Greetings! With the ATS International Conference in Seattle advancing toward us, I write to update you on activities over the past year and highlight some items to be discussed at the Pediatric Assembly meeting (see attached agenda). The Pediatric Taskforce (chaired by Jules Allen) completed their report that was submitted to the ATS Board of Directors at the May 2002 meeting. This report covered a wide range of issues that impact on the Pediatric Assembly (see report on Pediatric page of the ATS website at http://www.thoracic.org/assemblies/peds/pedstaskforce.pdf). This Taskforce Report has been very useful for educating the ATS Board and several ATS committees about the special issues pertinent to Pediatrics. The Board encouraged us to proceed in a systematic way addressing the key issues raised in the Taskforce Report and recommended that we address research issues first. In response to this recommendation, Larry Lands submitted an ATS Assembly Project to fund conferences addressing research priorities in pediatrics. At the Pediatric Assembly meeting, he will report on the progress of that initiative. The ATS leadership has demonstrated interest and support for the Pediatric Assembly over the past two years. The present and past President frequently asked for my input. They were receptive to my recommendations for pediatric representation on several committees and asked that I recommend potential candidates for various positions. This is a good time to further expand the visibility of pediatric specialists within the ATS. Despite the costs of separating from ALA, the ATS is gradually expanding its financial resources. Financial support for Assembly activities and projects has been limited, but should be better in the next year or two. I encourage you to submit proposal for Assembly projects this summer. At the end of the Assembly meeting, Susanna McColley will take over as Chair of the Pediatric Assembly. She will need your help. Please let Susanna know if you are interested in assuming a more active role in ATS and identify your specific interests. I have enjoyed working with you over the past two years as Chair of this Assembly.

Message from Planning Committee Chair
Larry C. Lands

Assembly Projects

One of the best ways to get action on priorities for the Assembly is through Assembly Projects. Assembly projects are supported through competitive grants within the ATS. It is an opportunity to develop a service or a statement that is important for both the ATS and the pediatric population we serve. A few examples of recently completed or current projects may best illustrate the kinds

(Continued on page 2)
of project supported. You can read about current projects by going to the Assemblies Projects site on the ATS website.

There are several projects dealing with patient care; this could be aspects that are specific or different for children (e.g., pulmonary function testing), reviews of disorders ones that begin in childhood but have long term consequences (e.g., BPD), or management issues (muscular dystrophy). The longest running Pediatric Assembly project is the Working Group on Infant Lung testing. This has been an international collaboration that has resulted in many documents pertaining to standards, equipment, methodologies etc. This has had a significant impact on the way we practice and the equipment we have available today. A recently completed project resulted in a soon to be published State of the Art review of BPD. There is a project concerned with home monitoring, one with respiratory care of patients with muscular dystrophy, and one reviewing airway clearance techniques.

Another type of project deals with academic and research aspects that are important to the field of Pediatric Respiratory Medicine. One example is the current project leading to the development of an Assembly statement on Research Priorities in Pediatric Respiratory Medicine, which will be discussed at this year’s Assembly meeting. Another project is looking at manpower issues from the standpoint of attitudes towards sub-specialty training amongst general pediatric trainees.

A third type of project deals with delivery of services to patients. One project is developing educational materials for patients and families affected by so-called orphan diseases.

The projects that are most likely to succeed are those that are well focused, with clear and achievable goals, with the results having applicability to as broad of a constituency of ATS as possible.

Projects typically run for 1-3 years, with funding being reviewed annually. The funds for these projects are generally used for meetings and phone conferences. Typically meetings for the projects are held around the annual ATS meeting so that travel and accommodation costs are minimized. Projects are first reviewed by the Assembly Planning Committee, ranked, and then referred to the ATS, after revision by the applicant. In order to help people prepare these applications, Larry Lands, Chair of the Planning Committee, is willing to discuss and help applicants formulate their project prior to any submission to the Planning Committee. You can contact him by email (larry.lands@muhc.mcgill.ca).

