

2023 Spring Newsletter

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Editor's Note

We are now in the midst of spring, and at least in Arkansas, the heat and humidity are already among us. Likewise, this issue brings some "hot" topics to discuss, but hopefully nothing "steamy". I have been blessed by the assistance of multiple contributors, including our new President, **Linda Ernst**, who talks about her circuitous route to pediatric pathology and her plans for the Society over the coming year. Our former President **Joe Rutledge** begins a series of interviews with leaders in pediatric pathology groups across the country and even the "big pond". This will continue my running topic of Institutional highlights that began with Children's Hospital Los Angeles and Texas Children's Hospital. **Cyril D'Cruz** has contributed an obituary to our dear, recently departed **Vijay Joshi**, whom we will all miss. Vijay was a valued colleague of mine during my days in the Children's Oncology Group and the Pediatric Oncology Group. Finally, we have our usual array of committee reports from some of the hardest working people in the Society, the committee Chairs.

I have to admit that I was unable to attend the Spring meeting, having already registered for the USCAP meeting and running out of sufficient funds to make both meetings. Nevertheless, I enjoyed seeing many of you in New Orleans, and I am happy to report that pediatric pathology was well represented at the fellowship fair with booths from Cincinnati Children's Hospital and Lurie Children's Hospital (see photos below of Lara Berklite and Nicoleta Arva). As we transition to a USCAP companion society for the spring meeting, we will likely have other opportunities to "spread the word" about pediatric pathology to USCAP at large.





Let us all welcome our new President, Linda Ernst. She has been a stalwart among SPP leaders for a number of years, helping to guide us through the financial crash of 2008 while I served as President, and later serving as Treasurer. She knows as much about how the Society operates as anyone I know, and I am sure that she will have a brilliant year. All the Best, Linda!



David Parham, MD Newsletter Editor

President's Letter

Interview with **Linda Ernst, M.D.**, SPP President, May 15, 2023 David Parham

I welcome you as our new SPP president, as of about 10 weeks ago. Let's talk about your medical background. When did it begin?

I'm from the Chicago area, and my career began there. After receiving my BS degree in Biology at the University of Illinois Urbana-Champaign, I moved to Eugene, Oregon, and worked in a clinical laboratory for two years doing tasks such as accessioning specimens and spinning blood tubes. One day in the break room, I read a pamphlet about the Pathology Assistant (PA) program in Quinnipiac College in Connecticut. This seemed like the job for me, so I applied, was accepted, and moved across the country to the Northeast.

I assume that this was your first exposure to Pathology. What particular events there further inspired your career?

During my rotation at Danbury Hospital, I met Dr. **Carolyn Salafia**, a pathologist who specialized in fetal and placental pathology. She inspired me to learn more about this field of study, and she took a special interest in my career. After I obtained my Master's degree as a PA, she hired me to work for her at the John Dempsey Hospital. As her assistant, she taught me how to write medical articles and to do my first oral presentation. This presentation was at my first SPP meeting, the fall 1991 meeting held in Philadelphia. I remember being very nervous at the time, and although I did know them at the time, luminaries such as **Enid Gilbert-Barness** were on the front row.

What further inspired you to go to medical school?

While I was a PA, I started interacting with and teaching medical students about pathology, and I realized that I would be able to learn their curriculum. Also, Dr. Salafia left John Dempsey in 1994 for the Perinatal Research Branch of the NICHD, and I helped to teach her successors about placental pathology. At this point, I realized that I was ready for the next step in my career, and in 1995 I applied for and started at the University of Connecticut School of Medicine.

Did medical school confirm your choice of pathology as a career?

I tried to be unbiased and consider other specialties, but I was imprinted on pathology. I absolutely loved medical school and learning about medicine, and eventually I completely wore out the futon upon which I sat while reading. After I received my MD degree, I started my AP/CP residency at Yale.

While you were a resident, who further inspired your career in pediatric pathology?

Dr. **Miguel Reyes-Mugica** was then in charge of pediatric pathology at Yale. He took me and two other residents, **Eduardo Zambrano** and **Kristen Landi**, under his wing, forming an informal group with a shared interest in pediatric pathology. We followed him around like ducklings. He was a fabulous mentor and role model, humoring us and forming a journal club. He took us on trips to NYC to meet with **Alba Greco** and other pediatric pathologists in NY and NJ. It was a fabulous time; we learned so much from him.

From there you went to your fellowship at Children's Hospital of Philadelphia (CHOP). How did that influence your career?

I had a two-year fellowship, opting for a second year. **Eduardo Ruchelli** was the fellowship director, and **Dale Huff** was the pathologist most interested in perinatal pathology. They both had a strong influence, and I learned my current techniques in fetal and placental examination from them. To be sure that I wanted to go to CHOP, I asked Dale at my fellowship interview if he examined the maternal vessels of the basal plate of the placenta, and as it turned out he had a strong interest in them. So, we were instant comrades! **Portia Krieger** was one of my fellow colleagues, and she became a lifelong friend. **Pierre Russo** was in charge of Anatomic Pathology (AP), and his influence taught me a lot about leadership.

