

Web About Us Our Services News & Press Forms Lactation Services

October, 2015

## In This Issue:

- Trick or Treat
- Influenza 411
- Front Desk News & Notes

## **Contact Us**

7113 Three Chopt Road Suite 101 Richmond, VA 23226 Fax: 804 673-6432

8485 Bell Creek Road Suite B-3 Mechanicsville, VA 23116 Fax: 804 559-9227

Call Center: 804 282-4205

Billing Office: Phone: 804 288-9190 Fax: 804 288-0935

www.PARpeds.com

## **Office Hours**

Three Chopt Location
Monday - Friday
7:30 A.M. - 7:30 P.M.
Saturday

## **Trick or Treat**



Trick? Or treat? These tips will keep your Halloween a sweet and safe one.

When choosing a costume with your child, consider the fit, length and your child's ability to safely maneuver in the outfit. Tennis shoes are the best complement to any costume. Be aware of costumes that have loose or flowy aspects, especially around Jack-O-

Laterns or other flame. Look for costumes labeled 'flame retardant'. Outfit your costume with reflective tape to ensure visibility on that dark and spooky night. Because masks can block a child's eyesight, consider using makeup to create that scary face. Patch test it before hand to ensure your child doesn't have a skin sensitivity. Put a name tag with your phone number inside your child's costume. Continue Reading

## Influenza 411

As fall settles in on us, we as pediatricians begin to prepare for the coming of influenza season. Worldwide influenza circulates from October to May with peaks in the United States between December and February. It is difficult to predict what to expect from the influenza

9:00 A.M. - 12:00 P.M.

Bell Creek Location Monday - Thursday 8:30 A.M. - 6:30 P.M. Friday 8:30 A.M. - 5:00 P.M.

Billing Office Monday - Friday 9:00 A.M. - 4:30 P.M.

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season for 2015-16, or when we may expect to see the virus circulate in Richmond. What is certain is that protection from influenza is essential for all infants, young children, adolescents and caregivers of children. This month, we will review the symptoms of the influenza virus, common myths about the flu and strategies for prevention. Continue Reading



## Front Desk & Flu News

#### Flu Vaccines

Please continue to visit our website's News & Press section by <u>Clicking Here</u> for updates on scheduling your child's flu vaccine.

## **On-Line Bill Pay Now Available**

We are pleased to announce that our new On-line Bill Pay module is available for all patients at no additional cost and is accessible through our website. You can make payments with your VISA, American Express, MasterCard, or Discover cards. For easy to follow instructions, Click Here

# **School & Sports Forms**

We are now booking appointments through the month of January. If your child needs a physical for school or sports, please contact the Call Center at 804-282-4205 as soon as possible to schedule. Remember when scheduling these appointments to check with any school sports to ensure that the physical will be within the correct date range for participation. Please bring all forms (please include both the parent pages and the pages for the office to complete) to your child's visit, also remembering that we have a \$5.00 completion fee per form and require 3-5 days to complete them. You may either pick up your form at the office where you dropped it off or notify the front desk if you would like it mailed. Note that we do not fax forms. If you have any questions, please ask the front desk staff at the time of check-in.

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# **Trick or Treat (cont.)**

When decorating your haunted mansion for the night, be mindful of trip hazards. Be sure walkways and stairs are free of obstacles and well illuminated. Consider using a battery operated candle or flashlight inside your Jack-O-Lantern, rather than a candle.

Prior to heading out to trick or treat, be sure your child has a healthy balanced meal to discourage filling up on treats as the walk around the neighborhood. As you venture out to collect the treats, be sure a responsible adult accompanies children on their rounds. Carry a cell phone with you. Older children should stick to a

parent approved route and know what time they are expected to return home. Trick-or-treating in groups is best. Use sidewalks if available, or stay on the side of the road facing traffic. Stay on well-lit streets and only visit homes that have the porch lights illuminated. Limit your trick or treating to homes or neighborhoods you know.

