

Developmental/Behavioral Pediatrics Fellowship

Training Highlights

Faculty:

The Section of DBPeds currently consists of two full time Board Certified Developmental Pediatricians. Also affiliated with the Section are two part time Nurse Practitioners, a licensed PhD Psychologist, and a dedicated Social Worker. The Section is part of the Munroe Meyer Institute and, as such, has the support of Departments of Occupational and Physical Therapy, Speech and Language Pathology, and Social Work. Complementing a relationship with the pediatric subspecialties of the UNMC Department of Pediatrics and Children's Hospital and Medical Center of Omaha, there is an especially close relationship with Child and Adolescent Psychiatry at UNMC.

Services:

- Developmental/Behavioral Pediatrics Clinics
- Outstate DBPeds Clinics
- Autism Diagnostic Clinics
- NICU Follow-up Clinics
- Congenital Heart Disease Neurodevelopmental Follow-up Clinics
- Opportunity to participate in multidisciplinary developmental disabilities (primarily cerebral palsy) clinics
- Opportunity to participate in Psychology treatment protocols (eg PCIT) and testing (eg ADOS)

Rotations:

DBPeds, including a twice-weekly clinic through which the Fellow will follow patients through the duration of the Fellowship.

- Psychology
- Child and Adolescent Psychiatry
- Genetics and Metabolism
- Pediatric Neurology
- Child Abuse Pediatrics
- OT/PT/Speech and Language Pathology
- Research

Conferences:

Fellows will participate in a variety of conferences throughout the year. These include Pediatric Grand Rounds and the weekly General Pediatric Patient Management Conference. Section activities include journal club, patient management conference, Resident presentations on DBPeds issues, and Board Topics Review. The Department of Pediatrics also has an educational program relevant to Pediatric subspecialty fellows, which the fellow attends.

Research:

Each fellow training in the DBPeds Fellowship will have substantial opportunities to engage in research. Numerous opportunities exist within the section itself and beyond into the larger university community. The goal is to allow each fellow to participate in or develop research in an area of DBPeds, which excites interest. Research mentors can assist the fellow in accomplishing this goal.

The following are some examples of research publications by the faculty:

Ryan, J., Reid, R., & **Ellis, C.** (2008). Special educators' knowledge regarding psychotropic interventions for students with emotional and behavioral disorders. *Remedial and Special Education, 29*, 269-279.

Ryan, J., Reid, R., Gallagher, K. & **Ellis, C.** (2008). Prevalence rates of psychotropic medications for students placed in residential facilities. *Behavioral Disorders, 33*, 99-107.

Sheridan, S.M., Warnes, E.D., Woods, K.E., Blevins, C.A., Magee, K.L., & **Ellis, C.R.** (2009). An exploratory evaluation of conjoint behavioral consultation to promote collaboration among family, school, and pediatric systems: A role for pediatric school psychologists. *Journal of Educational and Psychological Consultation, 19*, 106-129.

Roberts, H.J., Floress, M.T. & **Ellis, C.R.** (2009). Training school psychologists in psychopharmacology consultation. *Psychology in the Schools, 46*, 827-835.

Ryan, J.B., Katsiyannis, A., Losinski, M., Reid, R., & **Ellis, C.** (2014). Review of state medication policies/guidelines regarding psychotropic medications in public schools. *Journal of Child and Family Studies, 23*, 704-715.

Needelman, H., Schroeder, B., Sweney, N., Schmidt, J., Bodensteiner, J.B. & Schaefer, G.B. (2007). Ontogeny and physiology of the cavum septum pellucidum in premature infants. *Journal of Child Neurology, 21*, 298-300.

Jackson, B.J., & **Needelman, H.** (2007). Building a system of child find through a 3-tiered model of follow-up. *Infants & Young Children, 20*, 255-265.

Needelman, H., Schroeder, B., Sweeney, M., Schmidt, J., Bodensteiner, J. & Schaefer, G.B. (2008). Postterm closure of the cavum septi pellucidi and developmental outcome in premature infants. *Journal of Child Neurology, 22*, 314-316.

Needelman, H., Evans, M., Roberts, H., Sweney, M. & Bodensteiner, J.B. (2008). Effects of postnatal dexamethasone on the developmental outcome of premature infants. *Journal of Child Neurology, 23*, 421-424.

Needelman, H., Jackson, B., McMorris, C., & Roberts, H. (2008). Referral for early intervention services in late premature infants with a NICU experience. *Journal of Neonatal-Perinatal Medicine, 1*, 169-174.

Vaughan, B., Roberts, H.J. & **Needelman, H.** (2009). Current medications for the treatment of Attention Deficit/Hyperactivity Disorder. *Psychology in the Schools*, 46, 846-85.