Following your fellowship, you opted to stay at CHOP as a junior attending. What was that like?

I was an attending at CHOP for 3 years, and during that time I was on the general AP service. I was shocked by the amount of work I had to do, and my hardest transition was graduating from fellow to attending. However, by teaching me to slow down and dive deeper, my fellowship prepared me for success. During this time, I was primarily a service pathologist. I tried to get grants but never successfully, but I didn't give up.

Then you moved to Northwestern University, back home in Chicago. How was that transition?

Because my wife Jen needed a job in pediatric oncology, we had to find a place where we could both work, and Chicago was the place. When I interviewed with **Elizabeth Perlman** at Lurie Children's Hospital, she asked what my ideal job would be. My interests in perinatal pathology led her to suggest Prentice Hospital as an alternative, and since a position was open, that's where I went. For three years I had a very busy solo practice. Placenta examinations ranged from 50 to 70 per week, and I had a busy perinatal autopsy service to run in addition. Needless to say, I was quite relieved when **Mike Fritsch** was hired as my partner!

Yet during this time you were the primary author/editor of a textbook on fetal histology, Color Atlas of Fetal and Neonatal Histology first published in 2011. How did you accomplish that, and what was the inspiration for the book?

Dale Huff, Eduardo Ruchelli, and I started planning that book before I left CHOP, and the writing had to be done on weekend and at nights. We wrote it between 2008 and 2011, and we published a second edition in 2019. Our book was modeled after a text by **Maria Valdés-Dapena**, *Histology of the Fetus and Newborn*. It was first published in 1979 with only black and white photographs and was out of print. However, we used the same chapter outline and basic content. In spite of the hard work, I would still advise new pathologists to write chapters and books; I learned a ton from it.

In 2017 you moved to Northshore. What led to that decision?

By then I was getting funded for research involving stillbirth and placental pathology. In spite of my initial disappointment, I kept at it and learned how to write successful grant applications. When the opportunity arose to move to a less busy clinical service at NorthShore, I felt it was a good time to move, and the move has allowed me to pursue my research interests more seriously. I am currently pursuing central questions about the etiology and pathogenesis of chronic villitis of unknown etiology, a chronic inflammatory condition in the placenta, and early onset neonatal sepsis associated with acute inflammation in the placenta.

You have truly had a remarkable career. Let's finish the interview with your thoughts on being SPP President.

The SPP is strong; it has survived financial, management, and educational challenges. The pandemic was a major challenge for SPP leadership and changed the paradigm for our meetings, but I am looking forward to more live interaction. Our management team AOE has been great. They have been very helpful getting our finances organized and in order and improved our meeting planning processes. We are in the process of contract renewal negotiations, and hopefully we can continue our successful collaboration with AOE.

Our decision to change to a companion USCAP meeting for the Spring promises to help me to meet my strategic plan objective of engaging trainees by providing more exposure to Pediatric Pathology at this major Pathology meeting attended by many trainees. My goal is to maintain member satisfaction during the meeting format change, and hopefully this change will help us also to remain financially healthy. Finally, we now have the opportunity to offer more on-line educational content with installation of our new learning management system, and that is what we intend to do with the new format of our workshops and other potential new initiatives. It is my plan to continue to attract expert speakers for this purpose and fulfill the vision and mission of SPP.

Thank you, Linda, for granting me an interview. I look forward to working to your Presidential tenure and wish you the best.



Linda Ernst, MDSPP President

Institution Highlight: Children's Healthcare of Atlanta (CHOA)

Dr. Beverly Rogers, Chief of Pathology and Laboratory at Children's Healthcare of Atlanta (CHOA) offered two of her colleagues to speak to the role of a dedicated clinical informaticist in the pediatric clinical laboratory. Children's has 673 beds across its 3 hospitals, with a new replacement hospital opening in fall 2024. Their 12,000 employees aid over 1 million clinical visits a year. The laboratory boasts 11 satellite labs, 9,000 surgical pathology cases, 60 autopsies, and 2.3 million clinical tests per year, which keep the 21-person doctoral staff busy.

Dr. Elizabeth Weinzierl is a pediatric hematopathologist who dealt with informatics before the arrival of Dr. Alexis Carter, who is boarded in clinical informatics and molecular genetic pathology and has leadership positions in those professional organizations.

Joe Rutledge: Elizabeth, how long have you been Children's Healthcare of Atlanta and what are your current duties?

