

Division of Emergency Medicine

DIVISION PROFILE	
Number of Faculty	26
Number of Staff Physicians	20
Number of Fellows	
Clinical Fellows	9
Number of Other Students (full and part-time)	53
Number of Support Personnel	39
Annual Total Grant Support (direct)	\$659,389
Annual Total Industry Contracts (direct)	\$3,326
Number of Peer Reviewed Publications	22
Patient Encounters	
Outpatient	116,271

FACULTY LISTING

Richard M. Ruddy, MD, Professor of Clinical Pediatrics, Director, Division of Emergency Medicine
Sheryl Allen Bracey, MD, MS, Assistant Professor of Clinical Pediatrics
G. Randall Bond, MD, Professor of Clinical Pediatrics, Medical Director, Drug & Poison Information Center
Gregg A. DiGiulio, MD, Associate Professor of Clinical Pediatrics, Associate Director, Division of
Emergency Medicine; Medical Director, Emergency Department
Elena M. Duma, MD, Instructor of Clinical Pediatrics, Coordinator, Clinical Staff Physicians
Michael FitzGerald, PhD, Field Service, Assistant Professor of Pediatrics
Gary L. Geis, MD, Assistant Professor of Clinical Pediatrics
Michael A. Gittelman, MD, Assistant Professor of Clinical Pediatrics, Co-director, Injury Free Coalition
for Kids; Co-director, Safety Resource Center
Todd F. Glass, MD, MS, Assistant Professor of Pediatrics, Associate Medical Director, STATline,
Emergency Department, Telemetry & Communication Center
Javier A. Gonzalez del-Rey, MD, Professor of Clinical Pediatrics, Associate Director, Division of
Emergency Medicine; Director, Pediatric Residency Training Program
Catherine W. Gouldin, MD, Assistant Professor of Clinical Pediatrics
Jacqueline Grupp-Phelan, MD, MPH, Associate Professor of Clinical Pediatrics
Srikant Iyer, MD, MPH, Instructor of Clinical Pediatrics
Stephanie Kennebeck, MD, Assistant Professor of Clinical Pediatrics
Joseph W. Luria, MD, Associate Professor of Clinical Pediatrics, Medical Director, STATline, Emergency
Department, Telemetry & Communication Center; Co-chair, Safety Committee leadership
E. Melinda Mahabee-Gittens, MD, MS, Associate Professor of Clinical Pediatrics
Mia L. Mallory, MD, Assistant Professor of Clinical Pediatrics, Associate Director, Pediatric Residency
Program
Constance M. McAneney, MD, Associate Professor of Clinical Pediatrics, Associate Director, Division of
Emergency Medicine; Director, Pediatric Emergency Medicine Fellowship Program; Director, Medical
Student Education
Mary D. Patterson, MD, MEd, Associate Professor of Clinical Pediatrics, Medical Director, Human
Patient Simulator Program
Wendy J. Pomerantz, MD, MS, Associate Professor of Clinical Pediatrics, Co-director, Injury Free
Coalition for Kids; Co-director, Safety Resource Center
Jennifer Reed, MD, Assistant Professor of Clinical Pediatrics
Scott D. Reeves, MD, Assistant Professor of Clinical Pediatrics, Coordinator, Emergency Department
Resident Education
Charles J. Schubert, MD, Associate Professor of Clinical Pediatrics
Robert A. Shapiro, MD, Professor of Clinical Pediatrics, Medical Director, Center for Safe and Healthy
Children
Richard T. Strait, MD, Assistant Professor of Pediatrics
Nathan L. Timm, MD, Assistant Professor of Clinical Pediatrics, Emergency Preparedness Officer,
CCHMC

STAFF PHYSICIAN LISTING

Kirsten Ahrens, MD
Arash Babaooff, MD
Kate Balkoweic, MD
Jene Bramel, MD
Kristen DeMarco, MD
Michael Chua, MD
Emily Eagen, MD
Pamela Kingma, MD, PhD
Lisa S. Lewis, MD
Dawn Manfroy, MD
Joanna Nacopoulos, MD
Margaret Orcutt-Tuddenham, DO, Assistant Medical Director, Urgent Care Satellites, Division of
Emergency Medicine
Janice Roeder, MD
Carol Sekhon, MD
Kristin Stackpole, MD
Michelle Steffen, MD
Karen Szczepanski, MD
Elizabeth Templin, MD
Nora Vish, MD, MPH
Evan Yeung, MD

OVERVIEW



Left to Right: (1st row) B. Bennett, M. Mallory, Ch. Schubert, M. Mahabee-Gittens, J. Reed, S. Kennebeck, M. Patterson, S. Iyer, M. Gittelman (2nd row) J. Gonzalez del Rey, H. Schwartz, N. Timm, R. Bond, J. Grupp-Phelan, G. Geis, M. FitzGerald (3rd row) R. Strait, R. Ruddy

The mission of the Division of Emergency Medicine at CCHMC is the delivery of exceptional clinical care to acutely ill and injured children and their families. Our mission will be achieved through innovative educational and advocacy programs, through clinical and basic research designed to advance the practice of the field.

