



CINCINNATI PEDIATRIC RESEARCH GROUP
Minutes of the Meeting
January 25, 2005

PARTICIPANTS: Lea Alae
Jeralyn Bernier, MD, MPH
Jim Davis, MD
Manny Doyne, MD
Evie Joseph, MD

1. Administrative

- Dr. Bernier is moving to A-8 near Drs. Siegel, Doyne and DeWitt, creating a CPRG core in the General and Community Pediatrics office suite; Lea Alae is moving to A-8 for the mornings; she will continue to be at Winslow in the afternoons. Phone numbers and e-mail remain unchanged. The new fax number is 636-7247.
- Site Visits – We will be scheduling CPRG site visits over the next several months. These visits are intended to discover your research interests and update you on current projects. Please feel free to share input and give us feedback on the CPRG and our various projects.
- PAS abstracts have been submitted and we are awaiting a decision regarding inclusion in the May meeting program.
- An ADD follow up survey to assess the impact of the Cincinnati-wide ADD education efforts was sent out to faculty pediatricians by Dr. Doyne and CME. The CME department apologizes if you received more than one survey – you only need to complete one.
- The OPRC meeting was rescheduled as there were some groups that couldn't be represented in January, and an upcoming Columbus meeting is being planned for the OPRC leadership in March.

2. Current Projects and Studies

- Atkins Low-Carbohydrate Diet Study—Enrollment is ongoing! Call Whitney at 636-9466.
- Obesity Patient Data – We need at least one more new participant to enter 100 patients, and we still need the current participants who have not yet reached 100 to do so (Drs. Bernier, Doyne, Green and Siegel).

- Surveillance – We continue to have excellent participation and ongoing system upgrades. Children’s Hospital is interested in continuing this program past the funding period, but the data we collect may change to meet different needs. A new survey to collect your feedback regarding the recent changes will be sent in early March.

The following comments/suggestions were made during the meeting regarding the current data entry: (1) make all five buttons custom (right now, 3 of the 5 buttons are customized and the other 2 are created automatically based on input over the preceding weeks), (2) enter frequency of diagnoses instead of symptom complexes for the common office problems, (3) routine diagnoses muddy the system and prevent the unusual cases from getting noticed. These discussions will continue over the next few months and we will revise the Surveillance program according to your input and the needs of the invested parties.

3. New & Upcoming Initiatives

- Obesity prevention/intervention grants – please see the attached document for more information regarding the new obesity program we are developing. Lots of good discussion surrounding randomization, consent and incentive issues occurred at the meeting.

NEXT MEETING TBD