



Association of Medical School Pediatric Department Chairs

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AMSPDC is pleased to announce the 11th Cohort for Pediatric Leadership Development Program (PLDP)

Juliane Bubeck Wardenburg, MD, PhD



I am currently the Donald B. Strominger Professor in the Department of Pediatrics and Chief of Pediatric Critical Care at Washington University. Upon completion of my M.D. and Ph.D. degrees in Immunology from Washington University in St. Louis, I pursued clinical training in General Pediatrics and Pediatric Critical Care at the University of Chicago. During this time, my research came to focus on the pathogenesis of *Staphylococcus aureus* infection in the laboratory of Dr. Olaf Schneewind in the Department of Microbiology as a Pediatric Scientist Development Program Fellow. Since 2008, my independent laboratory has investigated the role of bacterial toxins in perturbation of host cellular and tissue homeostasis. My research group has made seminal contributions to understanding the pathogenesis of *S. aureus* disease. We identified ADAM10 as the long-sought cellular receptor for *S. aureus* α -toxin, revealing the molecular mechanisms by which the toxin-receptor complex produces the defining pathology of severe staphylococcal infection. This observation challenged the dogma that pore-forming bacterial toxins bound membrane lipids, prompting the rapid identification of proteinaceous receptors for the entire family of *S. aureus* pore-forming toxins. More importantly, this work has provided the intellectual rationale for neutralization of α -toxin as a strategic goal in prevention and therapy of human *S. aureus* disease. Extending our studies in toxin biology, my laboratory has also investigated *Bacteroides fragilis* toxin (BFT), a zinc-dependent metalloprotease that is structurally and functionally related to ADAM10. We have defined the

mechanism of BFT activation, revealing the importance of this toxin in life-threatening infection. Her laboratory analyzed determinants of *B. fragilis* niche acquisition in the colon, demonstrating the ability of a genetically-defined probiotic to mitigate toxin-mediated disease. These studies were the first to reveal the genetic specificity of intra-species competition within the colonic microbiome. I have been fortunate to receive a number of honors for these contributions, including the Society for Pediatric Research Young Investigator Award, the University of Chicago Distinguished Investigator Award, appointment as a Burroughs Wellcome Investigator in the Pathogenesis of Infectious Diseases, and election to membership in the American Society for Clinical Investigation and the American Academy of Physicians.

My primary career goals are two-fold: first, to continue to advance the field of bacterial toxin biology relevant to human disease. Broadly, this entails a continuation of my laboratory's efforts to define novel attributes of the host-pathogen interaction as an internationally recognized leader in the utilization of molecular microbiology and host genetics to examine disease. Specifically, our research findings have positioned me to advance an infant and pediatric vaccine targeting *S. aureus* in order to elicit population-level immunity. I see this as a fundamental opportunity to change human disease, and am therefore pursuing this through continued research and advancement of a novel vaccine down the path of product development and clinical trials. Second, I intend to continue to impact the field of pediatrics through my ability to influence the vital contribution of pediatricians to patient care and research. As a division chief, I have had the opportunity to support the development of a diverse array of faculty and trainees that exhibit leadership locally in the ICU and department, and nationally/internationally through their research contributions that span both clinical and basic science. I see on a daily basis the impact that they have on care of the critically ill child and on the future of our field; concurrently, I recognize the threat that the pressures of modern-day medicine place on the foundation of academic pediatrics. I intend to utilize my talents throughout my career to ensure that this foundation of daily care for infants and children – and the potential to change disease through inquiry – remains strong within our field. I recognize that continually advancing this goal throughout my career may lead me down any number of paths within academic leadership.

Antonio Cabrera, MD, FAAP, FAHA, FACC



Dr. Cabrera is the Division Chief of Pediatric Cardiology and the Co-Director of the Intermountain Primary Children's Hospital Heart Center/ University of Utah in Salt Lake City Utah. He holds the L. George Veasy Presidential Chair and is Associate Professor (tenured) at the University of Utah School of Medicine.

Dr. Cabrera graduated from Universidad Francisco Marroquin in Guatemala. He completed his internship and residency at the Children's Hospital of the University of Illinois at Chicago (UIC). He completed Pediatric Cardiology fellowship at Rainbow Babies & Children's Hospital/Case Western Reserve University and advanced training in Cardiovascular Critical Care at Arkansas Children's Hospital/ University of Arkansas for Medical Sciences in Little Rock, Arkansas.

His first faculty appointment was at Le Bonheur Children's Hospital/University of Tennessee (2006-2010). He served as Assistant Professor and was the founder and first medical director of the Cardiac Critical Care services.

