

WHAT'S HAPPENING at Century-Airport Pediatrics at Caritas

FALL/WINTER 2016

2625 Harlem Rd., Suite 210 • Cheektowaga, NY 14225
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WINTER VIRUSES

INFLUENZA - The "FLU" Virus: Jan. > March
Fever, Congestion, Cough, Muscle Aches, Pink Eye, Headache, Sore Throat (All Symptoms Can Last 5-7 days)

VACCINE: Annually for all patients is recommended
CALL IF: Worsening Symptoms after 3 days or symptoms not improving after 5 days.

We have created many **extra Nurse Visits ('shot visits')** during the months of **November and December**, in order to accommodate all of our patients & families who are interested in **receiving the vaccine**. There is **NO** advantage to getting the vaccine (injection) before December, based on the timing of past years' influenza outbreaks.

PARAINFLUENZA - "Para flu" The CROUP Virus: Oct. > Dec.
Fever, Barky Cough, some Congestion & Pink Eye.
Worsening Cough on 2nd & 3rd Nights of Illness.

VACCINE: None
CALL IF: Stridor (inspiratory honk noise).

RESPIRATORY SYNCYTIAL VIRUS - (RSV): Nov. > Feb.
Fever, Harsh Cough, some Congestion & Pink Eye, Wheezing & Worse Cough on 3rd & 4th days, More Phlegmy Cough at 5-7 days

VACCINE: Injectable Antibodies monthly x5 months to very high risk infants only
CALL IF: Increasing Frequency of Cough, Increasing # of Coughs In a Row, Ear Pain that develops after 3 days, Worsening Feeding or trouble sleeping due to Cough.

ROTA VIRUS - (Rota) The 'DIARRHEA' Virus: Jan. > April
Fever, Vomiting, Diarrhea, possible Congestion.
Diarrhea can last 2 Weeks (worse days 2-5).
The virus lives on surfaces for several days.

VACCINE: Oral recommended for infants
CALL IF: Vomiting more than 36 hrs, Worsening diarrhea after 3rd day, Signs of Dehydration

INFLUENZA & THE 'FLU' VACCINE

We will administer this year's vaccination through January 2017 in order to help prevent against influenza disease. PLEASE CHECK THE WEBSITE FOR SPECIFICS AND UPDATES REGARDING OUR FLU VACCINE POLICIES.

Children under 2 years of age are the most likely age group to end up in the hospital, with pneumonia or dehydration, as a result of the flu illness. **Children ages 2 - 5 years-old** are the most likely to spread the disease to others. **Children with Asthma and other Medical Disabilities are at greater risk for significant illness when exposed to the flu virus.** While the actual virus is very contagious, the vaccine does not produce a contagious state.

[See above and our website for details]

WEBSITE UPDATED & INCLUDES PATIENT PORTAL

WWW.CENTURY-AIRPORTPEDS.COM

Our **PATIENT PORTAL** is available through our **WEBSITE**. It should allow parents / patients to **VIEW PERSONAL INFORMATION** about upcoming scheduled appointments, recent medications prescribed, and recent laboratory results.

REQUESTING APPOINTMENTS AND FORMS for completion can also be done through the **PORTAL**. After completing the **'ENROLLMENT PROCESS'**, the health record can be accessed with a password created by the parent or patient. Check the Website for further information. Reminder : this is **NOT AN INTERACTIVE Website**, nor is the Portal going to be used as a back and forth conversation tool. It is for access to information. The Portal provides another way for our practice to effectively and conveniently communicate with our patients, in a 'very secure' way.

MENTAL HEALTH COUNSELING

There is a growing need in our community for increased mental health resources for our pediatric patients in our rapidly changing social environment. It has been shown over the past several years, that more and more children are in need of some form of mental health counseling. Our practice has always placed an emphasis on good mental health for our patients and families, by providing additional time at 'well visits' and specific detailed handouts at 'well visits'. We have also had psychologists available at our office for many many years. Our Providers have all embraced the idea that good preventive mental health takes place at our 'well or healthy visits'.

Two members of our staff (Nina & Becca) have received certificates in Mental Health Counseling, and have been helping our patients with counselling at our office. They are working closely with the Providers to offer the highest quality mental health care available at any Pediatric Medical Practice.

We are experiencing significant success, based on patient / parent reviews, and based on our providers' assessments of our complicated patients. We will continue to offer this service, and the availability of Dr. Butters, as a licensed psychologist, when he is the best option.

URGENT CARE & E.R. VISITS:

'Convenience Care' that may NOT always be the 'Best Care' - Call First!

We have had an increasing number of patients going to ERs and Urgent Care facilities when we could have provided the care **at our office on the same day or next day.**

The convenience care at these facilities does not include your child's **medical record**; and a **pediatrician** is not always available to see your child. We have been frequently disappointed in the **QUALITY OF PEDIATRIC DECISION MAKING AT OTHER URGENT CARE FACILITIES**, where there may not be a pediatrician.

By calling us first, we can direct your child to the best care and most convenient care! So, please call first!

OFFICE HOURS & AFTER HOURS

We begin seeing sick patients at 8:30 a.m. weekdays
Monday through Thursday 8am-7:30pm
Friday 8am-6:30pm
Saturday 8am-2:30pm
Sunday (sick calls only)..... 10am-12:30pm
Late in the day sick appointments and Sunday appointments are prioritized by illness for sick children that same day.

Call after 12 noon on weekdays if same day evening sick visit is needed.
We try to avoid booking "after school" (after 3pm) sick appointments until 12 noon, since these appointments are in demand, but must be prioritized somewhat by illness severity.
• **When we are not in the office**, one of the doctors is available for **emergencies** by calling our answering service at **695-7015** (expect a return call within 10 minutes.)
• **Please try to call during office hours whenever possible.**



www.century-airportpeds.com

OVER-THE-COUNTER (OTC) MEDICATIONS

Please review our one-page handout at our website and in our office.

