

# Pediatric & Adolescent Associates

## News to Use ~ Summer 2009



### *Happy 50th Birthday PAA!!!*



### Our History

Pediatric & Adolescent Associates was founded 50 years ago on the principle of excellent medical care in a warm, friendly environment. Started in 1959 by Dr. Jim Wilhite, PAA has grown from a small one physician office, to one of the largest pediatric clinics in the state. Through the years, we have grown in personnel and facilities without sacrificing personal qualities. With 12 Board Certified pediatricians and a group of highly trained nurses, technicians and staff, PAA is able to offer a wide variety of services including lab and xray in our office. We strive to offer the best pediatric care and to be very accommodating to our patients. Because of the longevity of the practice, we are now being rewarded with the ultimate compliment: 2 and 3 generations of PAA families!



## 50 Year Celebration Activities

Look for our PAA Celebration Insert in the

Lexington Herald Leader

Saturday, June 13<sup>th</sup>

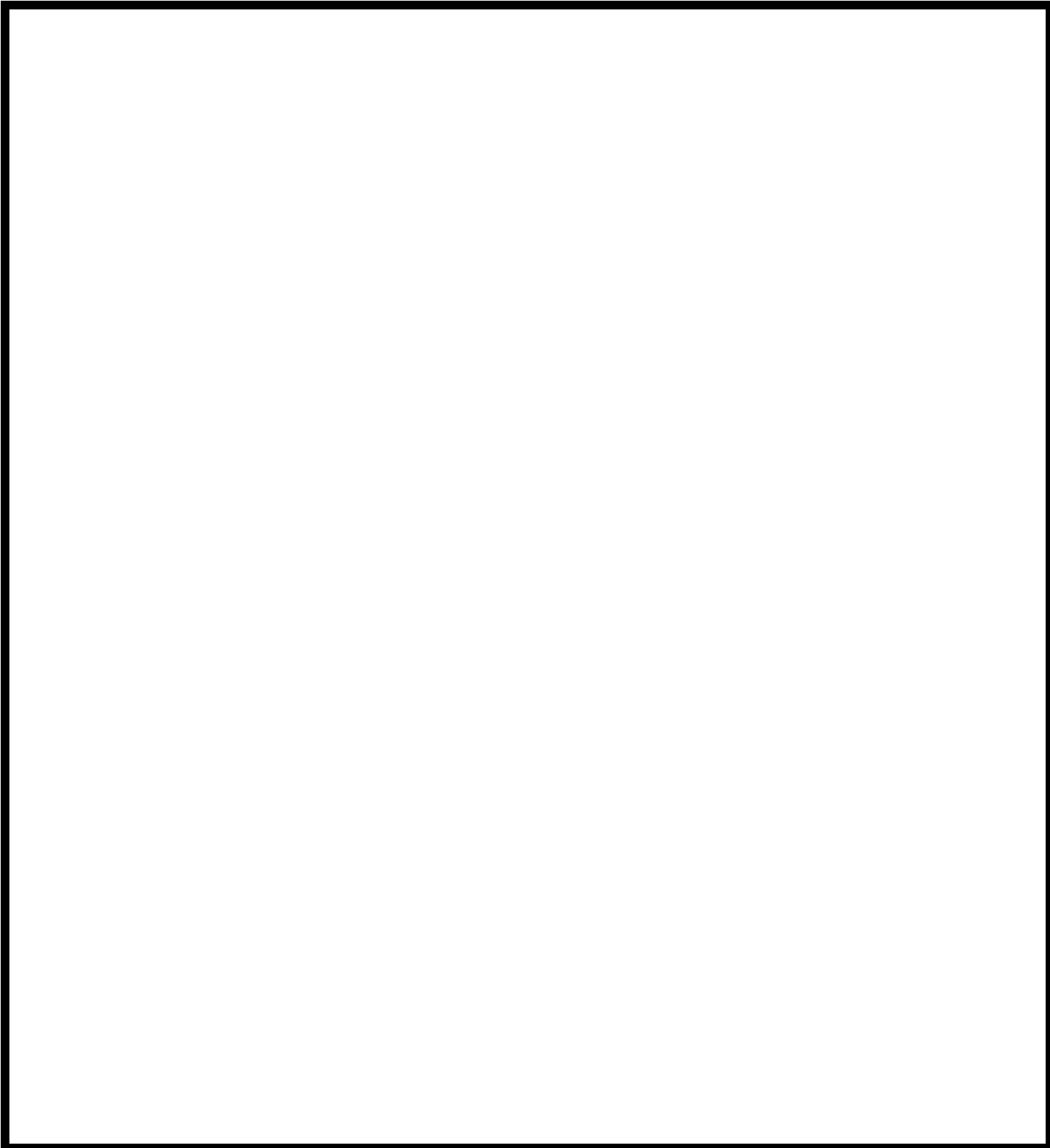
### ~ PAA Mascot Contest:

