

NEWS

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FROM THE PRESIDENT

Sheila S. Phillips, M.D.

One of the rewards pediatricians enjoy is the confidence that children and parents have in our professional judgment. I never mind a question from parents, and certainly one of my main roles is to help parents understand what it means to care for and love their children. But I am disturbed by the anti-medical bias that sometimes attends the issue of vaccinations. Many parents are too quick to believe irresponsible press reports purporting to show dangerous side effects to certain vaccines. A 1998 article in *Lancet* aroused much interest when it suggested a possible relation between MMR vaccine and both autism and a syndrome of bowel disease. *Sixty Minutes* covered the controversy, and what ensued amounted to a collapse in confidence in the MMR vaccine and a lowering of vaccination rates.



What brings this to mind is that the March 6, 2004 *Lancet* prints a retraction of the original article signed by all but two authors, following a lengthy investigation of the cir-

I know there have always been patients who act against medical advice, and occasionally they have been right. But permitting a parent to refuse to vaccinate a child seems professionally derelict.

cumstances of the publication of the original work. A link was never established, and there is now convincing evidence that MMR vaccine does not cause autism or any particular subtypes of autistic spectrum disorder. Buried deep in the *NY Times* was an article about the retraction . . . but I was sorry to see that no local news outlet covered these developments. I'd like to think that a correction of widely held misinformation, particularly when acting on the misinformation may have avoidable consequences, would generate efforts to undo the impact of earlier stories. I recommend an excellent website that discusses these issues responsibly: www.mmrthefacts.nhs.uk.

When parents of a prospective patient tell me that they "don't believe in vaccinations" it's easy for me to tell them that I do, and perhaps they might be happier in a different sort of practice. I know there have always been patients who act against medical advice, and occasionally they have been right. But permitting a parent to refuse to vaccinate a child seems professionally derelict. We know that we are protecting against diseases that can have serious adverse effects. Does asking for a signed form saying that the patient assumes the risk really protect the interests of the child? Is it a victory when we assure a parent that the vaccine is much safer than the risk of being unvaccinated, and we are permitted to proceed? I tell parents that some safety issues, like car seats and bicycle helmets, must be non-negotiable. More and more, I'm becoming convinced that vaccines are such an issue.

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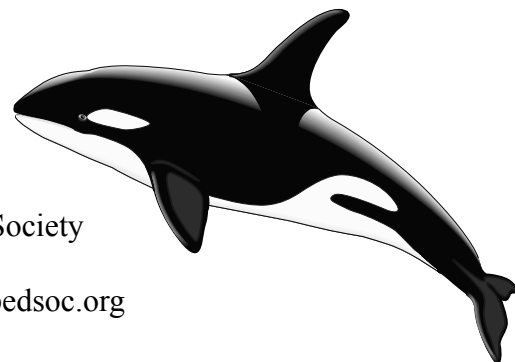
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FUTURE MEETINGS



September 30-October 3, 2004

61st Annual Brennemann Lectures,
Bahia Hotel, San Diego, California
Sponsored by Los Angeles Pediatric Society
(310) 540-6240/fax (310) 543-2375
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See page 10.

November 6, 2004

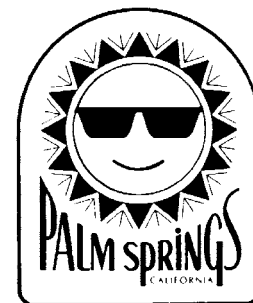
*Thirty-sixth Annual Cleft Palate & Craniofacial Anomalies Symposium:
Cleft Care: Something to Talk About*
Special workshop: "The Speech Pathologist Meets the Cleft Palate Team."
Sponsored by Saint John's Cleft Palate Center
(310) 829-8150 or nancy.hsenmayer@stjohns.org.

November 18-21, 2004

Pediatric Update, 26th Annual Las Vegas Seminars
Hosted by American Academy of Pediatrics,
California Chapters, 1, 2, 3 & 4
Site: Venetian Hotel, Las Vegas Nevada
(310) 540-6240 or email aapcach2@aol.com

March 3-6, 2005 (NEW DATES!)