Elizabeth Weinzierl: I have been at CHOA since 2013. I am the director of hematopathology, which features a group of four hematopathologists, and I rotate through that service. I'm also the director of clinical pathology, and within that role, I directly oversee laboratory hematology and urinalysis. In addition, I provide medical direction for phlebotomy and the referral labs. I also oversee the other areas of the clinical lab, but those areas have their own section directors such as clinical chemistry, coagulation, etc., and those section directors report to me. We have a total of eight high complexity urgent care labs, and I hold CLIA licenses for 3 of them.

Joe Rutledge: And so, Alexis, what about you?

Alexis Carter: I was at Emory for 9 years before I came to CHOA in 2015. I work mainly in clinical Informatics, but I'm also a molecular pathologist in process of setting up Children's first next generation sequencing (NGS) assay for pediatric cancer.

Joe Rutledge: Can you give us the background of the computer systems you have and how they came to be.

Alexis Carter: When I arrived here in 2015, CHOA had long-established laboratory information systems. We had Sunquest for the clinical labs that had been here for probably a decade or more and CoPath for anatomic pathology. There was also middleware that was established in the core labs and for point of care. Our hospital electronic health record (EHR) is Epic. I was hired by Dr. Rogers because she needed help to manage systems and get them into a better place.

Joe Rutledge: And you have undergone some big system changes since then, right?

Alexis Carter: We've added middleware, done several major upgrades of our LIS, and recently changed to Epic Beaker for anatomic pathology. We completely overhauled all of our blood orders and implemented positive patient identification for transfusions. More importantly, we've improved a lot of foundational systems by making them more transparent and a lot more robust. For example, when I arrived, we didn't have test systems or didn't have enough test systems for some of our middleware servers, so testing either required taking the system down or transporting a test server between campuses. We have since then strategically shored up those systems with backup hardware and test databases so that we can test without impacting production. In addition, we have converted many of our lab systems to a single sign on process. Dr Weinzierl is also leading a project to do positive patient identification for specimen collections performed by nurses.

Joe Rutledge: So, Elizabeth, you underwent a transition, because before Alexis came on board, you were doing a lot of this. Is that correct?

Elizabeth Weinzierl: Well, I might say that a lot of this probably wasn't being done; it's been an interesting evolution. It's not really a field I had much notion of when I came here, straight out of fellowship, and so I personally didn't realize the full extent of what we lacked or needed. We had a manager, and we had the LIS team, but the medical directors were not necessarily involved with how things looked or how they were built. We might see some screenshots via an email so we would see how it might look in Epic, but we weren't necessarily involved in those decisions from the getgo. So, before Alexis came, I would say, in general, we struggled with IT issues, because there was this sort of no man's land between our world as pathologists who aren't necessarily experienced in Informatics at all and IT personnel who are certainly very well versed in their world but speak a different language. As a bad analogy, we were kind of stuck in our trenches in between that no man's land. We often really didn't know how to go forward because we didn't have the knowledge to know the best route. Decisions made in that environment also lead to a lot of retrospective correction.

When Dr. Carter came, we were able to make progress and do things correctly the 1st time. As an example, new test builds moved to a standardized process with a standard procedure. She merged the gap between the lab and IT, and she took on successful new projects. We recently went live with Epic System's Beaker AP, which a lot of hospitals across the country have done in the past few years, and it went live very smoothly.

Alexis made us understand each process and evaluate alternatives. Her experience also allowed us to make changes correctly the first time, even though it sometimes took longer but saved having to rework the changes later. We have been more successful in the end.

Joe Rutledge: Alexis, you're wearing the two hats of molecular and Informatics. First of all, it's a lot of work, but the second piece of that has to deal with the genetic data is that going to come in. Do you have to build another system for it - how does that work?

Alexis Carter: Genomic data is very, very complex. Epic has a genetics module, but I would say that they are barely getting their feet wet in this area. They're working towards what I would call technical interoperability for genomic data, which basically means that they can transmit data points for genes, chromosomes and variants, but the real issue with genomic data is making sure that the meanings of those variants are carried across in an accurate way for the physicians to interpret it correctly, especially physicians who are not trained in genetics.

I'm actually the chair of a working group for the Association of Molecular Pathology that is specifically now looking at interoperability of genomic data with electronic health records, both within an organization and between organizations (J Mol Diag. 2022 Jan;24(1):1-17). We have a list of the things that need to be fixed, in order to make sure that genetic data is transmitted safely for patients.

I'm happy to say that CHOA has committed a lot of resources to building an information system for their first NGS assay. That system consists of our NGS platform and a whole set of dedicated servers with robust backup and scalability for our bioinformatics pipeline. Our information system maintains genomic data at the variant level. If I get a variant and I want to know how many other patients have the same variant, what cancer they had and what that variant was interpreted as, I can easily go and pull that up with a click of a button. I can also pull open online databases for that variant to see if the variant exists in the general patient population and how other people have classified this variant in the same clinical situations, etc.

