



# Hand in Hand News

## A Quarterly Newsletter from Advanced Pediatric Associates

### Advancing Pediatric Care for Our Patients!

Volume 25, Winter 2011

#### Advanced Pediatrics Introduces New Developmental Screening Tools!



##### ASQ 3 – Ages and Stages Developmental Screening Questionnaires

Advanced Pediatrics has implemented the **New ASQ 3** Developmental Screening Questionnaires in all well care visits between the ages of 2 months through 5 years. These new questionnaires have been updated based on extensive feedback and a research sample of more than 12,000 children. The ASQ 3 is recommended by the American Academy of Neurology, the Child Neurology Society, First Signs, and the U.S. Department of Health and Human Services as the most accurate, cost-effective, and parent-friendly way to identify children with developmental delays. The new ASQ 3 has added screening questionnaires for infants ages two and nine months, and has updated all questionnaires to add new open-ended questions more sensitive to delays associated with autism.

At each well care visit, our staff will give parents the questionnaire for the next well care visit. **We ask that you wait to complete the questionnaire until the week before your child's next visit and then bring it with you to the visit.** If you were not given a copy of the questionnaire or have lost your copy, we ask that you arrive 10 - 15 minutes early for your well care appointment so that you will have sufficient time to complete this important questionnaire. *If you prefer, you may stop by our office in advance of your appointment and pick up a copy of the questionnaire to fill out at your convenience (prior to the date of your appointment).* After you have carefully completed the questionnaire,

the results will be scored and reviewed by your child's well care provider.

##### MCHAT – Modified Checklist for Autism in Toddlers

In addition to the ASQ 3, Advanced Pediatrics has also added the MCHAT (Modified Checklist for Autism in Toddlers) screening questionnaire to all 18 and 24 month well care visits. This important screening questionnaire is specifically developed to identify autism in toddlers and is available on the **"Well Care & Immunizations"** page of our website. We ask that you download, print and complete the MCHAT questionnaire before arriving at your child's 18 and 24 month well care appointments.

##### Early identification of developmental delays allows for optimal intervention and treatment, assuring children of the best developmental future.

Should the results of a screening indicate a potential developmental delay, we may refer your child to Early Childhood Connections (for children under 3 years) or Child Find (for children over 3 years) for additional evaluation and assistance.

#### Happy Birthday Advanced Pediatrics!



Advanced Pediatrics celebrates **39 years** of caring for infants, children and adolescents! **Founded in 1972 by Doctors Michael Kurtz and Lee Thompson, Advanced Pediatrics has grown to three locations dedicated to providing the most advanced pediatric care available!**

**In partnership with parents, Advanced Pediatrics has been caring for two generations of families!!**

### Advanced Pediatrics Wins MGMA Award!



Once again, Advanced Pediatrics has been designated a **"BETTER PERFORMING PRACTICE"** by the national Medical Group Management Association!! This year Advanced Pediatrics was awarded "Better Performing Practice" in **all four** of the performance areas

evaluated by the MGMA. The staff at Advanced Pediatrics is especially proud to receive this award in the **"patient satisfaction"** category! Advanced Pediatrics has consistently received "Better Performing Practice" from the MGMA in recent years, and was honored to be the only pediatric practice in the Denver area to be featured as a "Success Story" in the 2008 national report.

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## Hand in Hand for Healthier Children



## The Flu is on the Move! It's Not Too Late to Get Vaccinated!



Influenza is a serious virus which causes fever, sore throat, chills, cough, headache and muscle aches. Influenza can cause children to miss a week of school and have a cough for three weeks. Complications from the flu can be serious. This year the Centers for Disease Control and the

American Academy of Pediatrics are recommending a seasonal flu vaccine for **EVERY-ONE over 6 months of age**. Children under age 9 may need two doses to be protected. **Have you vaccinated your children against the flu? Does your child need a 2nd dose?** Please call our Patient Care Line to schedule an appointment for your children before the flu hits Colorado.