California Chapter 2, AAP Cosponsored by:
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*Combined Southern California Pediatric
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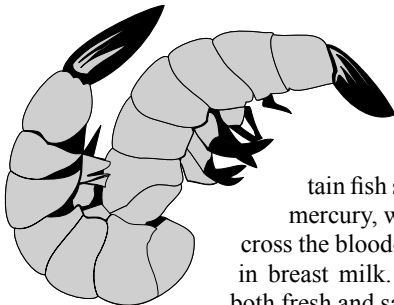
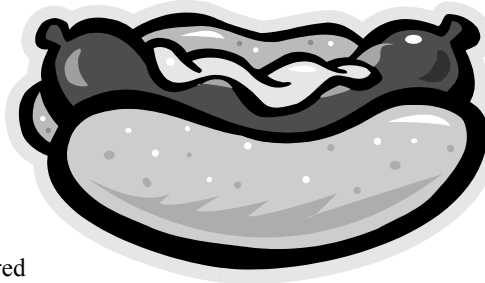
Food for Thought

Martha Rivera, M.D.

Now that temperatures are soaring and picnics and cook-outs are popular, it is time to again inform our patients about the havoc that can occur if undercooked, non-refrigerated or imported fruits and vegetables are part of the menu.

Just imagine the great barbecue combo, a hot dog, hamburger, or chicken accompanied by that tasty potato salad. Undercooked or poorly refrigerated hot dogs can cause Listeriosis, which can range in symptoms from a “flu like” illness to progression to sepsis or an aseptic meningitis syndrome. Undercooked beef is a source for Ecoli-0157, associated with hemolytic uremic syndrome. Some contaminated beef harbors the prions responsible for mad cow disease or Creutzfeldt Jacob.

In addition, inadequately prepared chicken can harbor Salmonella, which manifest with symptoms of moderately severe gastroenteritis or colitis. Potato salad left out can serve as a source for Salmonella or Staph aureus toxin.



As we know, fish is considered a great source of protein, great for the heart conscious diet. However, there has been a recent discovery, which has set off a new alarm. There are certain fish species that contain high levels of mercury, which can be neurotoxic. This can cross the blood-brain barrier and can be secreted in breast milk. Long-lived predatory fish from both fresh and saltwater have the highest concentration of methyl mercury Hg in their muscles.

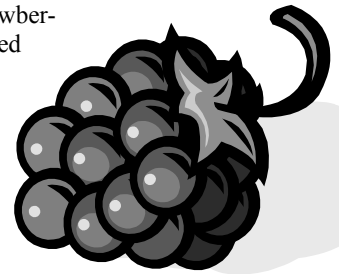
The Food and Drug Administration (FDA) and Environmental Protection Agency (EPA) issued an advisory in

December 2003, with the following recommendations:

1. Avoid shark, swordfish, and tilefish, as they contain high levels of Hg (1.0 ppm)
2. Levels of Hg vary. You may consume up to 12 ounces (2-3 meals) per week of other purchased fish, including shellfish.

Limit albacore to 6-12 ounces a week. (0.32 ppm medium methyl Hg fish). Canned tuna is considered a low methyl mercury fish (0.13 ppm).

If a fresh fruit or green salad sound more attractive, beware of the imported fruits and vegetables from Chile, Brazil, Guatemala, and Mexico. Such imports supply our health conscious salad and fruit consumers with a perennial abundance of non-seasonal items, but often harbor food borne pathogens such as Cyclospora a sporulating parasite, which causes acute watery diarrhea, bloating, nausea, and discomfort. In 1996, raspberries affected 1,465 people in North America. In 1999, mangos from Brazil served as a nidus for Salmonella infection. Green onions and strawberries from Mexico have been associated with Hepatitis A cases in an outbreak in 2003.



