

PEDSLINES

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President's Message

BY KRISTIN SOHL, MD, FAAP



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Last week, the MOAAP Board of Directors met via Zoom for our September meeting. It is still challenging to accept the impact the pandemic has had on gathering and meeting with colleagues from across the state. During the meeting, the board discussed what all of us are feeling as the pandemic lingers. A common theme was tired, but not deterred. I know each of you are doing all you can in your clinics and communities to keep children safe. I know many of you have been challenged in ways you never expected when speaking up for the safety of children in your community. **I want you to know that MOAAP is here to support YOU.** As the pandemic gets closer to the two-year mark, it is hard to believe the challenges to science and medical advice. What I do know is that I am proud of our members and the work you are doing.

I wanted to provide a few highlights of MOAAP work over the past few months. We continue to look for ways to share our messages about children's health and safety, as well as show our support for members and the advice you are providing in clinic and in your communities.

- Last week the MOAAP Board met with the MO HealthNet Acting Director - Kirk Mathews - to discuss important issues like prescription preauthorization challenges, more readily sharing information on changes to the preferred drug list, importance of 12 month continuous Medicaid coverage as the public health emergency ends and requested regular communication with the Division to share what we are hearing from members. It was a positive meeting as we continue our dialogue with the Division and work to improve care for children in our state.
- The chapter recently released a timely statement on the importance of masking in schools to keep children healthy and in person learning. We hope this statement is helpful to you in your clinics and communities as you provide guidance on this important child health issue.
- Earlier this summer MOAAP Members worked on a COVID-19 school based vaccine toolkit to provide schools with the framework for setting up a clinic. This project was supported by the MO Dept of Elementary & Secondary Education. This project was a great opportunity to work with our LPHA and school partners to share this important message and provide schools with the needed information to feel confident in setting up an in-school clinic. Thank you to the MOAAP members who contributed to this project: Dr. Jennifer Watts (Project Lead), Dr. Angie Myers, Dr. Christelle Ilboudo, Dr. Sarah Garwood, Dr. Rachel Charney and Dr. Maya Moody.

On November 5, MOAAP is hosting the 2021 Annual Meeting & November Chapter Chat. I hope you will join us for this virtual event. Due to the support of generous sponsors, MOAAP will be providing swag boxes to the first 55 registrants! We are fortunate to have a national speaker for this event in Dr. Paul Offit. Dr. Offit will share his perspective on ways we can all work together to end the pandemic. Please be sure to register today.

MOAAP will continue working to promote the COVID-19 vaccine confidence in the coming months with support from AAP grant funding. We will be looking for assistance from members in the coming weeks and months as these projects progress. Even with all the challenges we are seeing in providing advice on child safety in our communities, the pediatrician's voice is still a trusted messenger on these important topics. MOAAP will continue to speak up and share this important message.

I remain hopeful that easier times are ahead. The news of the COVID-19 vaccine getting closer to approval for children under 12 gives me resolve to continue moving forward in these challenging times. The light at the end of the tunnel continues to get brighter.

I know the ongoing pandemic has been challenging for all of us, but we are all in this together. Please know MOAAP is here to support you as this challenging phase of our careers continues. I am proud to work along side so many amazing advocates for children. Stay well, stay strong and keep up the good fight!

Sincerely,
Kristin Sohl, MD, FAAP
President

NOVEMBER CHAPTER CHAT

Stopping the COVID Pandemic



November 5, 2021
12PM

With:
Paul Offit, MD

[Register Now](#)

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MISSOURI CHAPTER



Advocacy Update

BY GARRETT WEBB

Legislators returned to Jefferson City for the annual VETO Session of the Legislature in mid-September, although no bills vetoed by Governor Parson were ultimately brought forward to consider. Instead, most legislators spent time in committee hearings and meeting with colleagues, lobbyists and constituents in preparation for the regular session to begin in January. As expected, current Majority Floor Leader Dean Plocher (R-St. Louis Co.), was elected by his colleagues as speaker-designee for the 2023-24 legislative session. The week concluded with a celebration of the state's bicentennial, including an official ball and delayed inaugural festivities for lawmakers and statewide elected officials.