Have your child develop, draw and color what they think would be a good mascot for PAA. The winner will have their mascot displayed on our website and will win a \$50 gift card to Joseph Beth Booksellers. Entries can be turned in at either PAA location until Friday, August 28<sup>th</sup>. Be sure to include the child's name, age and phone number.

### ~ Coloring Contest:

Have your child draw a picture of their favorite PAA doctor. We will have 3 categories – Ages 1-5, Ages 6-11 and Ages 12 & up. The winner from each age group will receive a \$50 gift card to Joseph Beth Booksellers. We will also choose one picture of each physician to display on our website with that doctor's biography. Entries can be turned in at either PAA location until Friday, August 28<sup>th</sup>. Be sure to include the child's name, age and phone number.

\*Winners will be notified and announced in September\*



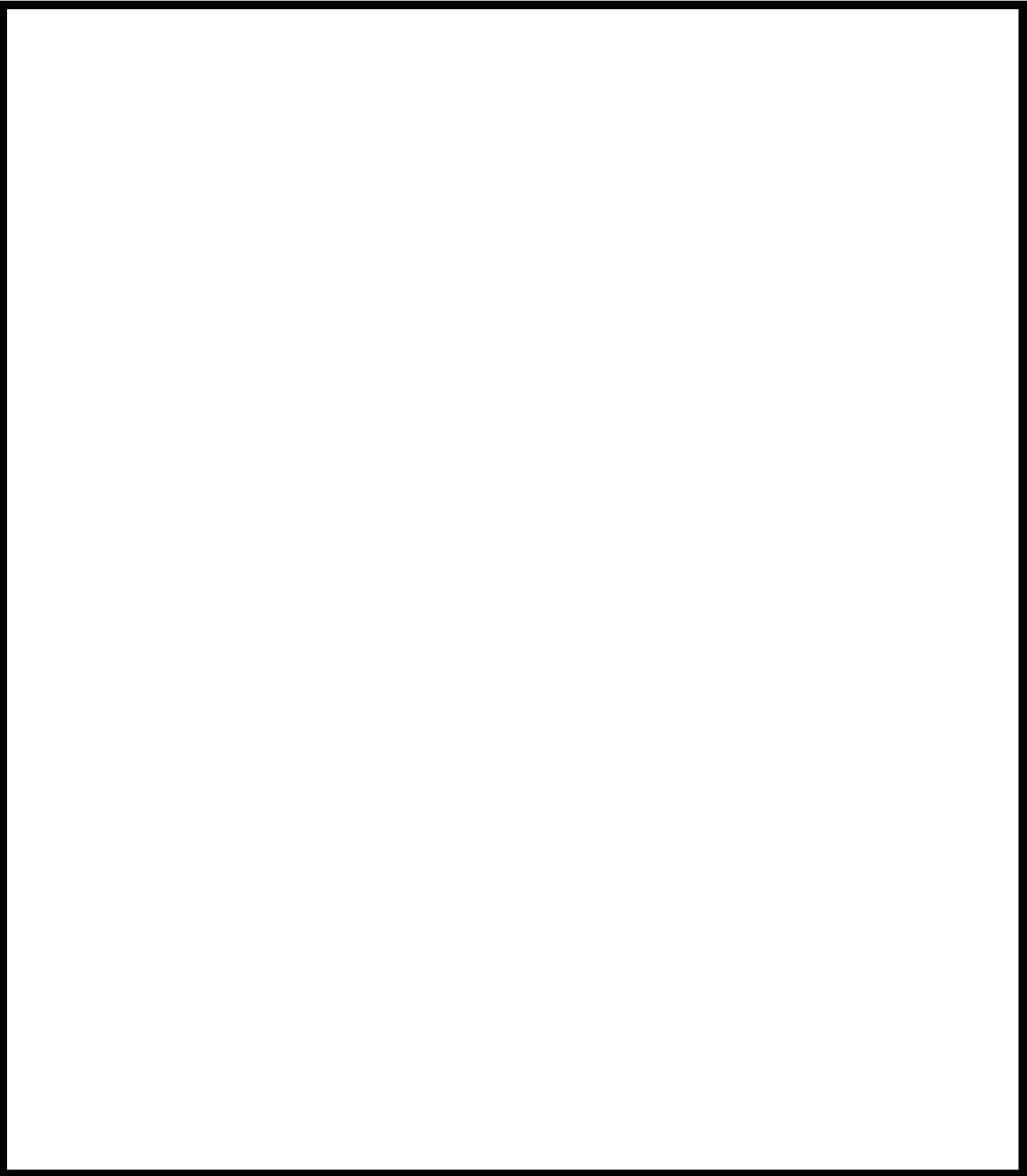
Use the above space to draw a picture of your FAVORITE doctor at PAA!

