

## ASN Welcomes Our New Councilor, Ronald J. Falk, MD

ASN welcomes Ronald J. Falk, MD, our newest ASN Councilor. Dr. Falk is the D.J. Thurston Professor of Medicine and Chief of the Division of Nephrology and Hypertension at the University of North Carolina (UNC) School of Medicine, as well as Director of the UNC Kidney Center. Dr. Falk has been actively involved in ASN for a number of years and has served the Society in a variety of capacities, including co-chairing the two-day Postgraduate Education (PGE) program that occurs each year at Renal Week entitled “Glomerulonephritis Update: Diagnosis and Therapy” and speaking at ASN’s Annual Board Review Course & Update since 2004. Dr. Falk has also served on several editorial boards, including ASN’s *Journal of the American Society of Nephrology*, *American Journal of Kidney Diseases*, *American Family Physicians*, and has served as the Deputy Editor of ASN’s *Nephrology Self-Assessment Program (NephSAP™)* since 2005. Dr. Falk’s areas of interest are glomerular disease, lupus, vasculitis, dialysis, and ANCA-mediated vasculitis.

## Continuing Medical Education (CME) Update

### *Obtain Your CME Credits for Renal Week Online*

**New this year!** ASN is only accepting completion of the CME/Evaluation online to award credit for Renal Week activities. To claim credits for the Annual Meeting or the one- and two-day courses, use the “CME Evaluation Tracking Form” provided onsite to record data to expedite completion of the online form. Verification of participation requires an ASN User ID and a valid registration ID number for the ASN Annual Meeting and the PGE courses. Go to the ASN website at [www.asn-online.org](http://www.asn-online.org) and click “Access ASN’s Online CME Center” in the Renal Reminders box, then follow the prompts. Your CME certificates are printed in real-time for the sessions you evaluate online. To receive your CME credits, please complete the online form by **Wednesday, January 31, 2007**.

## Join ASN This Winter for Our Annual Renal WeekEnd Meetings

Did you know that there are so many simultaneous presentations during Renal Week that even if you attended back-to-back sessions, you could only partake in about 20% of the entire program? That’s why we’re offering all Renal Week 2006 attendees a special reduced rate to attend our upcoming Renal WeekEnd Meetings, which will take place in February and March of 2007. The meetings will be held in the following cities: Toronto, Canada (February 3 to 4); Los Angeles, CA, (February 10 to 11); Washington, DC (February 17 to 18); New York, NY (February 24 to 25); Seattle, WA (March 3 to 4); Mexico City, Mexico (March 10 to 11); Houston, TX (March 17 to 18); and Chicago, IL (March 31–April 1). Learn more about these programs and register online at [www.asn-online.org](http://www.asn-online.org).

## NephSAP’s ISSN Number

Beginning in January 2007, ASN’s *Nephrology Self-Assessment Program (NephSAP)* will have its own International Standard Serial Number (ISSN). Previously, *NephSAP* had been mailing as a supplement to the *Journal of the American Society of Nephrology (JASN)* and thus carried the same ISSN. Having its own unique ISSN will make it easier in the future for researchers to locate manuscripts that were printed in *NephSAP*. Chris Nemil of the Library of Congress says, “A common use of the ISSN is in citations, so if you aren’t printing separate ISSN on your titles, it makes it harder for researchers and scholars to accurately track or identify where information was found.”

According to ISSN International Centre’s website, the ISSN is the standardized international code that allows the identification of any serial publication, including electronic serials, independent of its country, language, alphabet, frequency, medium, *etc.* ISSN is eminently suitable for computer use in fulfilling the need for file update and linkage, and retrieval and transmittal of data. ISSN also results in accurate citing of serials by scholars, researchers, information scientists, and librarians. In libraries, the ISSN is used for identifying titles, ordering and checking in, claiming serials, interlibrary-loans, union catalog reporting, *etc.*

*NephSAP*’s ISSNs are 1536-836X (print version) and 1934-3175 (online version).

*NephSAP*, one of the three major publications of ASN, was created in 2002 as a self-assessment, education, CME, and Maintenance of Certification (MOC) credit tool for ASN members.

### *National Institutes of Health Changes Grant Application Receipt Dates*

The National Institutes of Health (NIH) announced new standard receipt dates for many of their grant applications, effective January 2007. The NIH announced changes because the electronic systems used to process federal grant applications ([www.grants.gov](http://www.grants.gov), eRa systems) and NIH offices such as the NIH Help Desks and the Center for Scientific Review were unable to handle the traffic caused by large numbers of applicants submitting their applications on the same dates. The announcement indicated that “spreading receipt dates to have a steady flow of applications rather than ‘boom and bust’ cycles will allow many different groups to have a realistic approach to this complex process and maximize electronic system responsiveness.”

The new dates were chosen to offset those times when most agencies set their grant deadlines, typically at the beginning, middle, or end of the month. For example, R01 award deadlines were set earlier than other grant mechanisms to provide additional time for processing in light of the volume of R01 submissions. Meanwhile, the grants most often applied for by new investigators—R03s, R21s, and K awards—have later receipt dates to give inexperienced applicants additional time for proposal development.

For additional information on NIH grants, please visit the [www.nih.gov](http://www.nih.gov). For information on how to apply electronically, please visit the Office of Extramural Research at [era.nih.gov/ElectronicReceipt](http://era.nih.gov/ElectronicReceipt) and/or [www.grants.gov](http://www.grants.gov).

### *Medicare Physician Payment Cuts*

Barring any Congressional action during the 2006 lame duck session, physician payments will be cut by 5.1% on January 1, 2007, due to the sustained growth rate (SGR). These cuts will disproportionately affect nephrologists, as the majority of their patients depend on Medicare and Medicaid. Throughout the fall, ASN staff attended meetings with Congressional staff from the House Ways & Means and Energy & Commerce Committees. These meetings were hosted by the American Medical Association (AMA) and included representatives from more than 45 medical specialty societies. In these discussions, ASN stressed the importance of a multiyear fix, a positive update, and a bonus for voluntary quality reporting. The Congressional staff pointed out that any modification to (or elimination of) the SGR, including a positive update, would require offsets elsewhere. The AMA suggested that the SGR is outdated and should be replaced by the Medical Economic Index (MEI).

A survey done by the Medical Management Group Association showed that the cuts may force many physician practices to either cut health benefits for their employees or lay them off all together. In addition, some physicians may experience total cuts of 10 to 15% due to SGR, expiring geographic adjustments, imaging cuts due to the Deficit Reduction Act of 2005, fee schedule adjustments based on the 5-yr review, and changes in the practice expense methodology. Again, the severity of these cuts depends on any actions taken by Congress during the lame duck session. ASN and its Policy Board will continue to work on your behalf to insist that Congress find an adequate and fair system for physician payments now and in the future and to reduce Medicare physician payment cuts whenever possible.

### *NIH Director's Pioneer Award*

The NIH is inviting applications for the 2007 NIH Director's Pioneer Award. A key component of the NIH Roadmap for Medical Research is the NIH Director's Pioneer Award, developed to support exceptionally creative scientists who propose highly innovative—and potentially transformative—approaches to major challenges in biomedical research. Women, members of groups underrepresented in biomedical research, and individuals in the early to middle stages of their careers are especially encouraged to apply.

For additional information, including application requirements and materials, visit the Pioneer Award website at [nihroadmap.nih.gov/pioneer](http://nihroadmap.nih.gov/pioneer). The application period for the 2007 cycle opens on December 1, 2006, and closes on January 16, 2007.