



# The Alabama Pediatrician

Third Quarter 2021

## From the President

We will come through this stronger



**Katrina Skinner, MD, FAAP**  
Chapter President

How are you? Are you feeling tired? Depleted? Frustrated? So many of you that I've spoken to lately are running on empty. Your staff members are tired and worn thin. Every day you are having to figure out how to make it work with fewer and fewer resources. Parents are

less considerate and more demanding than we have ever experienced.

I am here to tell you that I see you, and I see the good work that you are doing. I know how much you care about your patients, their families, your community, and your employees. I see you going to battle to protect your patients and your community. For every one patient who complains, you have one hundred more who are quietly appreciative of your hard work and dedication. Despite the fatigue you are feeling, you are making an amazing difference.

I know this world we live in right now is tough, but I know that you are tougher. You were made for this. You chose this profession for just this occasion – to have the chance to fight for your patients when no one else will. No other physician group knows how to advocate for their patients like pediatricians. So hang in there and hang together and we will come through this stronger.

## Annual Meeting & Fall Pediatric Update to feature trauma-informed care, bullying, COVID-19 vaccine and adolescent immunizations, and more

### COVID-19 safety measures in place

The Chapter's 2021 Annual Meeting & Pediatric Update, set for September 24 - 26, 2021 at The Sheraton Birmingham in downtown Birmingham, is fast approaching! Within that time, we expect COVID vaccine boosters will be approved for healthcare workers and other Americans. Meanwhile, we know that our members have



been under tremendous strains during this COVID/Delta variant surge; we are looking forward to some time away from those stresses to connect with colleagues and decompress as a statewide family of pediatricians that weekend – with safety measures in place!

The following measures will be employed:

- Socially distanced lecture hall seating
- Mask requirement of all attendees
- All hotel employees masked
- Boxed meals for breakfasts and lunches
- Socially distanced exhibit tables
- Hand-sanitizers at coffee stations
- Extra sanitizing measures on the part of hotel staff in all areas

The CME program is strong, with speakers presenting on: bariatric surgery, adolescent immunizations, the Red Book 2021, COVID-19 vaccines for children, bullying, trauma-informed care and resilience, advocacy, diversity, the relationship with school nurses and more!

In addition, as part of our Friday afternoon separate practice management workshop, co-sponsored by the Chapter's Practice Management Association, the Chapter is hosting big names in the pediatric practice management world: Sue Kressly, of Kressly Pediatrics in Warrington, PA, and Todd Wolynn, of Kids Plus Pediatrics in Pittsburgh, PA, who will cover the business side of pediatrics, including 2021 coding guidance and how to address anti-vaxxers through social media and in the office.

The workshop will also feature sessions on the Cures Act (new patient information transparency requirements), marketing your practice, wellness and a hot topics discussion! The workshop will be followed by a two-hour Loss Prevention seminar, "Trial and Error," sponsored and presented by ProAssurance Indemnity.

Register online at [www.alaap.org](http://www.alaap.org).

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### Alabama Chapter – AAP

#### Mission:

The mission of the Alabama Chapter of the American Academy of Pediatrics is to obtain optimal health and well-being for all children in Alabama, and to provide educational and practice support for its membership so the highest quality of medical care can be achieved.

#### Values:

Children must be highly valued by society.

Each child must develop to his/her highest potential.

Children must have strong advocates for they have no voice of their own.

Pediatricians are essential to achieving optimal child health. The work of pediatricians, and the profession of pediatrics, must endure and grow even stronger.

#### Vision:

Children in Alabama are happy and healthy; Alabama pediatricians are professionally fulfilled and financially secure.

## COVID resources amid Delta surge

The last six weeks have been unimaginable for pediatricians in Alabama, as well as across the country. Each of you have gone out of your way to take care of your sick children, manage the stresses of overwhelmed practices and clinics (and everything that goes along with that), advocate to policymakers and administrators to do the right thing for kids, and deal with often hostile parents and families. We applaud you for all you are doing.

We are here to continue to support you with helpful resources and guidance for the many facets of this continued pandemic. Below are a handful of our most recent resources (at time of writing):



Melissa McNally, MD, FAAP, Chapter Area 5 Representative, and Danielle Speight, MD, FAAP, both of Partners in Pediatrics in Montgomery, participated in the Montgomery physician telethon in July to answer viewers' questions about the COVID vaccine. The effort was a collaboration between the Medical Association of the State of Alabama, the Chapter and other specialty societies to educate Alabamians about the COVID-19 vaccine.