That information system is completely separate from our pathology lab information system, so the reporting will initially be done by cutting and pasting, but because the system is in-house, we can easily expose the tables on the back end to Epic. The real promise is that you can perform clinical decision support in Epic using those variants. You can't generally do that when variants are reporting in a text report or PDF. For example, if a provider prescribes a certain type of chemotherapy which has been shown not to be effective in patients with a particular genetic variant in their cancer, then you can write rules to alert the provider that this may not be the best choice for the patient.

Joe Rutledge: Have you integrated with the clinical medical Informatics teams that are running around maintaining Epic? Do you guys meet together?

Alexis Carter: We have a very large information technology department here at Children's. When I arrived at Emory back in 2006, I was the only physician informatics director in the entire organization to my knowledge, and when I came to Children's, seven and a half years ago, there were only 2 of us, myself and the chief medical information officer. We now have 6 physicians besides myself who are board-certified in clinical informatics: 1 intensivist, 3 pediatric hospitalists, 1 hematology-oncologist, 1 anesthesiologist and 1 pathologist (me). We also have a PhD human computer interaction engineer who has also been working on a lot of projects for the hospital. I interact regularly with that group in multiple operational meetings every month and a monthly academic Informatics division meeting where we're focusing on our academic productivity at various Informatics meetings. I also interact with a huge number of our non-physician informatics and information technology professionals including the cybersecurity team.

Joe Rutledge: Tell us more about the team for cybersecurity and how does it impact the lab?

Alexis Carter: I sit on the organizational steering committee for cybersecurity here at CHOA as one of the physician representatives. Protecting your systems against cybersecurity threats requires a lot of work, but we are very blessed to have a team of experts on this topic. As I'm sure you're aware, ransomware attacks are not uncommon, especially in healthcare organizations, because we hold a lot of private data. More recent attacks have focused on locking up patient data such that healthcare providers cannot even access a patient's medical history, much less place orders. Since my arrival, our cybersecurity teams have developed a robust risk assessment process to protect our patients. The laboratory department at CHOA was the first department in the organization to send all of our new or upgraded pieces of software or hardware through this risk assessment process. Putting a system through that process before we purchase it gave us leverage with the system's vendor to make critical fixes before the purchase and to capture those fixes in our contracts with them.

Joe Rutledge: Great. Sounds like you're really advanced in an area that other people kind of keep their heads under their desk hoping it will disappear. From the recent inspections in which I have participated, cybersecurity has been a new area of inquiry, and the best labs have strong, aggressive, pro-active programs to keep the lab safe.

Elizabeth Weinzierl: They're very busy right now because in late 2024 we're opening the new 446 bed Arthur M. Blank Hospital, and we're putting almost all new instruments in that laboratory. Every single one of those instruments is undergoing risk assessment and cyber security testing; it's a huge effort, but it's worth it.

Joe Rutledge: It sounds like having a pathologist informaticist has been positive. What can you share with other laboratories that might expect to see some benefits?

Alexis Carter: It seems that a lot more organizations are now seeing the benefit of having a pathologist who specializes in informatics, but certainly, when I started out, you often would have to advertise yourself as doing Informatics on the side or in addition to having clinical sign out in another area of pathology. Pathology informaticists can help departments by combining their knowledge of current technology's abilities and limits with the department's 5-to-10year strategy planning, helping to develop a plan to stage information technology purchases over time in order to limit the impact of the capital expenses to only those functions that are being brought on board at the time. You want to make sure that you're making decisions that will be forward-compatible with new systems and services that the department will be bringing in. A big challenge with the specialty of Clinical Informatics is that we can't bill for what we do. That's the downside that a lot of departments struggle with, at least at first. However, doing things right the first time, staging your purchases in a way that will prevent you from having to start over because your current system is no longer compatible for your needs, and improving efficiency and quality all save large amounts of money. In addition, while it's very hard to count the mistakes that didn't happen, building systems and processes that lower the risk for errors or make errors immediately transparent before they reach the patient all prevent situations that adversely affect an organization's status and bottom line. With ever-changing systems and structures, CHOA is continually looking for ways to do things in the safest and most efficient way possible through continuous quality improvement practices.

Elizabeth Weinzierl: If you're a large hospital, and especially a hospital system, I would think it would be very difficult to be successful without an informaticist.

Joe Rutledge: Thanks so much for sharing your journey and expertise.

Submitted by Joe Rutledge, MD, contributor





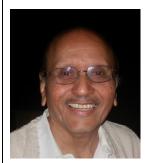


Dr. Elizabeth Weizierl



Dr. Alexis Carter

In Memoriam



Dr. **Vijay Joshi**, preeminent pediatric pathologist and specialist in placentas and neuroblastoma, passed away in New Brunswick, NJ, on March 16, 2023.

Vijay was a highly respected member of the Society for Pediatric Pathology along with other organizations like the Pediatric Oncology Group and organizations in India. He will probably be best remembered for his seminal work on Pediatric AIDS and HIV infections and manifestations. He preceded me as the Pediatric Pathologist at United Hospitals in Newark.