If you are at home answering the door for the goblins and ghouls that ring the bell, consider offering a healthier option than candy. Be mindful of allergies, especially to peanuts and tree nuts. Great alternatives include non-food treats such as small packages of bubbles, sugarless gum, crayons, stickers or pencils. Food treats that are healthier alternatives to candy include packaged pretzels, popcorn, raisins or snack crackers. Limit candy bars to smaller 'snack size' treats. One treat per child is plenty!

Once your little ghosts float back home with their loot, inspect it for potential allergens, choking hazards and open packages. Once you give the go-ahead, it is ok for your kids to indulge tonight only! Many parents feel that allowing their kids unlimited access to candy on Halloween night makes it easier to ration the remaining candy over time. Once the feast is finished, take all of the candy and store it where kids won't have free reign (or possibly where you won't find it craving a midnight snack!). Consider donating some of the candy your child receives to local hospitals, nursing homes or military bases. Halloween candy can be a learning opportunity too! Have your child sort like kinds of candy. Count the stash, or make a graph depicting the types of candy. Read nutrition labels with your child and identify why candy is a 'sometimes' treat.

# Influenza 411 (cont.)

It is common to hear someone with a runny nose and cough to say they have 'the flu'. In addition, persons with vomiting and diarrhea are sometimes referred to as having 'the stomach flu'. The influenza virus is a respiratory virus that may include these symptoms, but also typically includes:

A sudden high fever, usually above 101°F and chills

Body aches, headache and tiredness

Sore throat

Dry, hacking cough and stuffy or runny nose.

Some children will complain of nausea, vomiting and diarrhea. Others may complain of ear pain.

The onset of the flu virus is generally very quick. Most adults are infectious one day before symptoms develop and up to 5 to 7 days after becoming sick. It is possible to have influenza more than once in a season if different strains circulate in the community. Generally, patients with influenza will be ill for about 5 to 7 days. Rest, fluids and fever reducer can relieve many of the symptoms of the flu. There are also medicines that are given by prescription that we will address later. Your child should remain home from school or childcare until they have been fever-free for 24 hours and the cough is decreased.

Young infants and children with special health conditions are at particular risk of developing a severe case of influenza or complications from the illness. Patients at highest risk for developing complications were those with neurologic or neuromuscular conditions. Other children at particular risk are those with asthma, diabetes, sickle cell disease and children younger than 6 months who cannot receive the vaccine due to age. However, up to 40 percent of children who developed severe complications in past flu seasons did not have underlying medical conditions, so it is important to monitor your child's symptoms closely for worsening or changes.

The influenza virus is spread by droplets that are tossed into the air by an infected person when he or she coughs or sneezes. The virus can become airborne and infect persons within about a 6 foot radius. The flu virus infects another when it lands in the mouth or nose or is inhaled into the lungs. The virus also lives on surfaces and may be transmitted by touching an infected surface and then touching the face.

Given the miserable nature and duration of the influenza illness, the high probability of spread and the risk for complications, protection against the virus is the very best defense. However, some parents decide to decline the vaccine for themselves and their families.

One common myth is that the flu shot somehow causes the flu. This is not at all the case. The flu virus infects a person by making copies of itself in the body, called 'viral replication'. The injectable vaccine is an entirely killed virus, thus it cannot make copies of itself or make you ill. The nasal spray vaccine is a weakened "attenuated" form of the virus that is rendered incapable of making copies of itself. Think of a copy machine with no paper and no toner-not very good at producing copies!

Some parents feel that their families "don't get the flu", so they don't vaccinate. It is estimated that 5-20% of adults and 10-40% of children get the flu every year. It is also possible that the infection is very mild, so it is not recognized as influenza. Some argue that they are 'healthy' and thus do not need to be vaccinated. Again, nearly half the children who develop complications from influenza were previously healthy.