During the September MOAAP advocacy and legislative committee meeting we were joined by Brian Colby from the Missouri Budget Project to provide an overview of the current status of CARES and American Rescue Plan Act (ARPA) funding, the state budget, and expectations for budget priorities for the next legislative session. Under federal law the state's CARES Act funding must be expended by December 31, and used for direct expenses relating to COVID-19 relief and response. On the other hand, ARPA allows for more broad spending by state and local governments, including an expected \$700million+ for discretionary programs throughout the state, and must be spent by 2026. Between this influx of federal spending and an overall healthy revenue outlook for the state, most budget-watchers feel confident in the fiscal position of the state and do not expect any significant spending changes in the near future.

Following the Missouri Supreme Court ruling in favor of Medicaid Expansion, the state has begun the process of preparing to accept applications for newly eligible participants on October 1. The remaining contention related to expansion is a lack of appropriation from the Legislature, which could mean spending for new enrollees exceeds the available appropriation. The issue is certain to be a topic of debate during the next session.

Finally, the 2021 annual membership survey closed in late August and members overwhelmingly identified improving mental health services as the top priority for advocacy efforts next year. Other issues of priority included expanding access to high quality early childhood education, improving health equity, reducing child abuse, and increasing access to MOHealthNet services for postpartum mothers. Thank you to those of you who completed the survey and to all of our members as you continue to advocate for children and families across the state.

Update From District 6

BY DENNIS COOLEY, MD, FAAP
CHAIR, AAP DISTRICT 6

Greetings from District 6. As the fourth wave of the pandemic rushes through the country I hope you and your family are staying safe and well. As most of you are aware the AAP recently completed its national elections and Dr Sandy Chung was chosen as President- Elect of the AAP. Dr Chung defeated Dr Joseph Wright who will continue his position as an at-large member of the AAP Board. In our District, Dr Claudia Preuschof from Missouri won re-election as District 6 Vice-Chair for another 3-year term. Claudia has done a great job as DVC, and we are glad she will continue in that role. After much deliberation and with deep regret the AAP has decided to change this year's NCE to an all-virtual format. This last-minute change came about as concerns for our members and their families' safety grew with the increasing burden of COVID cases. In the same light the AAP set back the date of opening our national office for in-person work to January 18, 2022. Rest assured, however, that the AAP is able to function and meet the needs of its member in a virtual world. This includes the Interim Guidance reports which are updated monthly and Town Hall webinars that the AAP has been providing every 2 weeks. Information about these and other COVID related resources can be found on our website. There is a new guidance on monoclonal antibody that has recently been written and revisions on the management of acute illnesses and return to sports will soon be forthcoming. Our Advocacy Team continues to lobby for children and pediatricians at both the national and state levels. Of particular interest is the Reconciliation Bill, which includes provisions for permanent CHIP funding, 12-month post-partum Medicaid coverage, and Medicaid coverage gaps. The AAP Advocacy Team has worked closely with the FDA to get EUA of the vaccines for usage in children. They have also continued efforts to make sure pediatricians are included in phase 4 Provider Relief Funding. I want to end by thanking each and every one of you for all you have done and had to endure during this pandemic. At last week's board strategic planning retreat one of the main topics was how we can address and help diminish the stresses our members are suffering from due to practice and life issues, both now and in the years to come. Please take care of yourselves.



MISSOURI CHAPTER
AMERICAN ACADEMY OF PEDIATRICS
INCORPORATED IN MISSOURI

MOAAP STATEMENT ON MASKS IN SCHOOLS

The Missouri Chapter, American Academy of Pediatrics (MOAAP) today released the following statement:

"We must place multiple layers of protection around children to keep them healthy, safe and learning in-person. In addition to vaccinations for those who are eligible, masking, distancing, testing and proper cleaning and ventilation can reduce the spread of the virus.

