

The Growing Times

Intermountain Pediatric Society/AAP Utah Chapter

Winter 2006

Early Hearing Detection and Intervention Program

David Boettger MD

So far this year, nearly 42,000 infants have been screened in Utah for congenital hearing loss through the State's Early Hearing Detection and Intervention (EHDI) program. Approximately 36 infants have a confirmed hearing loss, and perhaps 20 more will be diagnosed once all confirmatory testing is complete. Nationally, 3/1000 newborns will have some degree of congenital hearing loss, but only 50% will have an identified risk factor.

Studies show that intervention before six months provides improved communication outcome. Therefore, timely identification and referral falls on our shoulders as the medical home providers. Please include in your two-week newborn evaluation, a methodical review of the baby's hearing testing, track down missing results, and refer babies who may have fallen through the cracks.

As the AAP Chapter Champion for this program, I can answer your questions via email: boettgerslc@msn.com. The Utah Collaborative Medical Home Project website at www.medhomeportal.org contains an excellent module on hearing impairment.

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President's Message

This missive will be mercifully short, courtesy of the pre-holiday deadline pile-up. First – may you all have holidays that are relaxing (for at least part of them), healthy, and full of friends and family.

The next few months will see a lot of activities of significance. Foremost is the legislative session – you will be hearing from Gordon Glade, our Legislative Chair, about issues of import to kids and pediatricians and I hope you will take the time to understand those issues and let your representatives know how you feel about them.

Also, UPIQ will be starting several new efforts to assist practices in enhancing the care and services they provide their patients. Applications were received from about 14 practices to participate in the Medical Home/Integrated Services collaborative that will begin in March. You will soon hear more about a learning collaborative focused on the care of asthma that is scheduled to start in April. Starting in June, UPIQ will work with practices in various regions of the state on a project aimed at improving recognition and referral of maternal depression. And UPIQ will be working with Utah County's Early Head Start Program on a collaborative aimed at improving oral health screening for young patients. If you have questions or want to learn more about UPIQ or these programs, please call (801) 585-6480.

Have a Happy New Year!!!



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Consider What's Best for Kids Health & Wellbeing

THE 2006 UTAH LEGISLATIVE SESSION

Gordon Glade, MD, Legislative Chair

Jeff Schmidt, MD, recently told me how his State senator and representative stated they didn't think of calling him for advice on health care policy issues for kids. I had a similar conversation with my own legislator whom I had contacted about several specific issues. I didn't like how he voted on the lay midwife licensing bill. When I asked him about it, he said, "The lay midwives overwhelmed us. They were everywhere. I did not see a single pediatrician on the Hill when the bill came up and did not know you were even concerned."

Experiences like these have taught me an important lesson. Before the legislative session starts, it is a good idea to contact your state legislators, preferably in person, to share with them your concerns about policies that could affect the health and wellbeing of children. Invite them to call you for advice. Inviting them to your office or taking them to lunch forms a memorable connection.

The 2006 Legislative Session begins January 16, and continues through March 1. Listed below are several child health issues that the Utah State Legislature will address in the upcoming session. If you would like a copy of a bill, track a bill or read minutes from committee meetings click on www.le.state.ut.us.

Medicaid & CHIP. Ongoing funding is needed to support these programs. Medicaid's average annual rate of growth for the past 20 years has been 10% or higher. This year, requests for funding to address caseload and inflation alone are expected to exceed 10%. Proposed legislation to remove Medicaid resource test for children will be heard, as well as implementation of a Preferred Drug List to help contain costs. A strong case will be made to increase the State's abysmally low provider rates. Utah ranks 47th in physician reimbursement and 50th in dental provider rates. Legislation establishing a standard for reimbursing dentists providing Medicaid services for children is currently being drafted.

Child Welfare. As in previous years, the Legislature will consider numerous pieces of legislation dealing with child abuse and neglect, as well as parental rights issues. Restructure of the Utah Children's Trust Fund will be proposed to assist in implementing Child Abuse Prevention Task Force recommendations.

Medical Recommendations for Children. Last year, the Governor vetoed HB42 Medical Recommendations for Children, dubbed the "Ritalin Bill." A similar bill is currently being drafted for the upcoming session.

Transportation Safety. Proposed legislation dealing with safety belt enforcement, graduated drivers' licensing, and reducing the driving age to 15 for learner's permit will most likely be heard. An anti-street racing bill is also being drafted.