My Picture is Doctor: \_\_\_\_\_

Name : \_\_\_\_\_

Age : \_\_\_\_\_

Home Phone # : \_\_\_\_\_



Use the above space to draw and color your idea for the PAA mascot!

My Mascot is called : \_\_\_\_\_

Name : \_\_\_\_\_

Age : \_\_\_\_\_

Home Phone # : \_\_\_\_\_



# Healthy Living

A healthy lifestyle should be a family's priority. This will provide parents and children with a strong foundation for a lifetime of health. Children learn by example and the best thing we can do as parents is to eat healthy and be physically active. Studies show that individuals that learn these healthy habits as a child are more likely to continue them into adulthood. A healthy lifestyle means exercise every day, healthy eating and plenty of sleep.

**Everyone needs regular, physical activity every day.** This includes children and it can be accomplished with play or an organized sport.

- Find an activity that is not only fun, but developmentally appropriate for your child. Your pediatrician can help you communicate to your child why physical activity is important and they may also suggest an activity or sport that is best for your child.
- Children who see their parents enjoying activity are more likely to do so themselves. Going for a walk or a swim, riding bikes or playing out in the yard are great ways to exercise with your child. This will not only encourage your child to be active, but it is also a great way to spend quality time with them.
- Make time for exercise and limit television and video games. The AAP recommends no more than 1-2 hours of screen time a day. This includes television, computer and video games.

**The AAP encourages families to think of their nutritional decisions as health decisions.** Food provides our children with the nutrients they need to develop healthy, strong bodies and give them the energy to grow, play and learn.

- Some parents become concerned that their child is not eating enough, but must remember that kids have small stomachs and high energy needs. These nutritional needs can be met with three meals and 2-3 healthy snacks a day. Remember that a child's portion size is 1/4-1/3 of an adult's which is about 1 tablespoon of each food for each year of the child's age.
- Children that skip breakfast may have trouble concentrating at school, lack energy to play, and tend to eat unhealthy snacks throughout the day. It is important that your child to eat breakfast every day and have healthy snacks between meals.
- Kids enjoy snacks, but it may be hard to convince them that healthy snacks are good. Fresh fruit, raw vegetables and low fat dairy products are good examples and can be made fun by cutting them into shapes or providing dip - kids love to dip their food!