Children under 12 don't have access to COVID-19 vaccines yet, and it's up to the rest of us to protect them while cases continue to spread. Masks are a medically proven, key public health tool in preventing disease transmission and we strongly recommend their use in schools."

August 25, 2021

At last, the MO HealthNet childhood obesity benefit is (almost) here!

SARAH HAMPL, MD, FAAP
CHILDREN'S MERCY-KANSAS CITY
(SHAMPL@CMH.EDU)



In August, MO HealthNet announced that its long-awaited obesity treatment benefit for adults and children would be active as of September 1st. This month, MO HealthNet has been holding webinars to educate healthcare professionals about the details of the benefit. There's a lot to be grateful for regarding this benefit. First, MO HealthNet will reimburse for comprehensive, multicomponent treatment at an intensity recommended and reaffirmed by the US Preventive Services Task Force.¹ This multicomponent treatment will consist of family-based behavioral treatment and medical nutrition therapy. Second, children will be able to receive the benefit more than once if needed; children who do not experience weight loss or weight stabilization in the 1st 6 months or who drop out of treatment can re-enroll the next plan year. Third, children ages 2-20 with obesity (defined as a body mass index (BMI) \geq 95th percentile for age and gender) are eligible to receive treatment, and a similar obesity benefit is available for adults ages 21 and older insured by MO Medicaid. Finally, this benefit promotes care coordination between the pediatric primary care provider, behavioral health professional and registered dietitian, a recommended approach to treat children with this chronic disease.²

Here are some key features of the benefit and what it covers:

- 26 hours of individual and group-based family-based behavioral treatment (FBT) and 1.5 hours of medical nutrition therapy (MNT) in the 1st 6 months
- An additional 3 hours of FBT and 0.5 hours of MNT in the last 6 months
- A prior authorization is required before beginning treatment and at ~6 months to receive additional treatment
- In-person and telehealth FBT and MNT visits are covered
- Individual FBT can be delivered by a behavioral health professional (LPC, LMFT, LCSW, licensed psychologist, licensed psychiatric NP, licensed psychiatrist)
- Group FBT comprises the majority of the covered FBT (22 of 26 hours) and can be delivered by the above behavioral health professionals or by a registered dietitian (RD)
- MNT can be delivered by an RD

Here are some key issues to keep in mind:

- The benefit is currently only active for children insured by fee-for-service (FFS) MO Medicaid, so the number of eligible children is going to be small initially
- The benefit should become active for all children insured by MO Medicaid (FFS and managed care) in 6-12 months
- MO HealthNet requires certification that behavioral health professionals and RDs have had appropriate training or sufficient experience to deliver FBT and MNT
- Some FBT and MNT trainings have occurred, and more are planned; the workforce capacity for delivering this benefit is small but growing

MO HealthNet's coverage of childhood obesity treatment is a big step forward in increasing access to evidence-based treatment for thousands of MO children with obesity. You can learn more about the benefit here: <https://dss.mo.gov/mhd/providers/pdf/bulletin44-12.pdf>

Supporting uptake of this new benefit is one of the aims of the MO Council for Activity and Nutrition's Healthy Weight Advisory Committee (<https://extension.missouri.edu/programs/mocan/mocan-hwac>) and we welcome interested MOAAP members to join. Please also consider joining the University of MO Telehealth Network's new pediatric weight management ECHO (<https://showmeecho.org/clinics/pediatric-weight-management/>) to hone your skills in obesity treatment and earn free CME.