The Pediatric Assembly has one of the best track records for funding, so the likelihood of funding of well thought out, broadly applicable projects is relatively high. Applications are due in early August. So now is the time to start thinking about potential projects. The Application Package will be available on line on the ATS website on Friday June 13, 2003 at www.thoracic.org.

Nominating Chair
Dennis Stokes

At the ATS Scientific Assembly on Pediatrics Business Meeting on Tuesday, May 20th in Seattle, the Assembly membership will elect the following: Program Committee Chair-Elect, two members of the Nominating Committee, and two members of the Planning Committee. This year’s Nominating Committee has asked the following individuals to stand for election:

Program Committee Chair-Elect
(1 elected):
Tom Ferkol, Washington University, St. Louis
Marie Egan, Yale, New Haven
Pierre Barker, UNC, Chapel Hill

Nominating Committee (2 elected):
John Carl, Case Western, Cleveland
Stephanie Davis, UNC, Chapel Hill
Planning Committee (2 elected):
Margaret Rosenfeld, UW/Children’s Hosp, Seattle
John Carroll, Arkansas, Little Rock
Jim Chimiel, Case Western, Cleveland
Andrew Colin, Harvard/Children’s Hosp, Boston

The Program Committee Chair candidates have all made significant contributions in the planning of the program in previous years and will have an additional year working with the Program Chair and Program Committee before taking on the burden of planning the annual meeting.

Additional candidates for the Nominating Committee election may be put forward at the time of the meeting but not for the other two offices.

Biographies of the candidates are available on the Pediatric Assembly website and I encourage you to review them before the election at http://www.thoracic.org/assemblies/peds/welcome.asp.

There will not be an election for Pediatric Assembly chair-elect at this meeting since a new Assembly Chair will be taking office (Dr. Susanna McColley).

My thanks to all the candidates for their willingness to serve the Assembly on our behalf.
ATS Assembly: Pediatrics (PEDS):  
2003 Membership Meeting Agenda  
(Assembly Chairman Margaret Leigh, MD)

1. Memorial Tribute – Dr. Edwin L. Kendig, Jr (V Chernick)
2. Report from ATS Leadership
3. Report from the Chair (M. Leigh):
   a. Enhancing Pediatric involvement/visibility in ATS
4. Report from ATS Taskforce on Pediatrics (J. Allen)
5. Report from Planning Committee (L. Lands)
   a. Research Priorities in Pediatric Pulmonology
   b. Assembly Projects and Initiatives:
   c. Ad Hoc Members’ Reports:
6. Assembly Website (T. Murphy)
7. Report from the Program Committee (P. Zeitlin)
8. Report from Council of Chapter Representatives (J. Wagener)
9. American Board of Pediatrics – new requirements for recertification (R Wilmott)
10. International Pediatric Society Reports
11. Vote: Program Committee Chair-Elect, Nominating Committee Members and Planning Committee Members
12. Presentation of Certificates of Appreciation for Outgoing PEDS Officers
13. Introduction of 2003-05 PEDS Assembly, Chairman, Susanna McColley, MD
14. Adjourn
ATS 2003 – SEATTLE
SESSIONS
ASSEMBLY ON PEDIATRICS

POSTGRADUATE COURSES

Saturday, May 17
PG19  Lung Function Testing in Infants and Young Children: Practical and Analytical Aspects

SYMPOSIA

Sunday, May 18
A9  What Is Cystic Fibrosis?
A75  Advances In The Diagnosis And Management Of "Orphan" Diseases Of Pediatric Pulmonology

Monday, May 19
B71  Pediatric Research Year In Review

Tuesday, May 20
C2  Pediatric Clinical Chest Rounds
C76  Advances In Management And Repair Of Chest Wall Disorders In Children