When the AIDS epidemic started, Newark was at the epicenter, and Vijay along with clinical colleagues like Dr. Jim Oleske did a great deal of work to characterize the multiple facets of this multisystem disease. Dr. Joshi spent long hours studying the problem, and his efforts received recognition all over the country. He codified his studies into a book on the subject that was a very useful resource for pathologists and others. The Pediatric Chairman at United Hospitals, Dr Richard Rapkin, was very fond of him, and when I was the pediatric pathologist there, he often called me Vijay by mistake. Vijay and I were also associated with the Pathology Department at St Barnabas Hospital where he was a consultant for many years. He was awarded the Diamond Jubilee commemorative award of the New Jersey Society of Pathologists, in October 2021 for his contributions to the Society and New Jersey.

He will be missed by many.



Cyril D'Cruz MD, contributor Emeritus Pathologist, St Barnabas Hospital, Livingston NJ

Important Items



Reminders

- The SPP Resident Recruitment Award application window opens on May 16th, 2023 with the deadline to apply July 24th, 2023. Please visit the SPP Website for more information.
- Interested in hosting a future SPP Fall Meeting?
 - Visit the SPP website at Fall Meeting Host Submissions (<u>spponline.org</u>) to complete an application.
- Endocrine Pathology has created a special online collection about pediatric endocrine
 pathology which can be found here. If you have quality original articles to advance the
 knowledge in pediatric endocrine pathology, please consider submission to Endocrine
 Pathology.

Erratum

- The email contact for the Gift from a Child contact was incorrect in the last newsletter. The correct email is: ginny@swiftyfoundation.org
 - Gift from a Child (GFAC), a national initiative created to increase post-mortem pediatric brain tissue donation, is supported by families who have lost children to brain cancer, private foundations, researchers and medical professionals. GFAC has created a strategic infrastructure that enables participation from any family interested in the program and ensures that donated tissues are easily accessible to researchers through the Children's Brain Tumor Network (CBTN). GFAC also works with COG to help increase the number of post-mortem donations through their centers.

GFAC invites the pathology community to join in building awareness of its program, which helps to provide families with the option to donate post-mortem tissues and to expand research for better treatments and cures. Learn more at <u>Gift from a Child</u> and email <u>ginny@swiftyfoundation.org</u> to find out how you can become a GFAC champion.



Committee Reports



Education Committee

Highlights from Last Quarter

- <u>2023 Spring Annual Meeting</u>: The 2023 Hybrid Spring Annual Meeting in New Orleans offered 8.75 *AMA PRA Category 1 Credits™* and garnered 221 registered attendees. Credit claiming will be available via EthosCE learning management system through June 20, 2023.
- The Education Committee is now meeting quarterly and had two productive meetings one in January and one at the Spring Annual Meeting. New workshop and symposia were approved. The committee is also working to establish an Online Educational Initiatives Subcommittee to explore new educational offerings.

- <u>2023 Fall Annual Meeting</u>: The 2023 Fall Annual Meeting is set to occur in Portland, Oregon from October 6th 8th, 2023 with committee meetings occurring Thursday, October 5th. The meeting will be a hybrid format with select recorded content available to registered attendees for 30-days post meeting until November 17, 2023.
- <u>2023 Slide Survey Online</u>: The 2023 Slide Survey Online activity will be launching in June. It will be available via the SPP's new learning management system, EthosCE. Stay tuned for the registration launch email.
- Workshops: With a condensed Spring Annual Meeting, workshops will be offered as separate, stand-alone activities which will allow the SPP to highlight expertise within its membership in a larger forum and attract a wider audience. Beginning in August 2023, workshops will be offered as live, virtual presentations inclusive of live Q&A. Each workshop will be recorded and available for one year to registrants. Workshops in Year 2 and Year 3 at the close of the 2022 Spring Annual Meeting will be offered in August 2023. Workshops originally set to be offered for the first time in 2023 will be offered in January 2024. The detailed schedule is below.

Workshops previously approved will maintain the 2-hour timeframe inclusive of a 10-minute break. Each workshop will be offered from 12:00 pm - 2:00 pm Eastern Time on the following dates.

August 2023

- August 4: Triaging and Gross/Microscopic Evaluation of Products of Conception in Missed/Spontaneous Abortions and Post-partum Bleeding
 - o **Philip Katzman, MD** *University of Rochester Medical Center*
 - o **Jonathan Hecht, MD, PhD** Beth-Israel Deaconess Medical Center
- August 11: A Contemporary Approach to Pediatric Non-Neoplastic Liver Disease
 - o Juan Putra, MD Boston Children's Hospital
 - o Sarangarajan Ranganathan, MD Cincinnati Children's Hospital Medical Center
- August 18: Handling the Post-Operative Heart
 - Chrystalle Katte Carreon, MD Boston Children's Hospital
 - Stephen Sanders, MD Boston Children's Hospital
- August 25: Germ Cell Tumors in Pediatric Patients: A Systematic Review
 - o Florette K. Gray Hazard, MD Stanford University Medical Center
 - o Chia-Sui Kao, MD Stanford University Medical Center

Registration will be launching soon. Individuals will be able to register for individual workshops or for access to all four workshops for a reduced, bundled rate.