In 2010, he was recruited to Texas Children's Hospital/Baylor College of Medicine in Houston, Texas. While in Houston, Dr. Cabrera was a staff member of the divisions of Critical Care Medicine and Pediatric Cardiology. He was also named Director of the Pediatric Cardiology Fellowship Program (categorical and global), Associate Director of the Cardiovascular Intensive Care and Co-Director of the first Heart Failure Unit for Children in the USA and was promoted to Associate Professor with tenure. Also, at Baylor College of Medicine, he was the recipient of the 2018 Outstanding Clinician Award and the Norton Rose Fulbright Faculty Excellence Award in Teaching and Evaluation. In addition, Dr. Cabrera was the inaugural St. Jude Master teacher speaker at the University of Minnesota and the Jared Ellsworth memorial lecturer at Case Western Reserve University.

In 2019, he assumed the role of Chief of Pediatric Cardiology at the University of Utah and Co-Director of the Intermountain Primary Children's Hospital Heart Center. In Utah, Dr. Cabrera has supported/provided the vision for the Utah Global Pediatric Cardiology fellowship, the

formation of the Pediatric Cardiology Fellow Career Development Academy and was inducted into the Academy of Health Science Educators of the University of Utah.

Dr. Cabrera is a highly regarded educator, clinician, and researcher. He has published more than 100 original articles, editorials and book chapters and has lectured extensively nationally and globally in heart failure, cardiac critical care, and education. He is Associate Editor of Rudolph's Textbook of Pediatrics 24th Edition and the senior editor of two books: The Texas Children's Hospital Handbook of Congenital Heart Disease and Communicating with Pediatric Patients and their Families: The Texas Children's Hospital Guide for Physicians, Nurses and Other Healthcare Professionals. He has authored consensus statements on cardiac critical care, heart failure, training and education and workforce assessments in cardiac critical care and cardiology for the Pediatric Cardiac Intensive Care Society (PCICS), the American Heart Association (AHA), the American Academy of Pediatrics (AAP) and the American College of Cardiology (ACC). He is the past President of the Society of Pediatric Cardiology Training Program Directors (SPCTPD), past chair of the Young Heart Council Early Career Committee and Chair of the fellows in training committee of the AHA and is an Executive Committee member of the Section on Cardiology and Cardiac Surgery of the AAP. In addition, he is a member of the steering committee of the Pediatric Heart Network of the NIH/NHLBI.

Dr. Cabrera's goal is to create mechanisms for better partnerships to help systems evolve and produce measurable outcomes that their members could be proud of in program development, education, and patient care. He lives in Salt Lake City with his wife Melissa and their four children: Martin, Elena, Mariana, and Marco.

Ann Kellams, MD, IBCLC, FAAP, FABM



I was born and raised in Texas and was known for saying I wanted to be a “baby doctor” at a very early age. Brainwashing? Perhaps. My father is a physician and also a mechanical engineer, and my mother an attorney, and I was raised with “of course,” there would be some schooling after college for me. After high school, I attended the University of Texas in Austin for undergrad, graduating with a Bachelor of Arts in Biology summa cum laude as a Dean's

Honored Graduate. I then attended the University of California, San Francisco (UCSF) where I met my husband, also a medical student, from Virginia, and we couples-matched to our first choice, myself in Pediatrics and he in Family Medicine at the University of North Carolina, Chapel Hill (UNC) for residency, and an excellent choice for both of us as we headed for primary care. Academics was not yet on my radar nor in my plans.

Following residency, I worked in pediatric, private practice for nine years. I enjoyed practicing a full-spectrum of outpatient and inpatient pediatric care, and developed lifelong bonds and friendships with colleagues, patients, and families alike. It became obvious, though, that I was encountering many problems that I was not able to solve on my own in the exam room: Healthcare disparities, lack of adequate resources, attitudes and social norms that ran counter to recommended healthcare practices, and problems that needed community rather than individual answers. Teaching became a passion for me as I hosted medical students for weeks at a time in my practice and taught The Healer's Art at the University of Virginia (UVA) School of Medicine, an elective which I helped start in medical school at UCSF. I loved what I was doing, and at the same time, felt I could be doing more. I became involved in the Virginia Chapter of the American Academy of Pediatrics, advocating for needed changes for the betterment of child health. Soon after that, my lifelong dream of being a "baby doctor" came to fruition when in 2006, I applied for and was chosen to be the medical director of the UVA newborn service. My first three years in that role served basically as a fellowship and introduction to academic medicine.