SUNRISE SEMINARS

Monday, May 19
SS116  Implementation of Infant Pulmonary Function Testing as an Integral Part of the Pediatric Pulmonary Practice

Tuesday, May 20
SS215  Using High Resolution CT Scans in Cystic Fibrosis

Wednesday, May 21
SS315  Interpreting AAP Guidelines on OSA

MEET THE PROFESSOR SEMINARS

Sunday, May 18
MP416  Applications of Video-Assisted Thorascopy in Children: A Surgeon’s View

Monday, May 19
MP515  Unraveling the Difficult Cystic Fibrosis Diagnosis in Infants and Young

Tuesday, May 20
MP615  Management of Cystic Fibrosis Diagnosed by Neonatal Screening

MINI SYMPOSIA

Sunday, May 18
A13  Issues In Pediatric Sleep And Control Of Breathing
A86  Cystic Fibrosis: New Therapeutic Strategies From Mice To (Wo)Men

Monday, May 19
B12  Viral Lower Respiratory Tract Infection And Asthma

Wednesday, May 21
D11  Risk Factors For The Development Of Asthma In Childhood (Hygiene Hypothesis)
D12  Molecular Design In Murine Lung Development
POSTER DISCUSSION SESSIONS

Sunday, May 18
A25  Methodologies For Assessment Of Pediatric Lung Disease
A26  Lessons From Murine Lung Development: Implications For Chronic Respiratory Illnesses

Monday, May 19
B25  Cystic Fibrosis
B98  Trends In Atopic And Asthmatic Illnesses In Pediatrics

Tuesday, May 20
C23  Neonatal Lung Disease And Bronchopulmonary Dysplasia
C93  Role Of RSV Infections In The Development Of Asthma And Chronic Lung Disease

THEMATIC POSTER SESSIONS

Sunday, May 18
A48  Environmental And Genetic Risk Factors For Pediatric Lung Disease
A117  Pediatric Clinical Studies: Asthma

Monday, May 19
B39  Lung Development
B40  BPD And Neonatal Lung Disease
B41  Pediatric Clinical Studies
B109  New Methodologies For Quantitation Of Pediatric Lung Disease
B110  Pediatric Critical Care

Tuesday, May 20
C44  Pediatric Sleep And Respiratory Control
C108  Pediatric Outcomes In Respiratory Illness

Wednesday, May 21
D40  Cystic Fibrosis: Basic Studies
D41  Cystic Fibrosis: Clinical Studies

PEDIATRIC ASSEMBLY

MEMBERSHIP MEETING

TUESDAY MAY 20TH
4:30-6:30PM
RED LION ON FIFTH
EMERALD BALLROOM I (3RD FLR)

REFRESHMENTS WILL BE PROVIDED THROUGH A GENEROUS GRANT FROM GLAXOSMITHKLINE

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ADD YOUR NAME TO THOSE WHO MAKE A DIFFERENCE. BE MORE THAN A MEMBER—BE A CONTRIBUTOR!

RECENTLY, THE ATS BOARD RESOLVED THAT THROUGH THE FUNDS FOR THE FUTURE, YOU CAN DESIGNATE YOUR GIFT TO A VARIETY OF FUNDS SUCH AS THE NEW ATS RESEARCH PROGRAM, AN ASSEMBLY PROJECT, AND CLINICAL TRAINING PROGRAMS, ETC.

MAKE A GIFT TODAY! BE A PART OF THE FUN(ds)! JOIN YOUR COLLEAGUES IN THE FIGHT AGAINST LUNG DISEASE BY MAKING A CONTRIBUTION TO ATS’ FUNDRAISING CAMPAIGN, THE FUNDS FOR THE FUTURE.

GIVING IS EASY! MAIL A CHECK TO ATS, 61 BROADWAY, NY, NY 10006-2747 OR LOG ON TO WWW.THRORACIC.ORG AND MAKE A CONTRIBUTION ONLINE.