- Pricing Per Workshop
 - o \$150: Members
 - o \$200: Non-Members
 - o \$50: Trainees
- 2023 Bundled Pricing (access to all 4 Workshops)
 - o \$550: Members
 - o \$700: Non-Members
 - o Trainees: \$150

January 2024

The goal is for three workshops to be offered in January 2024. New workshops are currently being confirmed and scheduled.

- January 5: TBD
- January 12: TBD
- January 19: Congenital Cystic Lung Lesions: An Update on Clinical and Pathologic Correlates (*Slide Review Included*)
 - Jennifer Pogoriler, MD Children's Hospital of Philadelphia
 - o Jason Jarzembowski, MD Medical College of Wisconsin
- January 26: Selected Topics in Pediatric Otorhinolaryngologic and Oromaxillofacial Pathology with an Emphasis on Development and Syndromic Associations
 - John Ozolek West Virginia University
 - o Kalyani Patel, MD Texas Children's Hospital

Registration for January 2024 will launch later in 2023. Individuals will be able to register for individual workshops or for access to all four workshops for a reduced, bundled rate.

- Pricing Per Workshop
 - o \$150: Members

o \$200: Non-Members

o \$50: Trainees

2024 Bundled Pricing (access to 3 Workshops)

o \$400: Members

o \$500: Non-Members

o \$100: Trainees



Lauren Parsons, MDChair, Education Committee



Fellowship Committee

Highlights from Last Quarter

- Completed updates to the Fellowship page on the SPP website, ensuring Program Director information is up to date and accurate.
- Completed an email campaign, requesting new fellows join the SPP.
- Conducted research with the ACGME to better understand the filling rate of our programs.
- Completed an ABPath survey
- Shared how the SPP supports competency based medical education in Pathology GME
- Identified ways the ABPath can best support pathology in the implementation of CBME in GME (residency and fellowship) and in the transition from UME to GME
- Shared thoughts on the use of Entrustable Professional Activities as a workplace assessment tool for pathology residents/fellows

Announcements and Upcoming Initiatives

• The committee will be working directly with the Informatics & Communications Committee to create a "Day in the Life of a Pediatric Pathologist" video.



Amer Heider, MD Chair, Fellowship Committee

Finance Committee



Highlights from Last Quarter

- Thank you to our members rolling off the committee: **David Berger**, **Kim Hazard**, **and Nitin Wadhwani**.
- Welcome to our new members: Crystal Bockoven, Soo-Jin Cho, Ali Saad, and Charles Timmons.
- Thank you to our chair, **Jennifer Black**, for her service as she ends her term. Welcome to the new chair, **Rebecca Collins**.
- 2022 Year End Financials were reviewed by the committee and the SPP cash flow remains stable with a net profit on the operations side. Investments in 2022 took a bit of a dip, but overall, the SPP financials are stable.
- The Spring 2023 Meeting Budget is still in process of reconciliation. Final registration totals were: 148 Onsite attendees (2 Affiliate, 100 Members, 13 Non-Members, and 33 Trainees); 73 Virtual attendees (1 Affiliate, 62 Members, 5 Non-Members, and 5 Trainees
- The committee met with SPP's financial advisor from Merrill Lynch to discuss short-term investments, i.e., CDs, as their interest rates are currently high.

Announcements and Upcoming Initiatives

- The committee will continue to evaluate and move money over to the operating reserve account.
- The Treasurer and Treasurer-Elect will submit a proposal to the Executive Committee and the Board of Directors regarding short-term investments in 2023.



Rebecca Collins, MD Chair, Finance Committee



Membership Committee

Highlights from Last Quarter

- Welcomed new committee members: Laura Biederman, Alison Huppman, Xiayuan Liang, Mariko Suchi.
- The January Membership Committee review of applications and status transition requests resulted in the following:

New Affiliate: 1

New Regular Members: 7

New Junior Members: 6

Regular to Emeritus Transitions: 3

- The next membership application and transition request review is happening now. The next review will occur
 in July 2023.
- The Membership Survey process has been updated to include a review of all questions by the Membership Committee. Committee chairs are currently working to finalize the Question Request Form. Once the

Membership Committee receives these forms, they will draft a version for the Executive Committee to review. The goal is to send the final survey out to Membership in May.

• The Membership Committee continues to explore ways to add a mentoring program for the SPP that focuses on peer support.