### Chapter Q&A on concerns regarding COVID vaccine and myocarditis

The Chapter office reached out to Alabama's pediatric infectious disease specialists and cardiologists after receiving a number of questions from members regarding the concern over myocarditis after vaccination. From their responses, we developed a Q&A document, *Q&A: COVID-19 Vaccine and Myocarditis – August 2021*, available at <https://bit.ly/3h7kAgg>.

### Newly updated algorithms for schoolchildren for pediatricians

As you remember, last year, the Chapter, through the leadership of board member Jennifer McCain, MD, FAAP, developed algorithms to address best practices on how to care for students who are identified by school nurses as either having symptoms concerning for COVID-19 or who have had exposure to COVID-19. These algorithms have now been updated in light of the Delta variant and the most recent CDC guidelines. The differences from last year's documents are as follows:

Note these major changes from last year:

1. Included information for vaccinated vs. unvaccinated and for definition of close contacts for schools and how if masked, children exposed in school can be monitored without quarantine.
2. The CDC says that for unvaccinated children who have been exposed, they should get tested immediately after knowing that they have been exposed and also at day 5-7. Vaccinated children who are exposed can stay in school but should be tested at day 3-5.
3. Rapid Antigen tests are acceptable as the only test run for unexposed symptomatic kids if PCR is not readily available. (Delta variant causes much higher viral load and should be more easily detected). For exposed patients with a negative antigen test, we would still recommend a PCR. And if unexposed symptomatic child with rapid negative test continues to remain symptomatic, they should then have PCR sent.
4. Updated cardiology guidelines for athletes – link for guidelines included.

Here is the updated pediatrician algorithm – (<https://bit.ly/392Kw8B>).

### A note about HIPAA and school nurses

After attending a state school nurse meeting in July, it was brought to our attention that some healthcare providers may not be aware that school nurses are covered under HIPAA. Please see the HHS guidance on this here: <https://bit.ly/3jOYVLF>.

## Addressing Adolescent Health through a Collaborative School Nurse and Pediatrician Approach in Alabama

*Katrina Roberson-Trammell, MD, FAAP, Chapter School Health Champion, Assistant Professor, USA Health-Pediatrics, Medical Director, Southwest ACHN*

Over the past two years, as the Alabama Chapter-AAP's School Health Champion, I've chaired a Chapter project to improve communications between pediatricians and school nurses. With this article, I want to highlight what we've achieved, along with learnings for all pediatricians.

This project started from what we were hearing from our school nurse colleagues: that they want to ensure that they are considered part of the student's medical home team. Our mutual children are faced with chronic diseases, mental health challenges, as well as numerous social determinants of health. Although this concept should be automatic, since our children spend seven hours a day/180 days per year at school but may only visit their medical home once per year, there is always room for improvement. From here, our project, "The Bridge Between Pediatricians and School Nurses in Alabama," was launched.

Why narrow the communication gap? According to the CDC's Whole School, Whole Community, Whole Child model, "Every child in every school deserves to be healthy, safe, engaged, supported, and challenged." I was excited to have this discussion with hundreds of school nurses at the state Mega Education Conference in Mobile in July 2019. During my presentation, I defined the medical home and detailed the negative effects of chronic absenteeism on health and learning and discussed future partnership initiatives. They were engaged in identifying ways to improve the communication gap in their respective regions.

Feedback from school nurses included:

1. They would like to be considered part of the medical team when they call a physician's office regarding medication clarification orders, dosages or side effects.
2. They would like pediatricians to legibly complete all pertinent sections of the parental authorized medication forms.
3. They would like pediatricians to document all vaccinations in ImmPRINT.
4. They would like pediatricians to consider following the Advisory Committee Immunizations Practices (ACIP).
5. They would like for pediatricians to be aware of the state law that requires students to have a certificate of immunization (COI) to attend school.

That fall, I presented a similar talk at the Chapter Annual Meeting, sharing some of the feedback from school nurses as well. The compassionate and dedicated response was not surprising, as the Chapter has ALWAYS exemplified high standards of care for our state's children and their families' needs. I discussed chronic absenteeism's impact on education and health outcomes, including lower literacy, higher drop-out rates and higher risks of poverty, poor health outcomes, and likelihood of smoking, having diabetes and being overweight.