Clinical

FY '06 issues include ED visit growth and clinical care improvements within our multidisciplinary CSI teams. Base ED census grew 1% to over 91,000 ED visits and satellite urgent care centers grew at 5%. Emergency

Services staff and leadership strive to improve care with the goal of timely, effective, efficient, safe, patient centered and equitable care for all. The CSI team coordinated work in evidence-based care, ED flow, family centered care and safety. Our division won the best presentation at the annual NACHRI meeting in 2005 for the second consecutive year. The evidence-based and family centered teams partnered on the timely, evidence-based pain relief. The ED safety team initiated work in safety with high risk medications along with medicine reconciliation and handoffs.

Education

The division continues to play a key role in education through medical student, resident and fellow education internally, as well as a strong outreach program to EMS providers, nurses and others through the PALS Program and integration of the use of the human patient simulator in all the MERC programs. Gary Geis, MD was awarded the pediatric and emergency medicine faculty teacher of the year for his efforts. Our program continues to be active with students and instructors at the McMaster's University Evidence-Based Medicine Program in June.

Research

The division updated the research strategic plan and continued to grow in research funding and output in each area of interest. Areas of interest include mental health emergencies and maternal depression, advocacy/prevention – reduction of non-intentional injuries in children, smoking prevention and a focus on obesity, the vulnerable child, and acute clinical care in the management of children with asthma. We remain a member of the Pediatric Emergency Care Applied Research Network, 26 pediatric institutions funded through MCHB/HRSA in 5th year of funding. Federally funded projects include management of bronchiolitis, predictors of c-spine injury, clinical decision rule for CT utilization in minor head injury and the electronic surveillance describing the epidemiology of the PEM network. Translational work includes Dr. Strait's work in transfusion related lung injury and anaphylaxis. Additional work within the division includes work with child abuse and neglect at the Mayerson Center and the ED and toxicology through Drug & Poison Information Center.

HIGHLIGHTS

Clinical - Patient encounters – Emergency Department – 91,268 Urgent Care (off-site) – 26,528.

The Clinical Systems Improvement ED Team continued focus on patient flow and integration of evidence-based care, family centered care & safety. It has worked to integrate all areas within Emergency Services with the leadership of Gregg DiGiulio, MD and Patient Services.

The Evidence Based Team (Scott Reeves, MD) and Family Centered Care Team (Stephanie Kennebeck, MD, Todd Glass, MD and Mike FitzGerald, PhD) are partnering in improvement of evidence-based family centered reliable pain relief. The latter has a successful Family Advisory Team.

The ED Safety Team has the leadership of Mary Patterson, MD, MEd working to improve use of high risk medications, medicine reconciliation at discharge and “handoffs”.

Outreach – Peg Orcutt-Tuddenham, DO, Asst. Medical Director, Urgent Care led the outreach program to include expanded MD/RN coverage for busy months.

CCHMC Office of Emergency Management with leadership from Nathan Timm, MD has continued strong program improvement with HRSA/Homeland Security funding.

Advocacy - The Injury Free Coalition (Michael Gittelman MD, Wendy Pomerantz, MD, MS) and other Injury Prevention efforts (Sheryl Allen, MD, MS) have continued to grow and have scholarly output as well as strong community advocacy. Divisional resources have helped fund two important programs tied to EM - the Poison Center, Medical Director, Randall Bond, MD and the Mayerson Center for Safe and Health Children, Medical Director, Robert Shapiro, MD. Joseph Luria, MD has a leadership role in Co-Chair of Hospital Safety and continues as the Chairperson of the State Trauma Committee. Richard Ruddy, MD is Chair of the Hamilton County Injury Surveillance System.

Education – Remains a continued strength of the division.

Dr. Constance McAneney, MD, PEM Fellowship Director and Director, Medical Student Education led the efforts for fellows and students. The division continues to contribute to daily clinical experiences for 3rd year students – a unique program.

The Pediatric Residency Program Director (Dr. Gonzalez del Rey) and Associate Program Director (Dr. Mia Mallory) had another outstanding year. The residency training group: Dr. Reeves, Dr. Kulkarni, Dr. Geis and Dr. FitzGerald have further improved the residency training program.