**The Flu is Headed to Colorado!** According to the Center's for Disease Control, 17 US states are now reporting widespread flu activity, and 27 states are now reporting regional or local flu activity. Neighboring states of Nevada, Utah and Oklahoma are reporting moderate to high levels of flu. **The good news is that the vaccine is a good match to reported flu strains — so get your family vaccinated!**

## Pertussis (Whooping Cough) and Meningitis Updates

### Pertussis (Whooping Cough)

You may have read in the news that Colorado has been experiencing an increase in reported Pertussis cases. There have been 544 cases reported since July 2010, with 162 confirmed cases in Adams, Arapahoe and Douglas counties. Pertussis is a highly contagious bacterial illness that can cause prolonged and sometimes severe coughing episodes that may end in vomiting or cause a "whoop" sound when breathing in. Pertussis can occur at any age, but is most severe in infants and young children who have not been immunized. The appearance of symptoms is usually 7 to 10 days after exposure. **If a person is exposed to Pertussis, certain antibiotics may help prevent or lessen the disease.** Pertussis can be prevented in most children by immunizing them according to the recommended schedule (2, 4, 6, and 15 months of age, and again at 4 – 6 years and 11-12 years). In addition, a single dose of Tdap is now recommended for all

adults ages 19 through 64 years. **If your child or adolescent has not received the Pertussis vaccine according to the recommended schedule, please call our Patient Care Line at 303-699-6200 to schedule an appointment for vaccination. If you believe your child may have been exposed to Pertussis or has developed severe coughing fits accompanied by vomiting, breathlessness and/or a whooping sound, please call our Patient Care Line to schedule an evaluation by one of our providers.**

### Meningitis

Bacterial meningitis is a rare but sometimes fatal disease which infects the fluid surrounding the brain and spinal cord. College freshman living in dormitories are most at risk for the spread of bacterial meningitis. Currently a single dose of the meningococcal vaccine is recommended at 11 – 12 years. A 2010 outbreak resulting in four deaths in Fort Collins has prompted some local universities to offer

the vaccine to students who have not been vaccinated within the past 5 years. Recent research indicates that meningococcal vaccine immunity wanes after 5 years, and the Centers for Disease Control is in the process of reviewing whether a booster should be recommended at 16 - 17 years. This review may take several years and without an official recommendation by the CDC, insurance companies will not cover a booster. **If you have a college student living in a dormitory and it has been over 5 years since he/she has been vaccinated against bacterial meningitis, we recommend that your student take advantage of any meningococcal vaccine program offered by his or her university.** Universities are able to get limited supplies of the vaccine at little or no cost from the health department. Commercially available meningococcal vaccine is very expensive and patients must pay out of pocket to receive the vaccine through their health care provider.

## Well Care Visits, Covered Services & Health Care Reform

Recent health care reform laws require most insurance plans to provide **100% coverage** for children's regular well care visits and immunizations, allowing more families to take advantage of these important preventative health visits. Unlike acute care visits that are limited to diagnosing and treating a specific illness, well-care visits have a much broader focus. Before children reach their 18th birthday, they will be seen for a total of 26 well care visits as they move through the developmental stages of infancy, childhood and adolescence! These visits, recommended by the American Academy of Pediatrics, benefit both the child and the parents with their comprehensive focus on health promotion, anticipatory guidance, disease prevention and detection. In addition they help establish a strong relationship between the family and pediatric practice, providing your child a **"medical home"** and continuity of care.

At a well-care visit, your provider will focus on health supervision and promotion, as well

as answering questions and discussing specific concerns. The health supervision portion of the well-care visit includes a full physical exam, relevant clinical or developmental screenings, assessment and monitoring of growth, and identification of health or behavioral risks, as well as ensuring that immunizations are up to date for the prevention of disease. Health promotion at the well-care visit includes education about the many aspects of healthy child development: developmental milestones, social and emotional skills, sleep, behavioral guidance and discipline, nutrition and healthy weight, physical activity, oral health, sexual development, and safety and injury prevention.

Occasionally a well-care visit turns into a more extensive visit, in which a provider addresses issues beyond the scope of services covered in a well care visit. For example, your child may have a chronic condition that needs more in-depth evaluation, discussion or treatment; or perhaps the provider identifies a particular health risk and provides more in-

depth counseling during the visit. When this happens, the provider documents both the well-care and the additional issues in the medical record and "codes" the visit for insurance submission. The charge will include the well-care visit and, if appropriate, a separate charge for **"additional issues."** Many insurance companies are now charging a co-payment for these extra issues since they are considered outside the scope of the regular well-care visit. Our providers do their best to alert patients when the visit may result in an **"additional issue"** charge, but different insurance companies and plans have different rules.