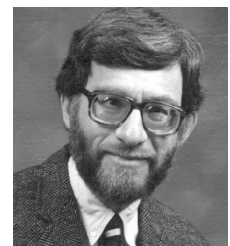
There are a myriad of other food borne diseases that cannot be encompassed in this short review. But one might wonder if maybe our safest bet is to drink filtered water with a dry cracker, but what enjoyment can one attain from such a bland boring meal... just food for thought.

For more information on food borne pathogens, contact www.cdc.gov or www.foodborneillness.com.

“The Producers” Present Falltime for the Brennemanns

Marshall G. Goldberg, M.D., FAAP, FAAAA&I, Program Chairman

The Brennemann Lectures will once again convene at the Bahia on San Diego’s mission Bay. Save the dates of September 30-October 3, 2004. We once again have an all-star cast of speakers, including James Garrick, nationally recognized in sports medicine, Ronald Hansen, a true expert in pediatric dermatology, Michael Pichichero, an entertaining and most informative authority in infectious diseases and David Feinberg from UCLA’s NPI who will tackle issues regarding behavioral problems including the controversies surrounding the use of SSRIs. Quite a group! To add to an already attractive program the night dinner-tour event will be held at Sea World. This is a first for us and should be great fun, especially for the kids. Don’t miss it!



COPEM Report

Paula Whiteman, MD and Judith Brill, MD Co-chairs

The Committee on Pediatric Emergency Medicine (COPEM) welcomes summer; however, we would like to encourage all our patients to stay well and out of the Emergency Department (ED).

Swimming is integral to summer in Southern California and pool safety is essential since the second leading cause of unintentional injury-related death is drowning for children ages one to 14. In fact, for every child who drowns another four will be hospitalized and 16 will be seen in the ED for near-drowning.

Parents need to devote their full attention to the supervision of children, which means they should not be reading, mowing the lawn, or running to the bathroom. Children should not be left with the responsibility of watching other children, such as when parents run to the phone assuming swimming teenagers will watch a poolside toddler. A child can slip noiselessly into a pool.

There should be layers of protection, such as self-closing self-latching gates, a four-sided isolation pool-fence at least four feet tall, or a pool cover. A time of special concern is when everyone is done swimming and moving back inside the house before the pool is recovered. This is when a child may run back out for that favorite toy, even using a chair or planter to scale the fence.

A child thought to be sleeping may get up and crawl through a doggie door or outside through a door left open for the breeze on a hot summer night or by visiting guests at an evening party.

Even a child thought to be pool-safe may be caught off guard by falling in with clothes on and forget what they have learned.

Please take a moment to remind your parents about pool safety. Start by asking if their children swim and where. It only takes a second...



ON BEING A CHAMPION

Mattie Stepanek died on June 22, 2004 of complications from dysautonomic mitochondrial myopathy, a disease that had already claimed his three siblings. Mattie was 13. During his short life, Mattie was an advocate of peace and goodwill and a poet of extraordinary and precocious talent. Here is one of his poems, written when he was 8.



“On Being a Champion”

A champion is a winner,

A hero ...

Someone who never gives up

Even though the going gets rough.

A champion is a member of

A winning team...

Someone who overcomes challenges

Even when it requires creative

Solutions.

A champion is an optimist,

A hopeful spirit...

Someone who plays the game,

Even when the game is called life...

Especially when the game is called life.

There can be a champion in each of us,

If we live as a winner,

If we live as a member of the team,

If we live with a hopeful spirit,

For life ...

By Mattie J.T. Stepanek



INSTITUTE OF MATERNAL AND FETAL HEALTH
Childrens Hospital Los Angeles and the University of Southern California

Istvan Seri, M.D., PhD, Medical Director, Institute of Maternal and Fetal Health

Editor's Note: I asked Istvan Seri MD PhD to pass along a brief overview of the new Institute of Child and Fetal Health at Childrens Hospital Los Angeles. This is indeed a cutting edge approach and resource to deal with the perinatal and postnatal risks to the fetus and newborn. Istvan is the Medical Director of the Institute. RGM)