Finally, parents may feel that the flu shot 'just doesn't work'. Like any immunization, protection from the influenza virus is imperfect. Strains of the virus circulating in the community and across the globe change from year to year, and even within a season. The CDC picks the strains to be including in the seasonal vaccine based on the virus patterns from previous years and predictions for the upcoming season. As we experienced last year, sometimes the vaccine is an imperfect match for the virus circulating in a community. While it is possible to contract the flu after receiving the immunization, the illness is far less severe and shorter in an immunized person. This is because there is some cross protection between the vaccine and the circulating strains, even if they are not a 'perfect match'. Additionally, it takes approximately 2 weeks for the vaccine to be effective, so it is possible to contract the flu virus before the vaccine is working.

There are multiple forms of the vaccine available in the United States. Our office will provide two different vaccines during the 2015-16 season; The intramuscular shot of inactivated influenza vaccine (IIV) (Fluzone™) for infants 6 months and older and the intranasal spray (live attenuated influenza vaccine) (FluMist™) for children 2 years of age and older. The vaccine is given every year because the protection lasts for only about 6 to 12 months and because the strains in the vaccine often change year to year. In the first year that your child is vaccinated, he may need two doses if:

He is aged 6 months to 8 years

He received fewer than 2 does of the vaccine before July 1, 2015.

The vaccines available in our office this year are quadrivalent vaccines, meaning that they protect against 4 strains of the influenza virus. This year's vaccine contains two "A" strains of the virus and two "B" strains. The vaccines are single dose vials and do not contain the preservative thimerisol.

Generally, all persons are recommended to receive a flu vaccine. However, some groups should not. The IIV is not recommended for those with a history Gillian-Barre syndrome or those with life-threating or severe egg allergies. Most persons with milder allergies to eggs may still receive the vaccine. The LAIV should not be given to those with the same health concerns as the IIV. In addition, it should not be given to persons who have had another live-virus vaccine in the past 4 weeks, such as the MMR or Varivax vaccines. The influenza vaccine can safely be given with all other vaccinations. Additionally, if you child has certain health conditions or a history of recurrent or recent wheezing, they should not receive the vaccine. If you are unsure which vaccine is best for your child, please contact our office.

The influenza vaccine generally produces very few side effects. Mild fever or achiness at the injection site may follow the IIV. Runny nose, mild sore throat and mild fever are sometimes reported after the LAIV. Generally, most persons don't notice side effects.

Our office will administer the influenza vaccine at scheduled well child appointments and by separate vaccine appointments that may be scheduled with our office. At these appointments, a nurse will administer the vaccination and you will be on your way! With minor illnesses, your child may receive the vaccine at a sick visit. However, some with some illnesses, it is best to wait until your child is healthy to receive the vaccine. Our providers will let you know when your child should receive the vaccine.

As pediatricians, we want to provide that every protection that we can provide your family against illness. Thus, we strongly encourage all of our patients to be vaccinated.

In addition to vaccination, there are many other steps you can take to keep your family from contracting the flu. Handwashing is the best line of defense. Encourage your children to wash with soap and water frequently. Make a habit of periodically cleaning high touch surfaces such as handles, switches, phones and remotes. Encourage your children not to touch their noses or mouths. Stay home when you are sick, to avoid infecting others.

Should your family members become ill despite all of your best precautions, symptom care will certainly help. This includes fever and pain reducers such as acetaminophen, drinking lots of liquids and rest. A prescription anti-viral medication called oseltamivir will be helpful for certain patients. This medicine is most effective if it is given within 48 hours of the onset of symptoms. This medicine sometimes has unpleasant side effects such as nausea and vomiting or behavior changes. These subside once the medicine is stopped. It is available in liquid or capsule form. The capsules may be opened and sprinkled, if necessary. Contact our office regarding whether this prescription is indicated for your child.

We hope this information helps you better understand the influenza virus and why influenza vaccine should be on your mind (and your calendar) this fall. As always, contact our office with questions or to schedule your child's flu vaccine appointment.

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