1 JAMA. 2017;317(23):2417-2426. doi:10.1001/jama.2017.6803

2NAM Perspectives. Discussion Paper, National Academy of Medicine, Washington, DC. <https://doi.org/10.31478/201701b>



MOAAP STATEMENT ON THE IMPORTANCE OF RECEIVING THE COVID-19 VACCINE

The Missouri Chapter, American Academy of Pediatrics (MOAAP) today released the following statement:

"We must place multiple layers of protection around children to keep them healthy, safe, and learning in-person. We know the COVID-19 vaccine is safe and effective. We urge all who are eligible to receive the vaccine. Along with other strategies like masking, distancing, testing, and proper cleaning and ventilation, we can reduce the spread of the virus and keep our kids learning in school.

Children under 12 don't have access to COVID-19 vaccines yet, and it's up to the rest of us to protect them while cases continue to spread. We call on everyone around children – parents, caregivers, grandparents, siblings, extended family, teachers, and school personnel – to receive the vaccine as soon as possible."

September 10, 2021

Putting the One Health Approach into Practice

LORISA SMITH, DEPARTMENT OF CONSERVATION



According to the Centers for Disease Control and Prevention, One Health is a collaborative, multisectoral, and transdisciplinary approach – working at the local, regional, national, and global levels – with the goal of achieving optimal health outcomes recognizing the interconnection between people, animals, plants, and their shared environment. In this vein, the Missouri Department of Conservation (MDC) is excited to embark upon a pilot project with the Missouri Chapter of the American Academy of Pediatrics and ParkRx America to explore the benefits of writing prescriptions for nature to ultimately improve patient health.

While our experience with COVID-19 has been full of challenges, the pandemic provided MDC, and state fish and wildlife agencies across the nation, a silver lining by opening doors to work with health-based partners in more meaningful ways than we had experienced in the past. It identified a need to convene a broader set of partners to highlight the role nature can play in improving human physical and mental well-being.

Studies have shown when we spend time in nature, we experience a decreased heart rate and lower levels of stress and anxiety. Time in nature also contributes to cognitive development in children. The number of visitors at our national, state, and even local parks increased since we began dealing with the pandemic – in some cases to the point of overcrowding. It is crucial that MDC work closely with partners to identify ways to sustain this momentum as individuals seek to connect or even reconnect to nature. The health of our ecosystem and our bodies depend on us working together, and the One Health approach provides us the platform to do so.

Fall is a beautiful time to explore Missouri, and those of us here at MDC are excited to welcome you and your patients to join us outdoors! We manage thousands of acres of land and water resources, offer free in-person and online programs ranging from hiking to fishing to kayaking, and employ dedicated staff that are passionate about sharing their knowledge and skills with others. MDC is committed to working with healthcare professionals to increase the awareness of the interconnection between the environment, animals, and humans to lead to improving the overall health of our ecosystem.

If you are interested in learning more, please find us online at mdc.mo.gov, download the MO Outdoors mobile app, or subscribe to our Nature Boost podcast.

MOAAP In The News!

Missouri Can Do Tough Things. Get our Kids Back in Classrooms with Vaccines and Masks: featuring Dr. Kristin Sohl
The Kansas City Star
August 15, 2021

Pediatricians Join Campaign to Curb Child COVID-19 Case: #KidDocsFightCOVID Campaign
Courier Post
August 25, 2021

Doctor's Orders: 'Nature Prescriptions' See Rise Amid Pandemic: featuring Dr. Maya Moody
First Investors USA
August 31, 2021

2021 MOAAP VIRTUAL ANNUAL MEETING & NOVEMBER CHAPTER CHAT

November 5, 2021
11:30 am - 2:00 pm

Agenda

11:30 AM - Opening Remarks & MOAAP Annual Update

12:00 PM - November Chapter Chat:
Stopping the COVID Pandemic
Presented by [Dr. Paul Offit, MD](#), Children's Hospital of Philadelphia

1:25 PM - Virtual Networking Session

2:00 PM - Closing Remarks

Learn more & register for this FREE CME Event:
<https://us02web.zoom.us/meeting/register/tZ0kf-mpqTwwGt38RfbMJSDJgu7SPgA2q-Eb>

After registering, you will receive a confirmation email containing information about joining the meeting.