These facts highlight the important roles that school nurses have as on-site healthcare representatives and how



*Katrina Roberson-Trammell, MD, FAAP*

**"Coming together is a beginning.  
Keeping together is progress.  
Working together is success."**

**– Henry Ford**

### The American Academy of Pediatrics Council of School Health policy statement recommendations:

1. Having a full-time nurse in every school is the best means of ensuring a strong connection with each student's medical home.
2. Pediatricians should establish a working relationship with the school nurses who care for their patients with chronic disease to ensure the patient's health care plans are executed effectively within the school.
3. Pediatricians can offer direct support of school nurses by serving on school health advisory committees and providing current AAP medical recommendations.
4. School-based screening for vision, hearing or other conditions may be facilitated through coordination between pediatricians and school nurses and appropriate referrals, if applicable.

### Best practices to improve school nurse-pediatrician communication and support the medical home model:

School Nurses:

- Encourage families to access a medical home and attend well visit appointments
- Educate parents on the importance of necessary communication between school nurses and the medical home
- Facilitate parental permission for information exchange on individualized healthcare plans or excuses

Pediatricians/Medical Providers:

- Include school nurses as important team members in the delivery of healthcare for children and adolescents
- Establish mutual method of communications with school nurses
- Include patient's school nurse contact and pertinent information in medical record
- Ask patients/parents school-related questions to identify potential health-related issues that may result in absenteeism
- Offer training for school staff on chronic medical conditions

## How to Contact Your Chapter Leaders

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## COVID Resources continued from page 2

### Recording and resources: August webinar on COVID-19 vaccine ordering

On August 17, the Chapter conducted a webinar provided by the ADPH Immunization Staff on how to become a COVID-19 vaccine provider, how to order, considerations for sharing vaccine with other providers and still meet ImmPRINT requirements and new (and less onerous) Pfizer storage requirements. Below are the resources and points of information that came out of that webinar:

- Webinar recording – <https://bit.ly/3l1E4nR>
- ImmPRINT COVID-19 Vaccine Provider Enrollment Overview/Roadmap – referenced by ADPH Immunization Division during webinar. Scan the QR Code.
- List of COVID vaccine-enrolled providers in Alabama – for your information in case you wish to share vaccine with another provider. Scan the QR Code.
- List of providers who have ordered or had COVID vaccine delivered – includes separate worksheets for Pfizer, Moderna and J&J; for your information in case you wish to share vaccine with another provider. Scan the QR Code.
- Following the webinar, ADPH received word that Pfizer was going back to the 1,170-dose trays again for the next few weeks; Pfizer anticipates releasing new, smaller package configurations in October. ADPH will keep the Chapter posted as new information comes in.



### Patient handout - COVID-19 Exposure Guidelines

In August, Children's of Alabama collaborated with the Chapter on a patient handout for those who are exposed to someone with COVID; many thanks to Tori Anderson, MD, FAAP, and David Kimberlin, MD, FAAP, for developing this information:

- 2021 COVID-19 Exposure Guidelines Handout (English) <https://bit.ly/3h6iddj>
- 2021 COVID-19 Exposure Guidelines Handout (Spanish) <https://bit.ly/3DSrG1Y>

### Mask exemption resources

Since July, the Chapter and many partner organizations have advocated to school leaders to adopt AAP/ADPH/AL-AAP recommendations for masking in schools. Still, some schools are not following the guidelines. For those districts that have mask requirements, you may get questions or requests for mask exemptions. The Chapter Executive Committee has developed the following guidance and resources for you on this issue. Please use these freely and pass along to others who may benefit:

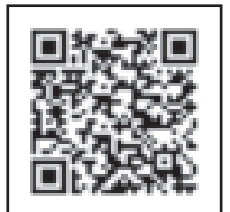
- AL-AAP Guidance on Mask Exemptions in Children and Adolescents – Scan QR Code at top of page.
- Sample letter for children with sensory-communication issues 2021 – Scan QR Code at top of page.
- Clinical Decision Tree (Algorithm) for Mask Exemption Requests for School-Aged Children – <https://bit.ly/3zUYgOa>

### 504 sample letter in areas where there are no mask requirements

For those of you in areas with no mask requirements, you might find it helpful for certain students with special needs (including diabetes) to request a 504 for them. Please see the sample letter – Scan QR Code at top of page.