All over-the-counter medications should be **discussed** before giving to children **under 6 months of age**.

Children **between 2 years-old and 5 years-old** can take otc meds under proper supervision and **guidance by our staff**.

Reading labels on medications is encouraged **after 6 years-old**; we are available for **discussion whenever needed**.

AFTER HOURS, CALL IF:

FEVER: • 100.3 in 2-month-old or younger

- 102 for six straight hours • Frequent cough • Bloody diarrhea
- Pain to urinate • Swollen joint

COUGH: • Every 10 minutes or less without break

- More than 4-5 coughs in a row repeatedly
- Inability to drink or sleep due to cough

DEHYDRATION: • Dry lips • Lethargic

- Frequent vomiting and/or diarrhea

TRAUMA: • Open wound • Confusion or vomit twice

OTHER: Any time child is confused or can't sleep from pain

WHAT TO DO WHEN SYMPTOMS ARE PRESENT

NASAL CONGESTION: Can be due to viruses, allergies, irritants, or some combination of these. Nasal Saline Drops/ Spray/or Gel can always be used several times each day. Frequent drinking of clear thin fluids may help also, especially right after Nasal saline. Cool Moist Air by Humidifier (clean daily), and/or cracking windows open, may help.

CALL IF: ear pain, worsening headache or sore throat, or congestion that is worsening on the 5th day of illness or not improving on the 10th day of illness.

FEVER: *Body's response to viral or bacterial infections*

AVOID bathing/Give plenty of fluids/ 2 loose layers of clothing. Simple digital rectal thermometer is most accurate in young children. Tylenol/Advil/Motrin for discomfort from fever.

CALL IF: • Dark red blood dots

- Any fever greater than or equal to 100.3 in infant < 2 months old
- Fever of 102+ for more than several hours in a row
- Fever over 101 lasting a 4th straight day
- Any rash that is purple or dark blood dots
- High fever PLUS: pain to pee, blood in stool, severe headache or very frequent cough.

COUGH: Give clear (see through) fluids to drink. Can try (over 6yo) RobitussinDM or MucinexDM in am & pm. Use humidifier.

CALL IF: cough getting more frequent (especially if every 10 minutes w/o a break), or if several coughs (> 4 or 5) in a row repeatedly, or if poor drinking, or if cannot sleep at all.

DIARRHEA: *Give 2 oz. of clear fluids (Pedialyte is best, Gatorade, white grape juice, popsicles are good) + starchy foods. See "DIARRHEA Tip Sheet" at office or on website.*

CALL IF: • Vomiting frequently without drinking anything OR more than 2 days in a row OR yellow/green vomit

- Bloody diarrhea OR signs of **DEHYDRATION**
- **DEHYDRATION:** dry lips + dry mouth, extreme fatigue/lethargy, no urine output for 12 hours, no tears with crying.

OUR STAFF

Dr. 'TONY' Vetrano Dr. 'JOSEY' Welliver Dr. 'JEN' Roller

Dr. 'LAURIE' Kasnicki Dr. 'TED' Andrews

Nurse Practitioners (P.N.P.) **CHRISTINA, ELENA, JAMIE, DEBBIE, DEBORAH**
Nurses..... **Amy, Amanda, Jen H., Liz R., JamieLee**
..... **Judy, Jennifer, Stephanie, Christina**
Medical Assistants **Lisa, Janesa**
Reception **Elaine, Heather, Jean, Diane, Stephanie, Amber, Chelsea**
Billing Coordinators **Colleen, Liz K**
Office Manager..... **Kim W.**

WELL CHILD VISITS

- | | | |
|------------------|--------------------|-------------------------------|
| • 3-7 days-old | • 12-13 month-old | • 4-4 1/2 year-old |
| • 1 month-old | • 15-16 month-old | • 5-5 1/2 year-old |
| • 2 month-old | • 18-20 month-old | • 6 year-old to 19th birthday |
| • 4 month-old | • 2 year-old | (1 visit annually) |
| • 6 month-old | • 2 1/2 year-old | |
| • 9-10 month-old | • 3-3 1/2 year-old | |

CALL FIRST WEEK OF THE MONTH PRIOR TO THE DESIRED APPOINTMENT!

(e.g., call early January for February appointment in order to get preferred time & MD!)

We, as a staff, value the education and relationships that are established and transpire at these crucial visits. Our practice strongly encourages these visits as we have developed protocols for the best preventative medicine and best evaluation of child development and behavior. We spend an extra 5 minutes at each of these visits to be sure that we have evaluated the overall health of your child. **The American Academy of Pediatrics and health insurers have used good data to support the benefits and payment for these visits.**

VACCINES & VACCINE REFUSAL

Refusal to vaccinate has become a major problem in our community, with potential to cause serious illness and death to children. Refusal to vaccinate at the recommended time periods, especially for DTaP, HIB, Prevnar, Meningococcal, is considered negligence by each member of our provider staff, based on sound scientific research and success of these vaccines (saving lives).

HEALTH INSURANCE BILLING ISSUES

We have always billed standard fees as recommended by health insurers for our services provided. These fees include additional charges for evening and weekend sick visits. With more patients enrolled in plans that have deductibles or savings accounts, there is a need to explain these fees as customary in the community. Our practice has always excelled at keeping costs to a minimum, as we try to spend extra time at office visits and more time on phone advice and written medical information. We always want to help our families with AFTER HOUR DECISIONS by encouraging a phone call before a child is taken to an emergency room or Urgent Care.