Involve your child with their nutrition starting at the grocery store and at home as you prepare and serve meals and snacks. They are more likely to eat something that they helped to prepare. One the most important things you can do as a parent is to encourage healthy habits with your child early on and lay that foundation for a healthy, active life. And remember, it's never too late to start!

## Check Up Season is Here!!

The American Academy of Pediatrics (AAP) now recommends that all children have a check-up/physical every year. Please call to schedule these appointments 2-3 months in advance as this is a busy time of year for school physicals. We have school and sports forms available at the office, but if you have any camp, college or special forms that need to be completed, please bring them with you to your appointment. If your child has had immunizations somewhere other than PAA and we do not have record of these dates, also bring these with you. Your child may not be able to receive immunizations at their visit if we do not have a complete immunization history.

## Bicycle Safety

Starting when they get their first bicycle or tricycle, children must be taught the importance of safety and the need to wear a helmet every time they ride. A bike is not a toy, but a vehicle, and children should receive training in bicycle riding and safety. Everyone must follow the "Rules of the Road". This includes stopping to look both ways before entering the street, riding on the right side of the street with traffic, stopping at all intersections and using hand signals before turning. It is never a good idea to ride after dusk or at dark and parents need to set limits on where the child can ride based on age and maturity level. Parents can teach children to keep their bikes in good condition by checking tires and brakes as well as seat and handlebar height. You can set an example by riding with your child and wearing a helmet every time you ride. Establish this habit early and talk to your child about the importance of protecting his/her head. Don't let your child ride their bike without a helmet and take away riding privileges if they don't. Praise your child or reward them for wearing their helmet without being told to. Teaching these basic safety measures will keep bike riding enjoyable and safe.



## What should I do if my child has a head injury?

Children are very active and the warm weather usually means more calls to our office about injuries. Of course, parents become especially concerned when their child bumps their head. If your child has an injury to their head and they lose consciousness for any period of time, [your child should be seen in the emergency room right away](#). Testing such as an xray or CAT scan may need to be done as soon as possible to determine the seriousness of the injury.

For anything more than a light bump to the head, please call us as we will want to know information about the injury and how your child is feeling. If your child is alert, does not lose consciousness and is responding normally, then most likely you will not need an appointment and testing will not be needed. After a bump to the head, your child will most likely cry initially from pain or being scared but should calm down after about 10 minutes or so. You can apply a cold compress such as an ice pack to the area for the first few minutes to help with swelling and Tylenol is fine to give for pain. If your child develops a knot, they may have this for a few days and bruising at the site is not uncommon.

If you see changes in your child's condition, please call our office. You may need an appointment and depending on the severity, we may have you go to the emergency room. The following are changes that we would want to be notified about.

- A constant headache that gets worse.
- Slurred speech or confusion.
- Dizziness that does not go away or repeatedly happens.
- Change in behavior such as irritability/restlessness or lethargy/difficulty waking.
- Vomiting more than 2 times.
- Unsteady or having difficulty walking.
- Watery or bloody discharge from the nose or ears.
- Unequal pupil size.
- Unusual pale skin that lasts more than an hour.
- Cannot recognize familiar people.
- Seizures.

After an injury to the head, it is important to observe your child for the above symptoms for the first 24 hours. It is fine for your child to go to sleep, but we may recommend that you check your child ever 2-3 hours to make sure that they rouse easily, move normally and respond to you as usual. Do not give pain medicine other than Tylenol. This should not make them sleepy and allows you to monitor their behavior and recognize any changes. Remember that most head injuries are mild and won't develop into the above symptoms, but call us if you have questions or concerns.



## Treating a Sunburn

If your child becomes sunburned, remember that most sunburns can be treated at home. The pain and swelling usually peaks at 24 hours and improves after 48 hours.

- Begin Ibuprofen as soon as possible in children over 6 months of age. Continue this every 6 hours for 2 days. This will help with inflammation and pain.
- Apply 1% hydrocortisone cream to the area three times a day for 2-3 days.
- Apply cool compresses for 10 minutes several times a day to reduce pain or burning but do not do this if your child is chilling.
- Add 2 ounces of baking soda to a tub of water to sooth the pain, but avoid soap to the sunburned area.
- Offer extra water to drink the first day or so to replace the fluids lost into the sunburn and to prevent dehydration.
- If there are blistered areas, leave them alone to prevent infection. Do not pop the blisters. For any open blisters, apply antibiotic cream such as Neosporin, remove with warm water and reapply twice a day.