For more information on what is included in each well care visit, please visit the **"Well Care & Immunizations"** page of our website. For your convenience in scheduling well-care visits, our schedule is open **three months** in advance. We recommend scheduling your child's appointment as early as possible as these appointments fill quickly, especially during the summer months.



## Nutrition Tip for Winter - Kids Like Low Sugar, High Fiber Cereals

According to a recent Yale University study published in the journal of Pediatrics, given the chance, children like cereals that are lower in sugar and often enjoy adding fresh fruit. The study tested six cereals among 91 summer day campers (ages 5 - 12 years old), randomly dividing the kids into two groups. The first group was given a choice of three low sugar cereals and the second was given a choice of three high sugar cereals. In both groups, children said they "loved" or "liked" the breakfast. Over half of

the children in the "low sugar" group put fresh fruit on top of their cereal, where only eight percent of the children in the "high sugar" group added fruit on top. Children in the high sugar group consumed almost twice as much refined sugar as children in the low sugar group, even though the low sugar group was allowed to sprinkle table sugar over their cereal if they wanted to. **This study shows that children offered low sugar cereals and fresh fruit can enjoy a much more nutritionally balanced breakfast than those offered only high sugar**

**cereals. What's more, many lower sugar cereals are also higher in fiber, helping children feel**



**full longer and reducing the risk for obesity, heart disease and gastrointestinal problems.** Advanced Pediatrics recommends offering children low sugar, high fiber cereal topped with fresh fruit and served with low fat milk as a tasty way to reduce sugar and increase vitamins and fiber.

## Infants



### Infant Sleep Positioners Pose Suffocation Risk

Recently the Consumer Product Safety Commission issued a warning that infants should not be placed to sleep on sleep positioners due to the risk of suffocation if infants roll up against the side of the positioner. These positioners, which elevate the baby's head, have caused the suffocation of more than a dozen infants. Advanced Pediatrics recommends infants be placed on their back to sleep on a standard size crib mattress.

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Sleep positioners, pillows, and stuffed animals **ALL** pose a suffocation risk to sleeping infants.

### Prenatal Maternal Environmental Exposure Increases Risk of Childhood Asthma

At the World Allergy Organization 2010 International Scientific Conference, Harold Nelson, MD, professor of medicine at National Jewish Health in Denver, discussed recent studies demonstrating that prenatal maternal exposure to certain environmental factors can trigger genetic changes in a developing fetus which might lead to an increased risk of childhood wheezing and asthma. Preliminary studies have linked an increased risk of childhood asthma in

infants whose mother was exposed to the following environmental factors while pregnant:

- ◆ Insufficient levels of vitamin D.
- ◆ Increased Acetaminophen (Tylenol) usage.
- ◆ Domestic spray chemicals.
- ◆ Maternal use of antibiotics.

Advanced Pediatrics recommends that all pregnant women eat a healthy diet, take prenatal vitamins, avoid chemical exposure, and consult with their physician before taking over the counter and prescription medicines.

## Children

### Imaging Studies Show ADHD is Real

Studies in recent years increasingly point to the fact that ADHD is a real, brain based disorder, and scientists are beginning to understand what neurocircuits and genes are involved. Imaging studies of people with attention deficits show a pattern of below normal activity in the brain's frontal lobes, which is responsible for executive functioning. Low levels of activity in specific circuits explain why using stimulants help these circuits to function more normally. According to professor Bruce F. Pennington, a professor of psychology at the University of Denver, "If a child has a deficit in dopamine, it's harder to concentrate on goal-oriented be-

havior, and psychostimulants change the availability of dopamine in these same circuits." According to Dr. Maximilian Muenke, chief of the medical genetics branch at the National Genome Research Institute, ADHD is thought to have a strong genetic component -- identical twins are 80 % likely to both have ADHD, versus only 20 - 30 % of fraternal twins or other siblings. Recently Dr. Muenke's group published a paper identifying a gene associated with both the disorder and a favorable response to stimulants. Scientists believe that multiple genes are involved in ADHD, and Dr. Muenke believes that one day doctors will be able to develop personalized medicine for ADHD tailored to a child's specific genetic makeup.