ACCME Accreditation Statement

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Colorado Medical Society through the joint sponsorship of Kansas Chapter, American Academy of Podiatry and Missouri Chapter, American Academy of Podiatry. Kansas Chapter, American Academy of Podiatry is accredited by the Colorado Medical Society to provide continuing medical education for physicians.

AMA Credit Designation Statement

Kansas Chapter, American Academy of Podiatry designates this live activity for a maximum of 1.5 AMA PBA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

MOAAP Swag Boxes
will be sent to the first
55 registrants!





Learn with us

October Chapter Chat

October 20, 2021 - 12:00 - 1:00 PM



Integrating Health Equity in your Practice

John Cowden, MD, MPH &
Raquel Hernandez, MD, MPH, FAAP

Join Zoom Meeting

[https://us02web.zoom.us/j/84992672941?](https://us02web.zoom.us/j/84992672941?pwd=V3RzUHBlc0VjZ0VlZjdTSURqbzZSdz09)
[pwd=V3RzUHBlc0VjZ0VlZjdTSURqbzZSdz09](https://us02web.zoom.us/j/84992672941?pwd=V3RzUHBlc0VjZ0VlZjdTSURqbzZSdz09)

Meeting ID: 849 9267 2941; Passcode: 934225

ACCME Accreditation Statement

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Colorado Medical Society through the joint sponsorship of Kansas Chapter, American Academy of Pediatrics and Missouri Chapter, American Academy of Pediatrics. Kansas Chapter, American Academy of Pediatrics is accredited by the Colorado Medical Society to provide continuing medical education for physicians.

AMA Credit Designation Statement

Kansas Chapter, American Academy of Pediatrics designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credit™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Advocacy Partner Spotlight: Missouri School Boards' Association

MELISSA RANDOL, MSBA EXECUTIVE DIRECTOR



Part of the traditional greeting among the members of the East African Maasai tribes is “Kasserian ingera?” or, when translated to English, “And how are the children?” This greeting is exchanged even between those members of the community who do not have any children of their own. According to the Maasai culture, the health and well-being of the community is predicated upon the health and well-being of all its children.

This same question is the foundation of public education and the purpose of Missouri’s non-partisan, unpaid, elected public school board members in our 518 school districts. In large part, it’s the reason our communities and our state created and sustain a system of education available to all children... to ensure we can affirmatively answer how all of our children are doing. We must provide our children with a quality education and ensure they are healthy to prepare them for their futures, if our communities are to achieve success.

Missouri’s public schools serve approximately 900,000 students from all walks of life. We educate 33,757 homeless students statewide – that number has tripled since the 2007-08 school year. Thirteen percent of Missouri’s students receive special education services to assist them educationally with their disabilities and 21,377 of our students have 504 plans if their disability is not severe enough to qualify for special education services.

Some of the health challenges our students and schools face include: 72,215 of our students have asthma and 27,621 have life threatening allergies; 2,253 have type 1 diabetes and 735 students have type 2 diabetes; 7,343 students have seizure disorders and 653 have traumatic brain injuries; 11 students have “do not attempt resuscitate” orders. There are numerous other diseases and chronic health conditions our students face while attending our public schools.

When COVID-19 appeared, it turned our world upside down for all students, but especially our most fragile. Public schools learned to deliver education virtually and accommodate children when they didn’t have sufficient access to the internet or devices. We sent laptops and hot spots home and stationed school buses in communities as mobile Wi-Fi locations. For our children who rely on our schools for nutrition, we sent bus drivers to drop off meals. Our educators looked for creative ways to attempt to keep our students safe and continue to meet their ongoing needs, including quality education. In spite of the valiant efforts of educators, learning remotely and meeting the disparate needs of all children under these circumstances was not ideal.