Suffice it to say, I have never looked back. I served as medical director of the Newborn service for 12 years, and am involved in research that aligns with my clinical interests and now am a Co-PI for an R01 and a Co-I on 3 others with a team that published some of our work in JAMA. I became a certified lactation consultant and led the hospital's effort to become Baby Friendly and founded the UVA Breastfeeding Medicine program with both outpatient and inpatient consultations. I am currently serving as President-elect of the Academy of Breastfeeding Medicine a physician organization with over 1,000 members. I am also a clinical coach for around 25 medical students throughout their four years, spending at much as 10 hours a week with them teaching clinical skills, and I also co-chair our very successful annual pediatric conference. I derive great pleasure in using what I have learned in the Healer's Art and in my experience to mentor students, trainees and junior faculty and support them on their journeys.

One of my biggest joys and honors has been serving as Vice Chair for Clinical Affairs for the over 150 pediatric faculty, and I also represent the medical school on the UVA Faculty Senate. I aspire to keep improving myself and to keep using my leadership skills to help us all have what we need to take the best care of patients, families, themselves, and each other, in a way that is sustainable, equitable and effective. One day, I strive to be Chair.

Mark Hall, MD



I have been committed to a career in academic medicine since the earliest days of my training. Having graduated from medical school at The University of Virginia in 1994, I went to Children's Hospital of Pittsburgh where I completed my residency in categorical pediatrics, followed by a year as Chief Resident. I remained at Children's Hospital of Pittsburgh for my three-year fellowship in pediatric critical care medicine and a fourth-year research fellowship. Through superb mentorship and role modeling, the faculty in Pittsburgh fostered my sense of scientific curiosity, clinical excellence, and servant leadership. I joined the faculty of Nationwide Children's Hospital and The Ohio State University in 2002 as one of six faculty members in the Division of Critical Care Medicine, as the division's only tenure-track researcher. Over the last 19 years, the last seven of which I have served in the role of Division Chief, I have been fortunate enough to lead numerous initiatives in my division (and institution) which have resulted in sustained growth in the size and scope of our mission. There are now 26 faculty members in my division, including 5 NIH-funded investigators, along with a thriving fellowship program and one of the largest, busiest safest pediatric intensive care units in the country. My history of program development has been one of the most gratifying aspects of my career to date, and can be summarized as follows:

Clinical program development: The pediatric intensive care unit (PICU) at Nationwide Children's Hospital has grown from 35 beds to 54 beds over the last 18 years, with a current annual census of over 3,000 patients per year. Despite having one of the highest-volume, highest-acuity PICUs in the U.S., our severity-adjusted mortality rate has consistently been among the lowest in the country through my tenure as Division Chief. I have either led or been instrumental in the development and execution of initiatives that have improved in our infrastructure (e.g. life support devices, informatic support), existing clinical programs (e.g. sepsis care), and new programs in neurocritical care, onco-critical care, extracorporeal life support, bioinformatics, and our approach to patients with COVID-19 and its sequelae.

Biomedical research: I am the founding director of the Immune Surveillance Laboratory at The Abigail Wexner Research Institute at Nationwide Children's Hospital. This laboratory is dedicated to understanding the pathophysiology and treatment of pediatric critical illness- and

injury-induced immune suppression. I have held individual NIH funding since 2005, including at the R01 and U-award levels, but I am even more proud of the evolution of the research portfolio of my division as a whole. In 2014 we were one of only 7 sites in the U.S. to be selected for inclusion in the NICHD's Collaborative Pediatric Critical Care Research Network (CPCCRN), the country's only funded research network that focuses on pediatric critical illness, with me in the Principal Investigator role. I led our successful re-competition to remain a member of CPCCRN in 2021. I have been fortunate to be able to develop or recruit clinician-scientists that span the spectrum of science including basic microbiology, transfusion science, resuscitation science, and neurocritical care. My division's publication output has increased by an average of 25% per year for each of the last six years, with a total of 107 divisional peer-reviewed publications in 2020.

Medical education: Excellence in teaching has been a central feature of my career. While I have received teaching awards at the programmatic and Departmental levels throughout my career, one of my greatest sources of pride is the success of the fellowship program in Pediatric Critical Care Medicine here at Nationwide Children's Hospital. I co-founded the program with one of my partners and I served as its Program Director for a decade. In that time, it grew from one fellow per year to four fellows per year in this three-year program, and it continues to thrive, competing exceptionally well on a national scale.

Career goals: My overarching career goal is to advance the field of academic pediatrics through the development of faculty and trainees; through the development and optimization of outstanding clinical programs; and through the development of sustainable, innovative research programs that enhance the health and safety of children. I look forward to learning approaches to enhance the equitable recruitment, retention, and development of a diverse and talented faculty; to develop sound business plans for new clinical programs; and to build forward-thinking research platforms that will broadly benefit the department and institution.