Some pregnancies have potentially serious or life-threatening complications affecting the fetus and, although less frequently, the mother. Early diagnosis of these fetal conditions and/or maternal complications is of great importance especially if the fetal condition is treatable in utero or postnatally. However, providing comprehensive care for high-risk pregnancies with fetal and/or maternal complications requires coordination of health care delivery across a wide variety of medical subspecialties. In turn, effective coordination of health care delivery requires establishment of an infrastructure where medical, psychosocial, case management and other health care delivery services can be provided in an integrated manner at a time of enormous stress to the mother and her family. The Childrens Hospital Los Angeles (CHLA) had for long recognized the need for such services in the Southern California region and, as CHLA and the University of Southern California (USC) health care system had the most important components of the required infrastructure already in place, CHLA, in collaboration with USC, established the Institute of Maternal Fetal Health (IMFH) in February, 2003.

Since the opening, the Institute has provided integrated, comprehensive and multi-disciplinary maternal and fetal healthcare to a large number of families, from pre-conception through pregnancy and has provided delivery and neonatal care services when appropriate. Coordination of healthcare services at the *Institute* includes the integration of a large array of medical and surgical disciplines including subspecialties in adult, obstetrical and pediatric medicine. Accordingly, diagnostic and therapeutic services to the maternal-fetal pair have been provided by maternal-fetal medicine specialists, general pediatric surgeons, pediatric neurosurgeons, pediatric urologists, plastic surgeons, craniofacial specialists, pediatric otolaryngologists, pediatric ophthalmologists and pediatric cardiologists, endocrinologists, hemat oncologists, gastroenterologists, geneticists and neonatologists. In cases with pre-existing or pregnancy-induced maternal conditions affecting the mother, the fetus or both, adult specialists including endocrinologists, cardiologists and oncologists provide care in a system tightly integrated with the pediatric subspecialists involved. It is important to emphasize that, although many of the above-mentioned subspecialty services are also available elsewhere in the Southern California region, the comprehensive integration of such broad spectrum of services and the provision of prenatal and postnatal care at a single location are the unique and distinguishing features of the Institute of Maternal and Fetal Care at CHLA.

Prenatal diagnostic and genetic services are provided at the Institute's outpatient offices in the Doctor's Tower of the Hollywood Presbyterian Medical Center, adjacent to CHLA. The Perinatal-Neonatal Manager at CHLA provides the oversight of the daily operations and

functioning of the *Institute*. The Case Coordinator ensures seamless integration of patients into the system, providing information and arranging case conferences and diagnostic studies such as state-of-the-art genetic testing and fetal ultrasonography, echocardiography and MRI as well case conferences with the appropriate subspecialists. The CHLA and USC Medical Directors are responsible for ensuring the timely involvement of all necessary subspecialists. The CHLA-USC Prenatal Diagnosis Center provides additional coordination for some of the prenatal diagnostic and, if necessary, genetic services. Once the diagnostic work-up is completed, pregnant women and their family are counseled, preferably on the same day, by the subspecialists involved in their care. Most cases are then

followed by the mother's primary obstetrician and maternal-fetal medicine specialist in consultation with the Institute's maternal-fetal medicine specialists and the mothers usually deliver at the referring institution. The neonate is then transferred to CHLA, if appropriate. Less frequently, in cases with more complex and severe fetal anomalies likely requiring interventions immediately following delivery, the



...effective coordination of health care delivery requires establishment of an infrastructure where medical, psychosocial, case management and other health care delivery services can be provided in an integrated manner at a time of enormous stress to the mother and her family.

mothers deliver at Hollywood Presbyterian Medical Center where the Institute's maternal-fetal medicine specialists and neonatologists provide the services. These neonates are then immediately transported to CHLA for further management. Indications for delivery at Hollywood Presbyterian Medical Center include fetuses with anomalies associated with severe pulmonary hypoplasia (such as congenital diaphragmatic hernia, giant omphalocele, the rare case with large cystic adenomatoid malformation of the lung or bronchopulmonary sequestration, etc), with cardiac conditions requiring emergent interventional or surgical procedures and with large arteriovenous malformations or other conditions resulting in impending or established fetal hydrops. Description of a complete list of the type and complexity of conditions that may lead to immediate compromise following delivery and thus