Finally, the IPS/AAP Utah Chapter Executive Committee was approached by **Joe Jarvis, MD**, a family practitioner, and **Tom Metcalf, MD**, pediatrician (and all around good guy) about supporting efforts to change Utah's health care delivery system to enable universal coverage without increasing costs. A summary of their ideas is enclosed with this newsletter. What do you think? Your input and feedback regarding this movement is valued. Please vote on the **Resolution Concerning Health Care Reform in Utah** before January 6, 2006 by email: coyler@ips-uaap.org or phone: 801/968-3411 (state your name and whether you support or oppose the resolution).✚

Can you spare a half-day for Utah's Kids?

Spending time at the Utah State Capitol during the 2006 Legislative Session will give you an opportunity to personally contact key legislators, participate in the legislative process and provide input on issues impacting Utah's children and pediatricians. The 2006 Legislative Session begins Jan. 16, and runs through March 1. Please select a half day that you would be willing to spend on the Hill, or if possible, a regular day or half-day of the week that we could call you if an issue urgently needs a pediatrician's voice. Select a day of week and time, and contact Gordon Glade, MD, at gbglade@upveds.com or Cathy Oyler at coyler@ips-uaap.org. ✚

SAVE THE DATE!

GLASGOW VISITING PROFESSOR

DATE: April 13, 2006

PLACE: University Park Marriott
Salt Lake City, Utah

George Dover, MD., Director of the Department of Pediatrics at John Hopkins University, School of Medicine, has been named the 2006 Glasgow Visiting Professor. He will present at Pediatric Grand Rounds, Resident Noon Conference and IPS/Chapter Dinner Meeting. For more information, contact Cathy at coyler@ips-uaap.org or call 801/968-3411.

28TH ANNUAL COMMON PROBLEMS IN PEDIATRICS

DATE: June 5-7, 2006

PLACE: Salt Lake City, Utah

Why you should plan to attend: Earn valuable CME credits, network with colleagues, update your skills and techniques, and hear the latest from experts in the field of pediatrics. This conference is under the direction of **Jeff Jackson, M.D.**

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We would like to hear from you! Deadline for submission of articles published in the next issue is March 20, 2006.

Sorting Out Teenage Drug Abuse

Lou Borgenicht, MD

Over a month ago a nineteen year-old patient of mine died of a heroin overdose and thus became the third known drug related death of which I was aware in 30 years of practice. Assuredly, there have been others who, for various reasons, remain hidden from my view.

John's father Peter wrote a long and honest obituary in the SL Tribune which has garnered a lot of attention because of its openness, "John Reagan Philips Tender Soul Born August 2, 1986, a tender and gentle soul, John Reagan Philips, died of a heroin overdose November 3, 2005."

In the ensuing weeks, I have found myself talking about teenage drug abuse with a variety of patients, parents, therapists, and educators and am still trying to sort out what seems to be a complicated problem fraught with a variety of perspectives both about the causes of the problem and its potential solutions. The issues cover a broad spectrum: personality and addictive predilection; family dynamics; societal permissiveness; availability of drugs, education of teenagers, parents and medical providers; cultural ennui and much more.

Over the next month there will be a number of educational and programmatic ventures to address the problems of drug abuse. A press release from Harm Redux follows: "Overdose has taken a more conspicuous role within the public conscience recently, and with good cause. During the first 9 months of this year, 16 people between 17 and 20 years old died due to a drug overdose. An additional 51 people between 21 and 29 died of overdose during the same period. In 2004, a total of 190 individuals of all ages died from accidental drug overdose. The vast majority of these deaths took place along the Wasatch Front.

"Fortunately, overdose is both preventable and survivable. The tragedy is that most people who overdose did not have the knowledge or means to prevent and survive that overdose. In order to address these lacks, the Harm Reduction Project has spearheaded a number of initiatives. We have established a national hotline at 1-866-STOP-ODS, assisted in placing overdose education and prevention billboards in Salt Lake County, created educational posters, and continue to regularly hold educational trainings for the public and professionals.

"In an effort to further our commitment to overdose prevention and survival education, HRP will be holding two public forums on January 10, 2006. One will be for youth ages 20 and younger and one will be for adults ages 21 and over. Both sessions will be led by national experts on overdose prevention along with community leaders, and will lead into public discussion. We are asking that members of the public support this effort by setting a side a few hours on January 10th and attending these forums.