Evidence-Based Medicine – Faculty taught at the CCHMC Evidence Based Medicine course (Drs. Reeves and Geis). In addition to the fellows' participation, Dr. Geis and Dr. Reeves were instructors at the McMasters Evidence Based Course in 2006.

The Emergency Medical Services for Children (EMS-C) providers well-established outreach program touched 3900 students with Pediatric Life Support and Pediatric Emergency for the Pre-hospital Provider as well as individual programs.

Research – The division has completed a new research strategic plan to further build infrastructure for projects and for researchers to obtain funding. There are four foci teams including Prevention/Health Services (Mental Health, Smoking Prevention, Community-based Injury Prevention, and delivery to underserved populations), Clinical/Translational (Transfusion associated lung injury, Anaphylaxis, Trauma care) Quality (ED delivery, Family Centered Care, Pain Management) and Education (Piloting curriculum, new measurement tools). Our PEM fellowship training program provided each fellow an excellent opportunity to develop their research skills and complete Master Degrees in Education, Epidemiology and Public Health at UC and other nationally recognized programs. Dr. Grupp-Phelan has K23 support through NIMH. AHRQ funding for team training/safety of multidisciplinary ED teams completed the first year with the medical direction of Mary Patterson, MD, MEd. There has been expansion of the projects in the Pediatric Emergency Care Applied Research Network (PECARN), with projects funded in head trauma (HRSA/MCHB), bronchiolitis (HRSA/EMS-C), C-spine injury (HRSA/EMS-C), hypothermia in cardiac resuscitation (NIH) and Diagnosis Grouping (HRSA/EMS-C). New funding K23 (Mahabee-Gittens) for smoking prevention, and CDC (Glass - Decision rule for use of abdominal CT) will begin in FY07. We have begun work in one clinical trial (MERCK – IV Singulaire) and will add surveillance with Infectious Disease in RSV.

TRAINING

Benjamin Kerrey	PGY IV	Cincinnati Children's Hospital Medical Center
Stephanie Spanos	PGY IV	Kosair Children's Hospital, Louisville, Kentucky
Patricia Chambers	PGY V	Children's Hospital of Pittsburgh
Leah Tzimenatos	PGY V	Baylor Affiliated Hospitals
Winnie Whitaker	PGY V	Cincinnati Children's Hospital Medical Center
Matthew Mittiga	PGY V	Children's Hospital of Pittsburgh
Rebecca Hampton	PGY VI	Children's Memorial Hospital
Laurie H Johnson	PGY VI	Eastern Virginia Medical School, Children's Hospital of the King's Daughters
Hamilton P. Schwartz	PGY VII	Cincinnati Children's Hospital Medical Center

GRANTS, CONTRACTS AND INDUSTRY AGREEMENTS

Grant and Contract Awards	Annual Direct/Project Period	Direct
Gittelman, M		
Injury Free Coalition of Greater Cincinnati Robert Wood Johnson Foundation	11/01/01 – 10/31/06	\$52,720/\$266,100
Community-Based Obesity Prevention Robert Wood Johnson Foundation	12/01/05 – 06/30/07	\$35,759/\$54,069

Grupp-Phelan, J		
Screening Services in the Pediatric Emergency Department National Institutes of Health K23 MH 063916	06/15/03 – 03/31/08	\$158,900/\$828,165
Patterson, M		
Implementing a Simulation-based Safety Curriculum in a Pediatric Emergency Department Agency for Healthcare Research and Quality U18 HS 015841	07/01/05 – 06/30/07	\$163,234/\$327,140
Pomerantz, W		
Emergency Medical Services for Children Partnership Grant Ohio Department of Public Safety	04/01/05 – 06/30/06	\$10,000/\$13,750
Reeves, S		
Dexamethasone for Bronchiolitis RCT Health Resources and Services Administration (University of Utah subcontract) R40 MC 04298	01/21/05 – 12/31/06	\$14,755/\$28,915
Ruddy, R		
EMSC Network Development Demonstration Project Health Resources and Services Administration (University of California subcontract) U03 MC 000001	10/01/05 – 09/30/08	\$59,292/\$181,031
Childhood Head Trauma: A Neuroimaging Decision Rule Maternal and Child Health Bureau (UC-Davis subcontract) R40 MC0 02461	01/01/04 – 12/31/06	\$11,366/\$50,698
Schubert, C		
CDC Immunization Action Plan Project Ohio Department of Health/Centers for Disease Control (City of Cincinnati subcontract) P0025X9098	01/01/00 – 12/31/06	\$85,414/\$493,746
Academic Administrative Units in Primary Care Health Resources and Services Administration (University of Cincinnati subcontract) D54 HP 00168	09/01/05 – 08/31/08	\$24,481/\$73,443
Strait, R		
Pathophysiology of Local and Systemic Food Allergy in a Mouse Model Food Allergy and Anaphylaxis Network (University of Cincinnati subcontract)	02/01/05 - 01/31/07	\$23,468
Inhibition of Immunopathology by Blocking Antibodies Asthma and Allergy Foundation of America	06/01/05 - 05/31/07	\$20,000/\$40,000
Current Year Direct		\$659,389
Industry Contracts		
Ruddy, R		
Merck		\$3,326
Current Year Direct Receipts		\$3,326
TOTAL		\$662,715