THE GENE BLACK SUMMER MEDICAL CAREER PROGRAM

The Summer Medical Career Program was established by the Los Angeles Pediatric Society in 1969. The purpose of the program is to stimulate high school students to choose careers in the health professions. This is accomplished by providing first hand experience observing doctors, nurses and allied health professionals at work in hospitals and through career guidance provided by counselors at each participating institution. For a period of four weeks students take part in a variety of activities affording direct contact with both the medical staff and patients. They rotate through the various departments in hospital and observe the role of health-care personnel in providing medical services. The program is different at every location and is usually tailored to meet the interests of the participants.

A weekly stipend of \$75.00 is given each student to cover incidental expenses and a certificate of completion at the end of the program. In addition two \$500 scholarships are awarded each year from the Edward M. Rissman Scholarship Fund.

Funding is provided by contributions from individuals and groups, Medical Careers Unlimited Medical Group Members and our new Circle of Friends and Donors. To show our appreciation, contributions received this year are listed below. All are cordially invited to join. You will help students get started in the right direction just as perhaps someone helped you.

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Kaiser Foundation Hospital, Harbor City
Kaiser Foundation Hospital, Woodland Hills
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Tarzana Medical Center, Tarzana
UCLA Medical Center, Los Angeles
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**Institute of Fetal and Maternal Health
Continued from page 5**

necessitate delivery at Hollywood Presbyterian Medical Center are beyond the scope of this article.

The Institute has well-established collaboration with other CHLA programs such as the Heart Institute at CHLA. Regarding further development of the Institute, there are several activities associated with the operations and mission of the Institute underway including but not limited to the development of its website, database and follow-up program and the coordination of basic and clinical research studies with the Saban Research Institute at CHLA. As for the research plans,

The Institute of Maternal Fetal Health at CHLA considers the mother and the fetus and, following delivery, the mother and the child to be its patients.

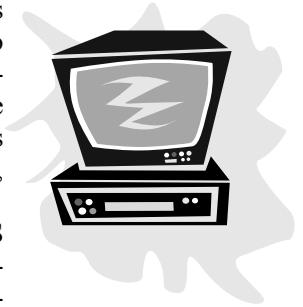
The Institute provides services using a tightly integrated and multidisciplinary care model with the primary goal of improving health outcomes.

the Institute's mission includes to engage in rigorous scientific investigation on a wide range of complex maternal and fetal genetic, metabolic and developmental abnormalities.

In summary, the Institute of Maternal Fetal Health at CHLA considers the mother and the fetus and, following delivery, the mother and the child to be its patients. The Institute provides services using a tightly integrated and multidisciplinary care model with the primary goal of improving health outcomes. Targeted health outcomes include decreases in maternal and infant death and disability as well as a reduction in the years of productive life lost from high-risk pregnancies. Indeed, establishment of the comprehensive follow-up and research programs will enable us to critically examine whether these goals have been achieved. For further information or to make a referral contact Istvan Seri MD.PhD, Head, USC Division of Neonatology and Medical Director, Institute for Maternal and Fetal Health, Childrens Hospital Los Angeles 1-800-OUR-BABY.

An Invitation to LAPS Members

The mission of the Los Angeles Pediatric Society (LAPS) is to improve the health and well-being in children and adolescents through collective efforts of its memberships. It promotes professional communication, education, and fellowship.



The executive members of the LAPS extend an invitation for active participation by LAPS members to submit articles, analysis of controversial areas and commentaries concerning areas of relevance in pediatrics. Our members encompass a wide background of experience and expertise and sharing thoughts with peers sometimes is best conveyed through written words.

For those interested in entering into this forum, please submit an article for review to www.lapedsoc.org. Publication deadline for review for the next newsletter is September 1, 2004.

CLASSIFIED ADS

POSITION AVAILABLE

Pediatrician to Join Practice Long Beach/Los Alamitos Area Full Time: Leading to Partnership Practice at Miller's Children Hospital of Long Beach Fax # 562 420-9092

OFFICE SPACE AVAILABLE

Large pediatric office immediately available to sub-let on the campus at Valley Presbyterian Hospital in Van Nuys – includes private consult office and three exam rooms. Inquire at (818) 988-3373.