"We see these forums as an opportunity to learn from one another, support the family and friends of those who have lost someone to drug overdose, and work toward better overdose prevention, education, and response. Please let your friends, co-workers, and family members know about this important first step in saving lives" (www.harmredux.org <<http://www.harmredux.org>>). If you are interested or need more information, call HRP at 801/355-0234, ext. 6.

Local social workers, one in private practice and one at Primary Children's, have proposed setting up a program for parents of drug abusers. It would likely be a series of group sessions. They are interested in learning whether pediatricians might refer to such a resource. Please send me a yes, no or maybe via email: lborgenicht@comcast.net or if you are interested in being involved further, please contact me. ✧

Reach Out and Read: An Advocacy Project of the Pediatric Residency Program

Emily Hannon, MD, Stacey Townsend, MD, and Angie Valdez, MD, Pediatric Residents

Have you wanted to make an even bigger difference in the lives of the children that you serve? Reach Out and Read (ROR) is a national, non-profit organization promoting early literacy by bringing new books and advice about reading aloud into the pediatric exam room. Nationwide, there are more than 2,500 ROR program sites located at clinics, hospitals, office practices or other primary care sites. ROR serves more than 2.1 million children and distributes more than 3.4 million books each year. Despite all these encouraging facts and being endorsed by the AAP, there are only nine ROR sites in Utah. The ROR program reaches less than 5% of Utah's children in poverty.

This year, we have embarked on a new residency-wide advocacy project and have collectively chosen to expand ROR to serve more Utah children. Our goal is to expand ROR into every pediatric and family medicine clinic in Utah. The National Reach Out and Read Center provides considerable support for ROR practices. ROR will provide training in the ROR model including how to use books as part of a pediatric exam and how to talk with parents about reading aloud. ROR sites also have access to a Scholastic catalog that has markedly reduced prices and easy shipping options. For qualifying practices, ROR will fund 50% of the annual book budget, so that practices can distribute new books to children at each well child visit from 6 months of age to 5 years.

According to **Charlie Ralston, MD**, "Reach Out and Read is easy to do." ROR books can be used as part of the developmental exam during a well child visit. Many providers around the state have discovered ROR is a great addition to their office setting. **John Morrison, MD**, says, "In one afternoon, I saw a 12 month old boy run to take the book to his mother and a 6 month old girl who refused to let go of the book during my exam." And **Sarah Woolsey, MD**, says, "ROR livens up my well child exam. I get to bring something special to the child/family and we get to talk about it."

You can go a long way in helping the children of Utah obtain early literacy skills. ROR has changed parents attitudes about reading aloud, making reading aloud a favorite activity for children, increasing young children's access to picture books and making bedtime stories a daily routine. It also has direct effects on literacy development by improving children's ability to verbally express themselves, increasing children's listening vocabularies and reducing the number of children with language delays that can prevent them from succeeding in school.

If you are interested in bringing Reach Out and Read to your office setting, the pediatric residents are willing and able to support your practice in completing an application to become a ROR site, answer questions and provide support for fundraising efforts. For more information, including how to receive funding to help with this endeavor, please visit the Reach Out and Read Website at <http://www.reachoutandread.org>, and/or call our faculty advisor, **Wendy Hobson, MD**, at (801) 585-6585. ✧

AAP Releases New Policy on Tdap Vaccine

To protect adolescents against pertussis and reduce the reservoir of pertussis within the population, the AAP released a new policy recommending adolescents, 11-18 years of age (preferably at the 11-12 year visit) receive the newly licensed tetanus toxoid, diphtheria toxoid, and acellular pertussis (Tdap) vaccine. The policy contains extensive information on special circumstances surrounding the use of the Tdap vaccine.

To help pediatricians implement the new recommendations, the AAP has prepared a number of resources including a policy statement, coding for Tdap immunization, information on vaccine reimbursement and a vaccine reminder recall system. Resources can be accessed online at www.aap.org. ✧

Applause, Applause

Vera “Fan” Tait, MD, recently received the *Marty Palmer Service to Children Award*. This is the highest honor bestowed by the IPS/AAP Utah Chapter. Fan was honored as leader in improving care and services for children and in Utah medical home initiatives.

The *2005 Mahatma Gandhi Peace Award* was awarded to **Lou Borgenicht, MD**, given by the Gandhi Alliance for Peace. Lou was recognized for his leadership, humanitarian service and work encouraging nonviolent resolutions of conflict.

Mike Dean, MD, was awarded the *Distinguished Career Award* given by the AAP Section on Critical Care for his achievements in the field of critical care and injury control/prevention.

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