Michael Haller, MD, MS-CI



The child of two public school teachers, I was born in Gainesville, Florida and am a proud graduate of the Alachua County Public School System. I spent my childhood exploring the outdoors and staying active in Boy Scouts (earning Eagle), Soccer, and Piano. After my high school graduation, I left Florida to attend Duke University where I majored in Biology. Based on

the guidance of my long term personal friend and mentor, Dr. Desmond Schatz, current Interim Chair of Pediatrics, I returned to the University of Florida for medical school.... and simply never left.

While in medical school, I met my future wife (now an Anesthesiologist) when we were co-counselors at a summer camp for children with type 1 diabetes. I often joke that diabetes camp provided me with a career and a family. I went on to complete pediatric residency and then fellowship in pediatric endocrinology before taking my first and only faculty position here at the University of Florida in 2006. As a highly motivated and well mentored junior faculty member, I quickly advanced through the promotion process becoming a tenured Associate Professor in 2011 and Full professor in 2016. Along the way, I was fortunate enough to have two beautiful children (currently 8 and 12 years old), develop a well-funded translational research team focused on predicting, preventing, and reversing type 1 diabetes, lead our pediatric endocrinology training program, and do it all in the city where I grew up.

In 2016, I took over the role of Division Chief from another one of my long term mentors, Dr. Janet Silverstein. Since becoming Chief, our division has continued to excel and grow. We now boast 2 emeritus faculty, 9 active faculty, and a staff of over 20 administrators, research coordinators, nurses, dieticians, psychologists, and medical assistants. Just the year we reached our highest ever US News and World Report ranking (#1 in South East, #12 in Nation). Far more importantly our team has developed a number of wonderful fellows and junior faculty who are will undoubtedly take our program to even greater heights.

On a more personal note, I enjoy spending time with my wife, children and 2 dogs outside and in the water. We are blessed to have my parents still healthy and living in Gainesville as well and as such my children get to see their grandparents on a regular basis.

Michael Steiner, MD, MPH



My career goal is to become a chairperson of an academic pediatrics department. This goal has continued to evolve based on both personal experiences and incremental leadership roles that have provided terrific professional experiences.

An important part of my career goal relates to personal experiences through early life. My mother was a county public health nurse and my father taught social work in Syracuse, NY. Growing up with parents focused on service living in this 'rust belt' city was part of a terrific childhood. The racial, ethnic and financial diversity of my friends in the public school system created experiences and relationships that have helped shape my perspective. After finishing college, I spent one year working at Habitat for Humanity in New York City and also spent time living in Central America. Service and social justice issues became increasingly important to me through those years of my life and I saw medicine as a way to have a personally stimulating profession while also serving and helping in tangible, important ways. Almost 30 years later, I believe that my interest in becoming a chairperson extends and focuses these early life passions. I continue to be invigorated by creating programs and structures to serve children and their families. Chairpersons also get the added benefit of developing faculty and staff and institutions who share a similar dedication and commitment.

After attending medical school at Temple University, I completed a combined Internal Medicine-Pediatrics residency at the University of North Carolina (UNC). After residency, I served as a Chief Resident in Pediatrics and this was my first exposure to academic medicine administration. One of my favorite parts of my chief year was actually the weekly meetings between the program director, chairperson and the chiefs working through the program and departmental issues. I then spent two years working as a generalist in a small, rural federally qualified community health center as part of the National Health Service Corps (NHSC). I loved parts of this experience, but it also solidified that I wanted to work at academic centers with a strong service mission, but also research, education and broader advocacy. After the NHSC, I worked at Children's Hospital Los Angeles and now have been back at UNC for over fifteen years.

The administrative opportunities at UNC have helped develop my leadership skills. Within a year of coming back to UNC, I became the medical director of our continuity clinic. Since then, I have served as an Associate Program Director in the Pediatrics Residency, the Medical Director of all Children's Specialty Clinics, Division Chief of General Pediatrics and Adolescent Medicine, a Vice-Chair of Business and Network Development, Vice-Chair of Clinical Affairs, Pediatrician in Chief, Medical Director of Children's Population Health, Associate Chief Medical Officer for the broader UNC Medical Center and finally this year became an Associate Dean of Outreach Initiatives for the School of Medicine at UNC. These roles have provided tremendous professional fulfillment and allowed me to serve in increasingly broad ways. I have also had the opportunity to work with four different chairpersons in the Department of Pediatrics. These leaders have been very supportive of me personally and have been great examples of inspiring leadership.

The chairperson of a Pediatrics department is a broad role including leadership of clinical, education, advocacy, and research missions. I am very excited about a potential future opportunity to be a chairperson. My specific goals are to continue professional development to become competitive for chairperson positions and to eventually become a chairperson. Like most people seeking out chairperson roles, the underlying goal is a desire to improve systems

of care, healthcare and the health of children and their families. I believe that the Pediatric Leadership Development Program will help me develop some of the necessary skills for that important role.