DR. JIM SEIDEL MEMORIAL FUND



The Los Angeles Pediatric Society has established the Dr. Jim Seidel Memorial Fund in support of the Gene Black Summer Medical Career Program. Once the goal of \$25,000.00 is reached, we will issue a Dr. Jim Seidel Memorial Scholarship to one student in this program each summer. Selection of the student will be based on Hospital Counselor recommendations and the student's essay about their experience in the program.

Please make donations payable to the Los Angeles Pediatric Society, with "Dr. Jim Seidel Memorial Fund" in the memo section of your check and mail to P.O. Box 4198 Torrance, CA 90510-4198. Tax ID #95-2673275.

Name:

Address:

Phone: Email:

GENE BLACK SUMMER MEDICAL CAREER PROGRAM

Would you like to participate in the Gene Black Summer Medical Career Program? Do so by giving your monetary support to:

MEDICAL CAREERS UNLIMITED 2004/2005 MEMBER

- Individual \$50.00 Donor \$100.00 Medical Group \$100.00

If Medical Group Donation, list name and address of medical group and names to be listed:

.....

In Honor of In Memory of

- Donor \$100.00 Circle of Friends \$500.00 Silver Circle of Friends \$1000.00
 Golden Circle of Friends \$2000.00 Platinum Circle of Friends \$5000.00

Name

Street

City State..... Zip.....

Tax ID #95-2673275

Donors will be recognized publicly in the newsletter. Donations of \$1000.00 or more will be recognized for five years from date of donation. (Make checks payable to the Los Angeles Pediatric Society and mail to P.O. Box 4198 Torrance, CA 90510-4198.)

International Volunteer Opportunity

How would you like to help change this little girl's life?

Pediatricians are needed as an integral part of Rotaplast medical teams working in underserved areas throughout the world.

Rotaplast was founded as a humanitarian outreach of Rotary International. The concept is a partnership between Rotary clubs in the U.S. and the host country. This enables the visiting medical team to work side by side with local providers creating a spirit of cooperation and providing continuity of care for patients.

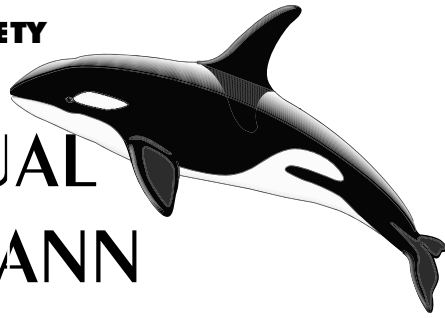
Medical missions are approximately 12 days long. Volunteers' airfare, lodging and some meals are provided. Rotary membership is not required.

For additional information on upcoming trips and to obtain an application please contact: www.rotaplast.org

Or Rotaplast International
 1663 Mission St. Suite 320
 San Francisco, CA 94103
 (415) 252-1111



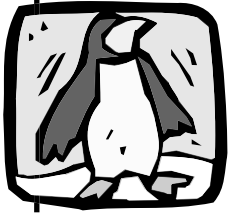
THE LOS ANGELES PEDIATRIC SOCIETY
Presents the



**61ST ANNUAL
BRENNEMANN
MEMORIAL LECTURES
SEPTEMBER 30-OCTOBER 3, 2004**

BAHIA HOTEL
on San Diego's Mission Bay
998 W. Mission Bay Dr.
San Diego, CA 92109

MEETING INFORMATION
(310) 540-6240 or
e-mail: bcarr@lapedsoc.org
fax: (310) 543-2375



Faculty

KEYNOTE SPEAKER

CAROL D. BERKOWITZ, M.D., FAAP
Executive Vice Chair and Professor, Department of Pediatrics, Harbor-UCLA Medical Center, David Geffen School of Medicine at UCLA.