Our top priority in the 2021-22 school year is to keep our children in school. As the American Academy of Pediatrics has stated, all of our children, but especially our most at-risk children, need our school doors open. Our school boards, administrators and teachers have worked hard to create safe learning environments with protocols in place to protect against the spread of COVID-19 variants.

As you undoubtedly have seen, public schools have been thrust into the middle of political battles over a variety of COVID-19 topics, including whether or not to require masks in our buildings. The backlash directed at our school board members, administrators and teachers has been devastating. Many of our school boards have had to request the presence of law enforcement at school board meetings when masking is going to be discussed and some have endured personal threats to themselves and even their families. In an attempt to prohibit schools from requiring masks, Missouri’s Attorney General filed a class action lawsuit against school districts with mask requirements.

Continued on page 8.

Continued from Page 7 -Advocacy Partner Spotlight

While all of this is disappointing, what has been remarkable are the number of volunteer, elected school board members, administrators, staff and teachers who have stayed focused on serving our children. In spite of the vitriol directed at them, they have adopted policies that were advised by medical professionals to protect our children and staff. They continue to devote countless hours to go above and beyond to help our children succeed.

The Missouri Chapter of the American Academy of Pediatrics has provided extraordinary leadership to Missouri's public schools and we are extremely grateful! Your executive director, Kelsey Thompson, your elected leaders and member pediatricians throughout Missouri have provided a lifeline that our school leaders use to help guide us through these unprecedented times.

While we know there is still much to be done to meet the needs of all children, Missouri's students are benefiting from many, like our great pediatricians, school board members and educators, who have put our children's needs first.

Kasserian ingera? (And how are the children?)
They are being served well. Thank you, MOAAP!

Discussing migraines with SLUCare Physician, Cynthia Morris, MD



What causes migraines in children?

When it comes to primary headache disorders (headaches that are not caused by something like an injury or other illness), like migraines, it all comes down to genetics. Essentially, the way a child's brain is wired from the very beginning predisposes them to getting migraines – even if they don't have a family member who gets them. Sometimes this predisposition can be kickstarted with something like a concussion, onset of periods, or medical illnesses, but these kids were likely to develop headaches of some kind at some point even without this.

What are the symptoms of pediatric migraines?

There are many symptoms beyond just head pain that can be seen with pediatric migraines. More common ones include nausea/vomiting, dizziness, light sensitivity, sound sensitivity, and neck tightness. Some less well-known symptoms that are still frequently seen include vision changes (such as spots, squiggles, or snow), difficulty concentrating, fatigue, and irritability.

How can I prevent my child from getting migraines?

With this being a genetic disorder, there is nothing that anyone does that “causes” headaches – and thus there is nothing specific that can be done to prevent getting headaches in the first place. That being said, there are several things that many children have found which contribute to their migraines – these include poor sleep, skipping meals, significant stress, and poor water intake among other things. Migraine prevention is a great topic to discuss with your child's pediatrician or neurologist, if appropriate. There are many daily preventative options available including both nutraceuticals (supplements) and traditional pharmaceuticals.

When should a parent seek medical attention?

If your child is having headaches more than once a week, if their headaches are interfering with their daily lives, or if their headaches are severe and don't respond to over-the-counter medications like ibuprofen or Tylenol, it is reasonable to bring this up with your pediatrician or a neurologist. If your child develops a particularly severe headache, is difficult to wake up or is acting confused, has sudden changes in their vision, has difficulty speaking, or has difficulty moving a part of their body, it is important to seek emergency care.

To make an appointment with our neurology team, call 314-577-5338 or visit cardinalglennon.com



Did you know MO-CPAP offers follow-up services to your patients?

The Follow Up Coordinator helps families get – and stay – connected with behavioral health resources in their area, like counseling, therapy, and support groups. This ensures that your patients get the ongoing support they need to improve and maintain their behavioral health.

Our Follow Up Coordinators are masters-level behavioral health clinicians with several years of experience providing telephonic support and connecting families to the services they need.