PUBLICATIONS

1. Bond GR. A new acetaminophen nomogram with a different purpose. *Ann Emerg Med* 2005;46(3):272-4.
2. Geis GL, DiGiulio G. Substernal chest pain with an abnormal electrocardiogram in an adolescent male presenting to a pediatric emergency department. *Clin Pediatr Emerg Med* 2005;6(4):257-262.
3. Gittelman MA, Durbin DR. Injury prevention: is the pediatric emergency department the appropriate place? *Pediatr Emerg Care* 2005;21(7):460-7.
4. Gittelman MA, Pomerantz WJ, Groner JI, Smith GA. Pediatric all-terrain vehicle-related injuries in Ohio from 1995 to 2001: using the injury severity score to determine whether helmets are a solution. *Pediatrics* 2006;117(6):2190-5.
5. Stevenson MD, Bivins CM, O'Brien K, Gonzalez del Rey JA. Child life intervention during angiocatheter insertion in the pediatric emergency department. *Pediatr Emerg Care* 2005;21(11):712-8.
6. Blackman SC, Rey JAGd. Hematologic emergencies: acute anemia. *Clin Pediatr Emerg Med* 2005;6(3):124-137.
7. Hampton R, Balasa V, Bracey SEA. Emergencies in patients with inherited hemoglobin disorders: an emergency department perspective. *Clin Pediatr Emerg Med* 2005;6(3):138-148.
8. Iyer S, DeFoor W, Grocela J, Kamholz K, Varughese A, Kenna M. The use of perioperative antibiotics in tonsillectomy: does it decrease morbidity? *Int J Pediatr Otorhinolaryngol* 2006;70(5):853-61.
9. Johnson LH, Gittelman M. Management of bleeding diathesis: a case-based approach. *Clin Pediatr Emerg Med* 2005;6(3):149-155.
10. Johnson LH, Patterson MD. Simulation education in emergency medical services in children. *Clin Pediatr Emerg Med* 2006;7(2):121-127.
11. Kennebeck S, Bonin L. Epidemiology and risk factors for suicidal behavior in children and adolescents. In: Feigin RD, editor. *UpToDate* [online]. Wellesley, MA; 2006. Available: <http://uptodate.com>
12. Kennebeck SS. Tumors of the mediastinum. *Clin Pediatr Emerg Med* 2005;6(3):156-164.
13. Mahabee-Gittens EM, Huang B. ED environmental tobacco smoke counseling. *Am J Emerg Med* 2005;23(7):916-8.
14. Pomerantz WJ. Septic shock: evaluation and treatment. In: Feigin RD, editor. *UpToDate* [online]. Wellesley, MA; 2005. Available: <http://uptodate.com>
15. Pomerantz WJ, Roback MG. Hemorrhagic hypovolemic shock: evaluation and treatment. In: Feigin RD, editor. *UpToDate* [online]. Wellesley, MA; 2005. Available: <http://uptodate.com>
16. Pomerantz WJ, Roback MG. Non-hemorrhagic hypovolemic shock: evaluation and treatment. In: Feigin RD, editor. *UpToDate* [online]. Wellesley, MA; 2005. Available: <http://uptodate.com>
17. Pomerantz WJ, Roback MG. Definition, classification and initial assessment of shock. In: Feigin RD, editor. *UpToDate* [online]. Wellesley, MA; 2006. Available: <http://uptodate.com>
18. Ruddy RM. Emergency presentations of cancer in childhood. *Clin Pediatr Emerg Med* 2005;6(3):184-191.
19. Schubert C, Chambers PJ. Building the skill of delivering bad news. *Clin Pediatr Emerg Med* 2005;6(3):165-172.
20. Zimmerman S, Makoroff K, Care M, Thomas A, Shapiro R. Utility of follow-up skeletal surveys in suspected child physical abuse evaluations. *Child Abuse Negl* 2005;29(10):1075-83.
21. Tzimenatos L, Geis GL. Emergency department management of the immunosuppressed host. *Clin Pediatr Emerg Med* 2005;6(3):173-183.
22. Vish NL, Powell EC, Wiltsek D, Sheehan KM. Pediatric window falls: not just a problem for children in high rises. *Inj Prev* 2005;11(5):300-3.