Call our office if the pain becomes too severe or you are concerned about possible infection.

**Remember** that is very important to protect our skin from the sun's harmful rays and prevent sunburns.

- Avoid sun exposure during peak intensity hours, 10am-4pm, keep skin covered with light cotton clothing and protect exposed areas with sunscreen.
- We recommend a sunscreen with an SPF of at least 30. Apply sunscreen 30 minutes before going outside to allow time for it to penetrate the skin. It is important to reapply the sunscreen every 3-4 hours or after swimming or profuse sweating.

# Swimmer's Ear

Summer time means lots of time in the pool which can result in swimmer's ear. Swimmer's ear is an infection or irritation of the skin that lines the ear canal. Some call this an outer ear infection. This is different from an inner ear infection (otitis media) which is an infection of the ear drum. While an inner ear infection requires a visit with the pediatrician and often times and oral antibiotic, most cases of swimmer's ear can be treated at home. If your child complains of a somewhat painful ear canal, discomfort if the ear is moved up and down, the ear feels clogged or has a small amount of clear discharge, then they most likely have swimmer's ear. You can try the following tips:

1. Avoid swimming until the symptoms are gone. If your child is on a swim team, that is fine for them to swim. This may slow the recovery, but will cause no serious harm.
2. Give Tylenol or Motrin for pain. Numbing drops for otitis media should not be used.
3. White vinegar rinses can be used to restore the normal acid pH of the ear and reduce swelling. Fill the ear canal with ½ strength white vinegar (dilute with water) and remove it after 5 minutes by moving the head to the side and moving the ear. Do this twice a day until the ear returns to normal. DO NOT do this if your child has ear tubes or a hole in the eardrum.
4. If pain is moderate to severe, apply a heating pad or hot water bottle to the outer ear for 20 minutes. This will also increase the drainage.

To prevent swimmer's ear or reoccurrences, try to keep the ear canals dry. After showers, hair washing and swimming, help the water run out by turning the head. Avoid cotton swabs- this packs the ear wax. If swimmer's ear is a repeated problem, rinse the ear canals after swimming with a white vinegar/rubbing alcohol solution(equal parts of each). If symptoms continue for more than 3 days, your child needs to be seen by a physician.

## \*\*\* Reminder about Physical Forms\*\*\*

If you have forms (school, camp, college, etc.) that need to be completed, please bring them with you to your check up appointment. If you should lose the form and it needs to be completed again, there will be a \$10 charge for this. If you call for a form to be completed, you need to allow 2-3 days for this to be done. Thank you.

## BUG SAFETY

- Don't use scented soaps, perfumes or hair sprays on your child.
- Avoid areas where insects nest or congregate, such as stagnant pools of water, uncovered foods and gardens where flowers are in bloom.
- Avoid dressing your child in clothing with bright colors or flowery prints.
- To remove a visible stinger from skin, gently scrape it off horizontally with a credit card or your fingernail.
- Combination sunscreen/insect repellent products should be avoided because sunscreen needs to be reapplied every two hours, but the insect repellent should not be reapplied.
- Insect repellents containing DEET are most effective against ticks, which can transmit Lyme Disease, and mosquitoes, which can transmit West Nile Virus and other viruses.
- The current CDC and AAP recommendation for children over 2 months of age is to use 30 percent DEET. DEET should not be used on children under 2 months of age.
- The concentration of DEET in products may range from less than 10 percent to over 30 percent. Ten percent DEET only protects for about 30 minutes – inadequate for most outings.
- The concentration of DEET varies significantly from product to product, so read the label of any product you purchase. Children should wash off repellents when back indoors.

For more information on DEET: <http://www.aapnews.org/cgi/content/full/e200399v1>