DAVID FEINBERG, M.D., M.B.A., Medical Director, UCLA Neuropsychiatric and Behavioral Health Services; Associate Professor of Clinical Psychiatry, David Geffen School of Medicine at UCLA, Los Angeles, California.

RONALD C. HANSEN, M.D., Chief, Pediatric Dermatology, Phoenix Children's Hospital; Professor, Dermatology and Pediatrics, University of Arizona College of Medicine.

JAMES GARRICK, M.D., Director, Center for Sports Medicine, Saint Francis Memorial Hospital, San Francisco, California.

ORA H. PESCOVITZ, M.D., Edwin Letzter Professor of Pediatrics, Executive Associate Dean for Research Affairs; Professor of Cellular and Integrative Physiology; Director, Pediatric Endocrinology and Diabetology, Indiana University School of Medicine, Indianapolis, Indiana.

MICHAEL E. PICCHICERO, M.D., Professor, Microbiology and Immunology, Pediatrics and Medicine, University of Rochester, Rochester, New York.

Accreditation



This activity is offered by a CMA-accredited provider, the Los Angeles Pediatric Society. Physicians attending this course may report up to 15 hours of Category 1 credits toward the California Medical Association's

Certificate in Continuing Medical Education and the American Medical Association's Physician's Recognition Award. The California Board of Registered Nursing approved 15 hours of continuing medical education. Provider number CEP11121.

**61st Brennemann Lectures
Meeting Advance Registration**

Name Date

Address

City State Zip

Phone () Fax ()

Email

Tuition Fee	Before 8/25	After 8/25	
Physicians: Members of LAPS	\$500	\$550	\$
Physician Non-members	\$550	\$600	\$
Pediatric Residents Hospital:	\$ 40	\$ 60	\$
Allied Health Personnel Category:	\$250	\$300	\$
Emeritus with LAPS	\$125	\$125	\$

*SATURDAY EXCURSION *Seaworld*: \$60.00 adults \$40 children (3-11)

Includes: All-day admission ticket, special tour, dinner. Limited to first 125.

No. of adults ___ x ___ No. of children 3-11 ___ x ___ 2 & under ___ x N/C = \$

*Must be registered in advance..... **TOTAL... \$**

Please make checks payable to: Los Angeles Pediatric Society and return to:
P.O. Box 4198 Torrance, CA 90510-4198. *We regret credit cards cannot be accommodated.*

**61st Brennemann Lectures
Hotel Advance Registration**

Name

Address

City State Zip

Phone (Please include area code).....

Number in Party

Hotel Accommodations Requested: ___ Double ___ Single

Arrival: Time Date

Departure: Time Date

Your check or credit card is acceptable in payment.
MasterCard VISA American Express (circle one)

#..... Exp. Date

Signature

150 rooms are available to registrants at the special rate of \$144 per day single or double occupancy plus tax. Part of this fee is commissionable to LAPS. Note: Special rates will be available only until August 15, 2004 or until all 150 blocked rooms are taken. Once these rooms are taken, regular hotel rates will apply. WE RECOMMEND YOU MAKE RESERVATIONS FAR IN ADVANCE OF THE MEETING. The Los Angeles Pediatric Society disclaims any responsibility for hotel arrangements. Please make check payable and send to Bahia Hotel at address listed above. Phone Number: 1-800-288-0770.



IF YOU ARE NOT ON OUR MAILING LIST:

Complete the following and return to Los Angeles Pediatric Society, PO Box 4198, Torrance, CA 90510-4198.

Name

Street

City

State / Zip

Email

Specialty

Certified Eligible

Check if interested in membership.

All pediatricians, as well as other specialists with a professional interest in the health and welfare of children are eligible. There are no geographical limits. Annual dues of \$100, includes partial fees to the Annual Brennemann Lectures and Spring/Parmelee meeting.

FREE MEMBERSHIP

Free membership in LAPS until June 30, 2005 to all third-year pediatric residents graduating this June, 2004. Our gift to you. Just fill out the application on page 11 of this newsletter and return to PO Box 4128 Torrance, CA 90510-4198 or fax to (310) 543-2375



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