### Chapter COVID-19 Vaccine Uptake Toolkit

As a reminder the Chapter's COVID vaccine toolkit can be found here: <https://www.alaap.org/covid19-vaccine-uptake-toolkit>, or scan the QR code at right.



### Adolescent Health continued from page 3

they can assist medical providers in keeping our children in school and healthy. Pediatricians and school nurses MUST work together to coordinate care for children/adolescents to maintain good health, manage chronic conditions, combat health issues that impact absenteeism and educate parents on issues that impact their children's health and safety.

With these principles in mind, the Alabama Chapter-AAP developed and implemented a grant project, ultimately funded by the Alabama Department of Public Health Children's Health Insurance Program, that allowed us to conduct roundtable discussions with pediatrician and school nurses pairs from across the state to develop best practices for communication and co-develop educational modules for teachers, parents and students on adolescent health. The nine teams chose an adolescent health topic that their pairs would address and impact in their respective regions/counties.

This learning collaborative began in January 2021, at which I presented on the purpose of our charge to set the stage for our remaining sessions and begin our teamwork. The teams met approximately every six weeks via Zoom webinars that were facilitated by a team from the UAB School of Public Health. Also, we met separately with our respective pediatrician/school nurse pairs dialoging, building rapport and completing assignments.

Teamwork included mapping our communication between pediatricians and school nurses so that we could make changes in our processes to better reach one another, which resulted in a lot of "aha" comments. It was interesting to hear some of the connections already in place but to build upon others. For some, just putting a face with a name strengthened their partnerships.

In addition, we were charged with working on at least one adolescent health topic with one another. This allowed for lengthy dialogue between the pairs and enabled us to form deeper bonds and connections, as we all are dedicated and passionate about our adolescent students/patients. Some of the adolescent health topics the pairs decided to work on together were vaping,

gun violence, depression and anxiety, suicidal ideation, well visits and immunizations. Everyone agreed that together we could positively impact adolescent health and success.

We also explored what a typical day looks like for each profession. While doing this exercise we thought about the potential breakdowns in connections during the day regarding a student/patient. What happens that throws your day off? By doing this assignment, we were able to brainstorm on shared learning and what small test of change could be done. Some pairs found out that lunch time is not as optimal a time to meet with the school nurse as it was assumed to be. In fact, 7:30 a.m. proved to be a better time for us to have our learning collaborative sessions.

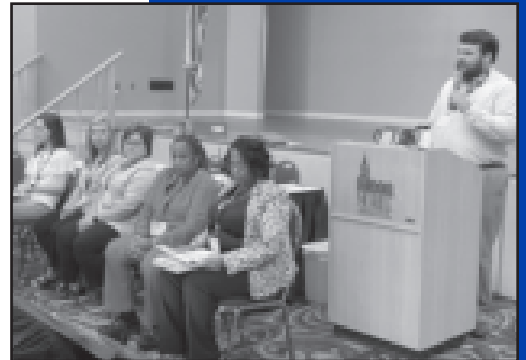
Visually seeing a typical day allowed each of us a better understanding and respect for one another's role and how essential effective communication is in this process.

This summer, our learnings were shared with the state's school nurses by three local school nurse/pediatrician teams at this year's Mega Conference; that same group will share their lessons at the upcoming Chapter Annual Meeting on September 26.

These three local teams include:  
Mobile Team: Katrina Roberson-Trammell, MD, FAAP and Pamela Smith, MSN, RN; Tuscaloosa Team: Shawn Cecil, MD, FAAP, Cindy O'Quinn, RN, and Sharon Dickerson, RN; Haleyville Team: Brooke Goar, MD, FAAP, Cindy Defoor, RN and Jamie Tucker, RN.

I sincerely feel that this collaboration was a success for those who actively participated. It provided a platform for two of the most influential groups in an adolescent's life to come together and advocate for our adolescents and their families. It serves as the foundation of what is yet to come.

I challenge ALL of US across Alabama to reach out to our local school nurses and ask the question: How is OUR communication and what CAN I DO to close any gaps or to improve our partnership? Even if it is one school at a time!



