimbursement Issues**

Harold Amer suggested profiling practices and reimbursement recurrently over time. He proposed an anonymous survey developed with an epidemiologist to be distributed electronically to members. The survey would track how we work, our workload, our value and our compensation. This may lead to benchmark information on salaries and job descriptions. This information may be useful in negotiations.

The impression of many attendees is that Pediatric Intensivists have worth that is not measured by their billing or their reimbursement. Mary Lieh-Lai reported that NACHRI has a task force determining what an Intensivist was worth. It may still be important for the section to accumulate its own data.

Dr. Yeh discussed recommendations that the section on Perinatology made for the current revision of CPT. The Perinatal Section recommended that neonates be defined as infants less than 44 weeks post-conception. This would limit the use of the neonatal daily care codes, 99295 through 99297, to such infants. After that age, practitioners would need to bill using critical care or basic evaluation and management codes.

This new definition of a neonate may have an adverse impact on the billing practices of many pediatric intensivists. Currently, the neonatal daily codes are commonly used by intensivists performing care of young infants. Some intensivists use these codes to bill for the care of infants up to one year of age.

To ensure that the Section maintains its voice in reimbursement matters, Dr. Yeh reassembled an

RBRVS subsection. Stephanie Storgion will chair this group. Volunteers were enlisted from attendees at the 1998 Business Meeting.

## **1999 Section Meeting**

Dr. Yeh introduced Dr. Niranjana Kissoon as the program Chair for the upcoming meeting. Dr. Kissoon is recruiting volunteers for abstract reviewers and session moderators.

The Critical Care portion of the 1999 AAP meeting will include two joint sessions of one half day each. These sessions are with the Section on Home Health and the Section on Cardiology.

The ability of the Section to garner funds for the Young Investigator Award has been limited. Instead of a commercial sponsor, the Section obtained a \$10,000.00 grant from the Friends of Children fund for the current year. The Section itself will likely need to fund a grant in the future.

## **Educational Issues**

Dr. Goldstein proposed an interactive casebook CD-ROM on Pediatric Critical Care. The Oregon Health Sciences University has developed one on general Pediatrics, and that publication would be our model. The CD-ROM would be distributed as a Section Member benefit. To fund this exercise, Dr. Yeh proposed allocating \$10,000 from the Section, \$10,000 from the American Academy of Pediatrics and \$10,000 from the Oregon Health Sciences University.

## **Policy Statements**

Dr. Outwater announced that AAP Sections are now able to issue statements as committees always could.

**CALL FOR NOMINATIONS**  
**The 1999 Annual Distinguished**  
**Career Award**

We will be awarding the 5<sup>th</sup> Annual Distinguished Career Award in Pediatric Critical Care next Fall at the 1999 AAP Meeting. Please e-mail Drs. Brahm Goldstein ([bgoldsteb@ohsu.edu](mailto:bgoldsteb@ohsu.edu)) or Tim Yeh ([timbobyeh@aol.com](mailto:timbobyeh@aol.com)) with your nominations. Remember that the criteria should be based on a distinguished history of contribution to pediatric critical care medicine with significant achievements in the areas of clinical care, education and research.

This award carries with it a plaque honoring the recipient and an honorarium of \$1,000. Past recipients were Drs. I. David Todres, John Downes, Peter Holbrook and George Gregory.

**Submissions to Critical Care News**

Members of the Critical Care Section may submit announcements and articles to Critical Care News. Priority will go to articles of current interest to pediatric critical care practitioners.

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