### AAP Reviews Use of Probiotics

In a recent clinical report, the American Academy of Pediatrics states that in otherwise healthy children, probiotics can **reduce the duration of diarrhea from acute viral gastroenteritis by one day IF** administered early in the course of the illness. In addition, probiotics have been found modestly effective in **preventing antibiotic associated diarrhea** in otherwise healthy children, though there is no evidence probiotics are effective at treating this type of diarrhea once it has started. **Probiotics should not be given to chronically or seriously ill children.**



## Adolescents



### High Sugar Drinks and Foods Put Teens at Risk for Diabetes and Heart Disease

A recent National Health and Nutrition Examination Survey among over 2,000 teens showed that the average teen consumes 119 grams (476 calories) of sugar a day, representing 21% of total calories consumed daily. According to Jean Welsh, lead

researcher from Emory University, "**Sugar-sweetened soft drinks and sodas are the major contributor of added sugar and are a major source of calories without important nutrients.**" Welsh's team found that teens who consumed the most added sugar had higher LDL ("bad") cholesterol and triglyceride levels and lower levels of HDL ("good") cholesterol. The American Heart Association recommends teens consume no more than 100 calories a day of added sugar for females and 150 calories a day for males. Unfortunately, most teens consume

more than twice the recommended level of sugar daily. According to Dr. David Katz, director of the Prevention Research Center at Yale University School of Medicine, "Sugar is by no means the sole dietary threat to the health of adolescents, or adults, but we now have evidence it certainly counts among the important threats to both. Reducing sugar intake by adolescents, to prevent them becoming adults with diabetes or heart disease, is a legitimate priority in public health nutrition."



# Focus on Wellness



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9397 Crown Crest Blvd., #330  
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## New Year's Resolutions for Kids - Excerpt from the American Academy of Pediatrics

### Preschoolers

- ◆ I will brush my teeth twice a day, and wash my hands after going to the bathroom and before eating.
- ◆ I won't tease dogs or other pets – even friendly ones. I will avoid being bitten by keeping my fingers and face away from their mouths.



### Kids, 5- to 12-years-old

- ◆ I will drink milk and water three times each day, and limit soda and fruit drinks to once each day.
- ◆ I will apply sunscreen before I go outdoors on bright sunny days. I will try to stay in the shade whenever possible and wear a hat and sunglasses, especially when I'm playing sports.
- ◆ I will try to find a sport (like basketball or soccer) or an activity (like playing tag, jumping rope, dancing or riding my bike) that I like and do it at least three times a week!
- ◆ I will always wear a helmet when bicycling.
- ◆ I will wear my seat belt every time I get in a car. I'll sit in the back seat and use a booster seat until I am tall enough to use a lap/shoulder seat belt.
- ◆ I'll never give out personal information such as my name, home address, school name or telephone number on the Internet. Also, I'll never send a picture of myself to someone I chat with on the computer without my parent's permission.

### Adolescents, 13-years-old and up

- ◆ I will eat at least one fruit and one vegetable every day, and I will limit the amount of soda I drink to one glass daily.
- ◆ I will take care of my body through physical activity and nutrition.
- ◆ I will choose non-violent television shows and video games, and I will spend only **one to two** hours each day – at the most – on these activities.
- ◆ When I feel angry or stressed out, I will take a break and find constructive ways to deal with the stress (exercising, reading, writing in a journal or discussing my problem with a parent or friend).
- ◆ I will resist peer pressure to try drugs and alcohol.
- ◆ I agree not to use a cell phone or text message while driving and to always use a seat belt.

## Winter Sports Safety



Winter is upon us, and with that comes family fun in the snow and mountains! Keep in mind the following safety tips when enjoying winter sports:

### Wear a Helmet

- ◆ Children and adolescents should **ALWAYS** wear a certified helmet when they ski, sled, snowboard, play ice hockey or ice skate.
- ◆ Getting the right type of helmet with a proper fit is key to safety. There are different helmets for different activities. All helmets should meet federal safety standards for the specific sport your child will be participating in.

### Skiing and Snowboarding

- ◆ Have your children take lessons taught by a qualified instructor.
- ◆ Stay on marked trails designated for your children's level of experience, and never allow them to ski or snowboard alone.

### Sledding and Tubing

- ◆ Find a hill clear of obstacles that is not icy. Make sure it does not lead to a street, body of water or crowded gathering place.
- ◆ Sit up straight with feet forward - lying down increases the risk of head and back injuries. Make sure an adult is supervising.

### Snowmobiles

- ◆ Do not allow children under the age of 16 to operate a snowmobile. Never have children under the age of five ride a snowmobile (even with an adult).
- ◆ All passengers should wear a certified helmet designed for high-speed motor sports.