Tuscaloosa Team: Shawn Cecil, MD, FAAP, Cindy O'Quinn, RN and Sharon Dickerson, RN



Haleyville Team: Brooke Goar, MD, FAAP, Cindy Defoor, RN and Jamie Tucker, RN

## Pediatricians, family physicians come together to spread pediatric expertise in child death review across the state

By Grant R. Allen, MD, FAAP, Chapter Past President and 2021 CDR Project Physician Leader



Grant R. Allen, MD, FAAP

I know that Child Death Review is an odd topic to be passionate about, but using review of past events to prevent future deaths speaks to the heart of pediatrics, population health and anticipatory guidance. Child Death Review involved social determinants of health and adverse childhood experiences well before those were hot topics.

When Dr. Kathy Monroe (Pediatric Emergency Medicine, Children's of Alabama) and I saw the request for proposals for a grant to improve our Child Death Review teams in Alabama, we were both excited about the opportunity. For those who are not aware, there is a national system of county-level data on child deaths. This data is used to craft policy that helps prevent future child deaths. This process has been used to guide building codes for pool enclosures, graduated licensing programs, ATV

laws, safe sleep environments and many others. In Alabama, Local Child Death Review Teams (CDRTs) meet at the circuit court level (one to four counties per "circuit") and are chaired by the district attorneys. The teams are made up of representatives from public health, law enforcement, human resources and healthcare. They submit their data to the state team under the umbrella of the Alabama Department of Public Health (ADPH).

For our project (which was funded!), we recruited pediatricians, family physicians, and nurse practitioners to cover the circuits across the state. Modelling our training program on the highly successful ECHO model, we conducted four Zoom teleconferences over five months, with learning and sharing times designed to improve healthcare providers' comfort and understanding about participation in CDRT.

We will continue to follow up for six to 12 months after the grant to collect data and have the UAB School of Public Health analyze the success of our program. This process far exceeded my expectations. We were able to provide a trained medical member to almost every court district in Alabama. A few districts have already had a meeting involving our newly trained child advocates and several others are aware that they now have interested community pediatrician partners willing to serve.

We are already seeing gains from this summer's work. Law enforcement from a team that met recently asked ADPH for infant sleep death scene investigation training based on input from the new pediatrician on their local CDRT.

This has been such an amazing experience – as Dr. J. Wiley always said about moving the dial on quality improvement, we have certainly moved the dial for improved child death review teams in Alabama. Understanding the past will help prevent future child deaths – what an amazing gift from the present to the future!

If you would like to learn more, please check out links on the project page of the Chapter's website here: <https://www.alaap.org/impacting-child-death-review>.

**"Introducing peanut -containing foods in the first year reduces the risk that an infant will develop a food allergy to peanuts."**

**-Dietary Guidelines for Americans, December 2020**



**The groundbreaking LEAP study was published proving that early introduction of peanut foods reduced the risk of developing peanut allergies in high-risk infants by up to **86%****

[www.preventpeanutallergies.org](http://www.preventpeanutallergies.org)

# PROTECT BOYS AND GIRLS FROM Human Papilloma Virus



Only healthcare professionals have the power to reduce the risk of Human Papillomavirus (HPV) cancers and pre-cancers among your patients. It is your goal for every patient you care for to complete vaccine series against HPV before the age of 13. You can give initial dose as early as 9 years of age.

## TIPS TO INCREASE VACCINATION RATES

- Your strong recommendation is proven to be the strongest indicator of vaccination.
- Send out recall/reminder messages via mail, email, or text to increase office visits.
- Schedule the next appointment before they leave the current visit.
- Recommend all ACIP vaccines.
- Assess each patient's vaccine status using ImmPRINT Forecaster.
- Educate all staff about your immunization goals for your patients.

**70%**  
of oropharyngeal cancers can be prevented.

**80%**  
of sexually active people will contract HPV over their lifetime.

**90%**  
of cancers caused by HPV could be prevented.

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For more information, please visit  
[alabamapublichealth.gov/imm](http://alabamapublichealth.gov/imm)





## ACHIA kicks off teen vaccine collaborative

by Cason Benton, MD, FAAP

The Alabama Child Health Improvement Alliance's (ACHIA) #StayWell2022: A Teen Vaccine QI Learning Collaborative kicks off at the Alabama Chapter-AAP Annual Meeting in September. The collaborative runs from December 2021 to August 2022 and the timing could not be better.

