Dear Academy Fellow:

In order to fulfill the admission requirements of AAP Bylaws, you are requested to:

Carefully review the following list of new applicants for Academy membership; and relay your reactions directly to your District Chairperson, whose name and address is at the end of this list.

In submitting these names of board-certified pediatricians to you, it is understood that academic and pediatric credentials are not in question. Comments are requested concerning possible legal and/or ethical situations of which you might have personal knowledge.

Send any comments on the following list of new applicants to your District Chairperson by July 15.
“After ten years of agonizing, diapers, and two ineffective drugs, our son finally has the confidence for a sleepover, thanks to the Potty Pager.”

Daniel E. Turnbull

It’s wireless. It’s private. It inspires letters like this. And now it’s CLINICALLY PROVEN EFFECTIVE.

In a two year clinical study at the University of Alabama medical school, the Potty Pager has been proven 71% effective on hard-to-reach TEEN bedwetters. (Lo, Perez, Hanchrow and Joseph)

So why just “control” bedwetting with drugs when you can CURE it! With the WIRELESS alarm that wakes the BEDWETTER… not the whole house!

The Potty Pager teaches bedwetters to respond normally to bladder fullness. It uses a tactile alarm, much like a silent business pager. It is 100% safe, and costs just $51.00 + S&H. It comes with a 30 day no-questions guarantee.

For complete information call: 800-497-6573 or 303-440-8517

Or visit our web site: www.pottypager.com

IDEAS FOR LIVING, INC. BOULDER, COLORADO 80304

American Academy of Pediatrics

POTTY PAGER

because life’s challenging enough without a bedwetting problem!
Management of Complex Humanitarian Emergencies
Focus on Children and Families

June 19-23, 2000

The George S. Dively Building
Case Western Reserve University
Cleveland, Ohio

Supported by:
Center for International Health, Case Western Reserve University
American Academy of Pediatrics
International Pediatrics Association

This program is intended for pediatricians, primary health care providers, NGO relief professionals and mental health professionals interested in training for the care of children and families during complex humanitarian emergencies.

After attending this program, participants will be able to:
- Identify the most important problems and priorities in complex humanitarian emergencies; Identify organizations most frequently involved in providing help in complex humanitarian emergencies and define their roles and strengths; Identify the groups most vulnerable in complex humanitarian emergencies; Define common psychosocial issues of children and the means to address them; and employ skills in conflict resolution, negotiation, and cross-cultural communication.

University Hospitals of Cleveland designates this educational activity for a maximum of 44 hours of category 1 credit towards the AMA Physician’s Recognition Award.

For additional information on the educational program and registration, or planning for lodging and transportation while in Cleveland, contact University Hospitals CME Program at 216-844-5050.
Zithromax® (azithromycin for oral suspension)

**effective therapy**

*(no spoonful of sugar necessary)*

**5 once-daily doses**
 *(efficacy that's easy for your little patients to take)*

**COVERAGE OF KEY RESPIRATORY PATHOGENS**

<table>
<thead>
<tr>
<th>TYPICAL</th>
<th>ATYPICAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Streptococcus pneumoniae</em></td>
<td><em>Chlamydia pneumoniae</em></td>
</tr>
<tr>
<td><em>Haemophilus influenzae</em></td>
<td><em>Mycoplasma pneumoniae</em></td>
</tr>
<tr>
<td><em>Moraxella catarrhalis</em></td>
<td></td>
</tr>
</tbody>
</table>

**• BETTER COMPLIANCE MAY IMPROVE PATIENT OUTCOMES'**

**• COSTS LESS THAN MOST BRAND-NAME ANTIBIOTICS'**

**• PROVEN TOLERABILITY**

In acute otitis media, the most common side effects are diarrhea/loose stools (2%), abdominal pain (2%), vomiting (1%), and nausea (1%). In community-acquired pneumonia, the most common side effects are diarrhea/loose stools (5.8%), abdominal pain, vomiting, and nausea (1.9% each), and rash (1.6%).

Zithromax® (azithromycin for oral suspension) is contraindicated in patients with known hypersensitivity to azithromycin, erythromycin, or any macrolide antibiotic.

Zithromax is indicated for pediatric infections such as acute otitis media due to *H influenzae, M catarrhalis*, or *S pneumoniae*, and community-acquired pneumonia due to *C pneumoniae, H influenzae, M pneumoniae*, or *S pneumoniae*.

Oral azithromycin should not be used in pediatric patients with pneumonia who are judged to be inappropriate for oral therapy because of moderate to severe illness or risk factors such as any of the following: patients with cystic fibrosis, patients with nosocomially acquired infections, patients with known or suspected bacteremia, patients requiring hospitalization, or patients with significant underlying health problems that may compromise their ability to respond to their illness (including immunodeficiency or functional asplenia).

Please see brief summary of prescribing information on adjacent page.