Shawn Gong, MD, PhDChair, Membership Committee



Publications Committee

Highlights from Last Quarter

- Welcomed new committee member, Sanda Alexandrescu.
- Collaborated with the Informatics & Communication committee to create podcasts. The first podcast is ready to post to Podbean.
- Pediatric and Developmental Pathology (PDP) 2022 Paper of the Year Award:
 - "Calretinin Staining in Anorectal Line Biopsies Accurately Distinguished Hirschsprung Disease in a Retrospective Study." Pediatric and Developmental Pathology. 2022 Nov-Dec; 25(6): 645-655
 - Logan SJ, Yin H, Rogers B, Arva N, Conces MR, Cope-Yokoyama S, Dehner LP, Galliani C, Garg S, He M, Husain AN, Keisling M, Krishnan C, Puscasiu E, Rossi C, Siddiqui F, Sutton L, Terry J, Thaker AI, Huang Y, Zhang J, McCracken C, Rytting H.
- PDP Performance Metrics for 2022:
 - 196 manuscript submissions, 10.1% decrease from 2021
 - 32% acceptance rate
 - 19 days average time to first decision
 - 56 days average transmittal to production to OnlineFirst publication
 - 6 issues consisting of 697 pages published
 - 16 institutional subscriptions
 - 2,484 package subscriptions
 - 78,436 full-text downloads

- Utilize data to be collected from Membership Survey to evaluate how PDP and other SPP publications are utilized and viewed by SPP members, in particular to assess impact of digital publication on readership
- Collaborate with the Editorial Board and Editor-in-Chief for ongoing PDP efforts
- Create Publications Committee liaison with social media editor of PDP
- Explore ideas for upcoming Perspectives issues
- Explore support for wider open access publication availability



Bruce Pawel, MDChair, Publications Committee



<u>Informatics & Communication Committee (ICC)</u>

Highlights from Last Quarter

- We welcomed new committee members: **Denise Malicki, Sai Shalini, Moe Takeda, Miguel Guzman, Nya Nelson, Mark Luquette, Brittany DePasquale**.
- The first podcast has been completed and is ready to be posted to Podbean.
- Members captured photos and videos from the Spring Meeting.
- Committee members have posted updates to social media platforms, including weekly postings of Job Board highlights to LinkedIn.
- Members have been involved in the design and layout of the SPP learning management system, Ethos.

Announcements and Upcoming Initiatives

- We plan to follow SPP on <u>Twitter</u>, <u>Facebook</u>, and <u>LinkedIn</u> for updates.
- During the Spring Meeting the committee worked to identify goals for 2023:
 - Involve more junior members on projects
 - Increase engagement from members on social media platforms
 - Expand offerings on the SPP website
 - Update Atlas webpage
 - Build out additional resources
 - Collaborate with other SPP committees
- As the Informatics & Communication committee has evolved, so too has the need for an updated committee
 structure. The committee is working to restructure by assigning new roles and clearly laying out the
 responsibilities for members. Additionally, AOE has worked to support the committee by updating processes to
 streamline projects and keep them moving forward.



Michael Arnold, MD, PhD
Chair, Informatics & Communication Committee



Perinatal Committee

Highlights from Last Quarter

- We welcomed new members: Charlotte Kim, Kerby Oberg.
- The committee continues to address relevant issues in perinatal pathology.

Announcements and Upcoming Initiatives

- AOE and the Perinatal Committee are going to begin work on a more formalized process for planning future Perinatal Pathology courses.
- Upcoming Perinatal Symposiums
 - Fall 2023: Portland: 10/5/2023 10/8/2023
 - Perinatal: New Insights into the Early Detection and Long-term Health Consequences of Pregnancy Complications
 - Fall 2024: Joint PPS Meeting in Dublin
 - Fall 2025: Children's Hospital of Philadelphia has submitted a proposal, which is currently under review



Eumenia Castro, MD, PhD Chair, Perinatal Committee



Practice Committee

Highlights from Last Quarter

- The Practice Committee welcomed new committee members Atif Ahmed, Katrina Conard, Alexandra Kovach, and Evan Matshes.
- The Executive Committee has finalized the updated process for Practice Committee surveys. The process is much more streamlined and ensures that new projects will align with the SPP's Strategic Plan for 2023-2025.

- **Dr. Alanna Church** is working to finalize the draft of her survey, *Evaluating the Use of Molecular Assays by Pathologists Caring for Children with Solid Tumors*. Once finalized, it will be sent to the Practice Committee for review.
- **Dr. Portia Kreiger** has drafted a letter to the Centers for Medicare & Medicaid Services (CMS), requesting updates to current requirements for cytopathology data collection and reporting for pediatric pathologists. The committee is reviewing the letter prior to it being sent to the Executive Committee for approval.
- **Dr. Matthew Keisling** is conducting a literature search to create a list of guiding questions for a new project related to genetic testing for POCs/fetal cases.
- The Practice Committee would like to collaborate with the I&C Committee on submissions for their repository lab project, and the Fellowship Committee on attracting more fellows to the society.