MEET THE CARE TEAM



Kristin received her Bachelor of Arts degree in Sociology with a minor in Psychology from Saint Louis University in August 2013 and received her Master of Education in Clinical Mental Health Counseling from University of Missouri St. Louis in August 2015. Kristin became a Licensed Professional Counselor in October 2020. Kristin became the first Follow Up Care Coordinator for MO-CPAP in April 2019 and was promoted to Lead Clinical Care Coordinator within BHR in June 2021 and is now responsible for supervising the Clinical Care Coordinator team as well as MO-CPAP's Follow Up Care Coordinators.



Jenny Jones, MSW, LCSW is a Clinical Care Coordinator with Behavioral Health Response. Jenny began working with BHR in 2015 as a Crisis Intervention Clinician. Jenny is also an Adjunct Clinical Professor with Saint Louis University School of Social Work. Jenny began her career in crisis intervention/suicide prevention with Life Crisis Services. Jenny worked with President's Life Crisis Services for thirteen years during which time she performed community education, postventions, oversaw the Survivors of suicide support group and supervised practicum students.



Beth has been with BHR for approximately eight years starting out as a part-time CIC, then moving to a full-time Follow-Up Coordinator. Beth graduated from the University of Kansas with a Bachelors in Psychology, Master of Arts in Clinical Psychology, and in 2017 completed the licensure process in Missouri to become a Licensed Professional Counselor.

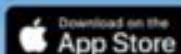
Enroll and participate in this no-cost resource at:
www.medicine.missouri.edu/mo-cpap



Children's Mercy PedsGuide App Pediatric decision support at your fingertips

The free Children's Mercy PedsGuide app gives front-line care providers helpful resources to assist with decisions in a fast-paced clinical environment.

- Created by multidisciplinary pediatric experts who understand your decision-making process.
- Intuitive design for easy access to evidence-based information.
- Quick customization provides decision support for drug dosing, GCS for head injuries, burn treatments and more.
- Detailed resources at your fingertips: drip calculations, administration concentrations and more.
- Treatment modules include Asthma, Febrile Infant, Resuscitation, BRUE and more.
- One-touch connection to 1 (800) GO MERCY / 1 (800) 466-3729.



Children's Mercy
KANSAS CITY

COMING SOON!

Washington University School of Medicine: **Advances in Pediatrics**

Fall 2021 | October 19 - December 1, 2021

Join Washington University physicians at St. Louis Children's Hospital virtually to learn more about topics relevant to pediatric providers. This year, the conference has transitioned to a pre-recorded virtual format available over a six-week period.



When: Content will be available to view between October 19, 2021 and December 1, 2021.

Cost: \$75 to gain access to all six pre-recorded presentations. Presentations will be available to watch until December 1, 2021.

How it Works: Once you register, you will be sent a link and password to view the pre-recorded, 1-hour presentations. For each presentation, you will receive one (1) CME credit (up to a total of six).

To Register: On or after October 19, 2021 access our education page on our website stlouischildrens.org/healthcare-professionals/education to register.

Sponsored by:

Washington University School of Medicine in St. Louis, Continuing Medical Education Office and St. Louis Children's Hospital.

Presented by:

St. Louis Children's Hospital

Questions?

Call Children's Direct at 800.678.HELP (4357).

Virtual Agenda

**Pediatric Middle Ear Disease:
Evidence-Based Diagnosis and Treatment**
- Andrew Blüher, MD

**Migraine in Children and Adolescents:
Evaluation and Treatment**
- David Callahan, MD

**COVID-19 in Children: Delta, School,
and Vaccines**
- Jason Newland, MD

COVID and the Pediatric Heart - Updates
- William Orr, MD

**Pediatric Sleep for the
Non-Specialist Provider**
- Kendra Krietsch, PhD

**Developmental Dysplasia of the Hip:
Treatment Approach for Newborns
and Young Children**
- Zachary Meyer, MD