Adolescent vaccine completion is a perennial challenge for our state. While making great strides over the last five years, HPV vaccine rates are far from the Healthy People 2030 goals. With the pandemic, barriers are only increasing. Even Tdap vaccines declined 64 percent during the pandemic compared to the previous year -- the largest drop among all routine childhood and adolescent immunizations. Pediatricians report that Alabama's well-documented COVID vaccine hesitancy may be extending to routine vaccines as well.

Practices participating in ACHIA's 2016 HPV quality improvement (QI) collaborative ignited an uptick in vaccinations that pushed Alabama ahead of other southern states for HPV vaccine administration. #StayWell2022 harnesses lessons learned from 2016 to increase teen vaccinations in 2022 and beyond.

The collaborative will focus on testing and implementing changes to maximize vaccine completion of Tdap, HPV, MenACWY by 13 years of age. For interested practices, optional opportunities exist to enhance workflows for the COVID-19 vaccine and vaccines for older teens.

Self-paced online educational sessions will be presented by Tamera Coyne-Beasley, MD, FAAP, David Kimberlin, MD, FAAP, and Gregory Zimet, PhD. These CME modules will address vaccine basics for teen and COVID immunizations, vaccine hesitancy and the role of diversity and equity in vaccination completion. Participants will also gain insights from HPV cancer survivors and teens from the UAB Adolescent Youth Advisory Board. Experts will be available for questions and answers during the monthly webinars.

During the collaborative, practices will test workflow improvements for reminder/recall, strong provider messaging and minimizing

missed opportunities. Past participants of collaboratives have cited the "All Teach, All Learn" culture as the most valuable aspect of this forum. Often the most valuable ideas for improvements come from one another.

Beyond the foundational goal of increasing vaccine rates and thereby decreasing preventable diseases, #StayWell2022 QI participation satisfies other tasks essential to a pediatric practice:

- Board certification credits: American Board of Pediatrics Maintenance of Certification Part 2 and Part 4
- Enhanced revenue:
  - Participation satisfies multiple Patient-Centered Medical Home (PCMH) (re-) certification core criteria. PCMH is incentivized by several payors.
  - Teen vaccinations (and well visits) are incentivized by several payors.

#StayWell2022 is streamlined to improve outcomes while obtaining "just enough" data to test change ideas. If you are interested or have questions, please email Linda Champion at [lchampion@alaap.org](mailto:lchampion@alaap.org) or Cason Benton, MD, FAAP at [ebenton@uabmc.edu](mailto:ebenton@uabmc.edu).

**"I have participated in several state and national AAP collaboratives and feel like I get something valuable from each one besides the obvious benefit of MOC credit. You learn so much from experts about what resources are out there to help busy practices, but there is also shared learning among the other participating pediatric practices. People are so creative in what they try, and you benefit from hearing about their successes and failures. I think this collaborative is very timely as vaccinations have become a hot topic with COVID. My practice is excited for the opportunity to develop tools that will make us more successful in our adolescent vaccinations."**

**— #Staywell2022's statewide physician lead, Heather Taylor, MD, FAAP, Professor, Department of Pediatrics University of Alabama, Director of Undergraduate Medical Education for the College**

#StayWell2022 content experts:

- Tamera Coyne-Beasley, MD, FAAP, MPH, Professor; Derroll M. Dawkins, M.D. Endowed Chair in Adolescent Medicine, University of Alabama at Birmingham;
- David Kimberlin, MD, FAAP, Professor/Co-Director, Division of Pediatric Infectious Diseases;
- Gregory Zimet, PhD, FSAHM, Professor of Pediatrics & Clinical Psychology, Co-Director, IUPUI Center for HPV Research, Division of Adolescent Medicine, Department of Pediatrics, Indiana University School of Medicine.

Resources:

Healthy People Accessed 8/25/2021  
<https://bit.ly/3tshxUK>

CDC Alabama HPV Vaccination Report May 2019

The impact of COVID-19 on pediatric vaccination rates in Alabama

Hannah E. Brooks, Lane A. McLendon, Casey L. Daniel  
<https://doi.org/10.1016/j.pmedr.2021.101320>



## Reach Out and Read All About It!

2022 Call for ROR Young Investigator Award Applications are due October 1, 2021

*If you have any interest in research around Reach Out and Read, you are strongly encouraged to apply.*

Each year, Reach Out and Read national sponsors a Young Investigator Award (YIA) through the Academic Pediatric Association (APA). Entitled the “APA YIA for Primary Care Strategies for the Promotion of Early Literacy and School Readiness,” or sometimes called the “Reach Out and Read YIA,” the award provides up to \$15,000 for a 12-month research project focused on interventions in primary care intended to support the early stages of literacy development and school readiness among children at risk for reading problems or school failure.