Portia Kreiger, MD Chair, Practice Committee



Research & Awards Committee

Highlights from Last Quarter

- Spring 2023 Awards:
 - The Gordon F. Vawter Pathologist-in-Training Award recognizes the meritorious work of medical students, residents and fellows.
 - Kaitlin Weaver, DO, Cincinnati Children's Hospital
 - Evolution in Infectious Causes of Death in Liveborn Children in a Major Tertiary Children's Hospital: A Retrospective Autopsy Review of over 1200 Cases.
 - The Harry B. Neustein Award recognizes abstracts presenting meritorious work involving electron microscopy or novel technology in the study of disorders of children.
 - He Zhen Ren, MD, Ann & Robert H. Lurie Children's Hospital of Chicago
 - Utility of non-invasive testing (donor-derived cell-free DNA) and gene expression profiling in pediatric heart transplantation.
 - The Benirschke Perinatal Pathology Award recognizes the best presentation that advances the field of perinatal pathology.
 - Charlotte F. Kim, MD, Texas Children's Hospital
 - Umbilical Cord Abnormalities and Placental Inflammation Associated with Neonatal Hypoxic-Ischemic Encephalopathy
 - The Lotte Strauss Prize recognizes the meritorious work by an individual 40 years of age or younger in a subject germane to pediatric pathology, published or accepted for publication.
 - Charlotte F. Kim, MD, Texas Children's Hospital
 - Prostatic metaplasia and pilar differentiation in gender-affirming mastectomy specimens
 - The Enid Gilbert Barness Prize recognizes the impact of an outstanding pediatric pathology paper on anatomic pathology, clinical practice, research or public health and to encourage excellence and relevance in pediatric pathology practice.
 - Alanna J. Church, MD, Boston Children's Hospital
 - Molecular profiling identifies targeted therapy opportunities in pediatric solid cancer
 - Young Investigator Research Grant Recipient fosters research within the SPP by providing funds to young investigators in the field of pediatric pathology.
 - Sabrina Salberg, PhD, Monash University
 - Developing a Preclinical Model of Neonatal Inflicted Head Trauma to Improve Outcomes for Survivors
 - SPP Annual Research Grant Recipient fosters research within the SPP by providing funds to investigators in the field of pediatric pathology.
 - Terry Morgan, MD, PhD, Oregon Health and Science University
 - Placental cell- and size-specific extracellular vesicle isolation and transcriptomics throughout human gestation

Announcements and Upcoming Initiatives

- Applications are currently being accepted for the Resident Recruitment Award. Please visit the <u>Resident</u>
 <u>Recruitment Award</u> page on the SPP website for more information. Deadline: Monday, July 24, 2023
- The Research & Awards committee will utilize Cadmium as the abstract submission site again for the Fall Meeting. The call for abstracts will go out on July 3, 2023, with the deadline set for August 7, 2023.



Benjamin Wilkins, MD, PhDChair, Research & Awards Committee

SPP History

25 Years Ago

The SPP welcomed **Tom Stocker** to the Society Presidency, and his first President' Message recounted recent accomplishments that included building a solid endowment program and launching a new journal *Pediatric and Developmental Pathology*. Dr. Stocker noted that although the SPP boasted 600 members, only one half of people practicing pediatric pathology were truly represented. He quoted **Bruce Beckwith**, who pointed out that about 65% of pediatric renal tumors were referred from pediatric hospitals and universities in the 1980s; that number had fallen to closer to 50% by the mid-1990s. He attributed this shift in referrals to group practices in private hospitals that either included pediatric pathology trainees or those who were designated to handle pediatric cases. Dr. Stocker called for a goal to increase the SPP membership by 100 new members per year over the next five years.

Upcoming Meetings of Interest

Meeting	Meeting Dates and Location
American Association of Neuropathologists	June 8-11, 2023 – The Regency Monterey – Monterey, CA
99th Annual Meeting	
38 th Stocker's Aspen Conference on Pediatric	July 31-August 4, 2023 – Aspen, CO
Diseases (<u>Information</u>)	
Developmental Origins of Health and Disease	August 7-9, 2023 – OHSU, Portland, Oregon
Summer Course 2023 (<u>Information</u>)	
IPPA Advanced Course	September 23-29, 2023, Split, Croatia
European Society of Pathology Meeting	September 9-13, 2023, Convention Center, Dublin
Paediatric Pathology Society Meeting 2023	September 2023, Madrid, final arrangements pending
SPP Fall Meeting 2023	October 6-8, 2023, Portland, OR
SPP Spring Meeting 2024	March 22-23, 2024, Baltimore, MD

SPP Organization

Society for Pediatric Pathology

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