Needelman, H., Hoskoppal, A., Roberts, H., Evans, M., & Bodensteiner, J.B. (2010). The effect of hydrocortisone on neurodevelopmental outcome in premature infants less than 29 weeks gestation. *Journal of Neonatal Child Neurology*, 25 (4), 448-452.

Hoskoppal, A., Roberts, H., Kugler, J., Duncan, K., & **Needelman, H.** (2010). Neurodevelopmental outcomes in infants after surgery for congenital heart disease: a comparison of single-ventricle vs. two-ventricle physiology. *Congenital Heart Disease*, 5(2), 90-95.

Jackson, B.J., **Needelman, H.**, Roberts, H., Willet, S., McMorris, C. (2011). Bayley scales of infant development screening test-gross motor subtest: efficacy in determining need for services. *Pediatric Physical Therapy*, Spring, 24(1):58-62.

Gorra, A.S., **Needelman, H.**, Azarow, K., Roberts, H.J., Jackson, B.J., Cusick, R.A. (2011). Long-term neurodevelopmental outcomes in children born with gastroschisis: the tiebreaker. *Journal of Pediatric Surgery*, 47(1):125-9.

Wynn, J., Aspelund, G., Zygmunt, A., Stolar, C.J., Mychaliska, G., Butcher, J., Lim, F.Y., Gratton, T., Potoka, D., Brennan, K., Azarow, K., Jackson, B., **Needelman, H.**, Crombleholme, T., Zhang, Y., Duong, J., Arkovitz, MS., Chung, WK., Farkouh, C. (2013). Developmental outcomes of children with congenital diaphragmatic hernia. A multicenter prospective study. *Journal of Pediatric Surgery*, 48(10): 1995-2004.

Roberts, H., **Needelman, H.**, Jackson, B., McMorris, C., Munyon, A. (2014). Effectiveness of Community Size on Eligibility for Early Intervention for Infants with a Neonatal Intensive Care Experience. *The Journal of Rural Health*, 30:259-264.

Newton, L., Abdessalam, S., Raynor, S., Lyden, E., Rush, E., **Needelman, H.**, Cusick, R. (2016) Neurodevelopmental outcomes of tracheoesophageal fistulas, *Journal of Pediatric Surgery*, 51 (5); 743-747.

Roberts, H., Harris, R., Krehbiel, C., Banks, B., Jackson, B., **Needelman, H.** (2016) Examining disparities in the long term follow-up of Neonatal Intensive Care Unit graduates in Nebraska, U.S.A. *Journal of Neonatal Nursing*, 22, 250-256.

Farkouh-Karoleski, C., Najaf, T., Wynn, J., Aspelund, G., Chung, W., Stolar, C., Mychaliska, G., Warner, B., Wagner, A., Cusick, R., Foong-Yen Lim, Schindel, D., Potoka, D., Azarow, K., Cotton, C., Hesketh, A., Soffer, S., Crombleholme, T., **Needelman, H.** (2017). A definition of gentle ventilation in congenital diaphragmatic hernia: a survey of neonatologists and pediatric surgeons. *Journal of Perinatal Medicine*, (Epub ahead of print).

Hanson, C., Verdi Schumacher, M., Lyden, E., Su, D., Furtado, J., Cammack, R., Bereitschaft, B., Van Ormer, M., **Needelman, H.**, McGinn, E., Rillett, K., Cave, C., Johnson, R., Weisharr, K., Anderson-Berry, A. (2018). Fat Soluble Vitamins A and E and Health Disparities in a Cohort of Pregnant Women at Delivery. *Journal of Nutritional Science*, 7, 2018, e14.

Quality Improvement:

Opportunities exist to participate in Quality Improvement projects in the Department of Pediatrics and to establish projects within the Section.

Facilities:

The Section of DBPeds is currently located on the campus of the UNMC at Munroe-Meyer Institute. In 2020, the facility, to provide a better experience for its patients, will move to a new site of the Scott Campus of the University of Nebraska Omaha. At MMI, the Section sees a range of DBPeds patients including but not limited to those with ASD, ADHD, developmental delay and intellectual disabilities, and school problems. The NICU follow-up clinic database housed at the MMI Department of education currently includes more than 20000 children.

Patients are also seen at the Children's Hospital and Medical Center. This facility, currently undergoing major expansion due to its role as a regional center for pediatric care, provides the full range of pediatric subspecialty support. At this site, the Section participates in NICIU neurodevelopmental Follow-up clinics, Autism Diagnostic clinics, and several interdepartmental research projects.

Application Process:

Applicants to the Fellowship Program may apply through the Electronic Residency Application Service (ERAS) website (<http://www.aamc.org/services/eras>).

Note that three letters of recommendation are required with the application; this includes one from your current program director.

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