The award’s primary goal is to foster development of young investigators who will advance a research agenda related to:

- Improving early literacy and school readiness among children, especially those at risk for language delay and school problems, through primary care-based interventions, including Reach Out and Read and other related programs.
- Understanding home environmental and other influences (both social and biological) related to early literacy and school readiness to inform development and refinement of primary care interventions.

For more details about the award and the application process, visit <https://bit.ly/3Dyf4wU>.

Reach Out and Read-Alabama 12th annual Summer Campaign focuses on well-child visits

Due to the COVID-19 pandemic, many Alabama pediatric and family providers have experienced a drastic decrease in scheduled vaccination visits during the 18 months. Reach Out and Read-Alabama’s (ROR-AL) unique and innovative approach to encouraging children and families to attend well-child visits regularly and receive the recommended immunizations on the correct schedule has been shown to be very effective, and while books are at the



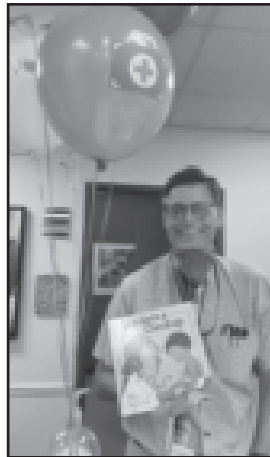
heart of the program model, they do not comprise all that makes up an ROR-AL visit. This year, ROR-AL’s 12th annual Rx for Summer Reading campaign featured the book, *Leo Gets a Checkup*, which captures all the details of an ROR-AL well-child visit, including an immunization.

In the book, Leo is taken to his doctor by his father and waits patiently for his appointment. During his check-up, he receives a physical and a shot. Leo is brave in the face of fear when receiving his immunization, helping to normalize the check-ups that include vaccinations. Leo leaves his visit with own book, just like the children who will receive a copy of *Leo Gets a Checkup* at each program site’s event.

Twenty-eight program sites throughout the state used the book to normalize the well-child visit and create an atmosphere of fun, while encouraging families to establish relationships with their healthcare providers that, in turn, help the family make better healthcare choices, including keeping scheduled immunizations. Our providers created a space where the families they serve foster healthy brain development and create strong bonds that last a lifetime.

Visit [roralabama.org/rx-for-summer-reading](http://roralabama.org/rx-for-summer-reading) to view photos and videos from the events.

continued on page 11



## Reach Out and Read continued from page 10

### Clinical experiences with Reach Out and Read: An exploratory qualitative approach

Much evidence has demonstrated the impact of Reach Out and Read (ROR) on children and families, but there is less knowledge of the program's effects on clinicians. ROR and the Academic Pediatric Association's Continuity Research Network recently collaborated on the first national study to examine clinicians' experiences during ROR implementation in their practices. An anonymous, cross-sectional, national survey of pediatric and internal medicine/pediatrics residents and faculty at practices participating in the network was conducted in an attempt to evaluate literacy promotion activities and training efforts. Responses were evaluated by researchers, and four themes emerged: 1) Child/family impact; 2) Physician impact; 3) Impact on clinic practice; and 4) Social determinants of health.

Clinicians reported that ROR implementation has a positive effect on patients, families, and their own satisfaction and practice methods. To read the entire article, visit <https://bit.ly/3gOrhUe>.

### Reach Out and Read-Alabama partners with the Alabama Campaign for Grade-Level Reading to expand services in five Alabama counties

On July 1, Governor Kay Ivey, along with the Alabama Department of Early Childhood Education Secretary Barbara Cooper, Alabama Medicaid Agency Commissioner Stephanie Azar, and Alabama Department of Public Health State Health Officer Scott Harris, MD, announced the expansion of Reach Out and Read-Alabama via state funding to expand services to children living in Macon, Marshall, Monroe, Jefferson, and Randolph counties, the five pilot counties for the governor's Campaign for Grade-Level Reading initiated in 2020.

Through our program, children in the pilot areas will receive brand-new books at each well-child visit, encouraging them to be seen by physicians on a regular basis.

Children from the pilot counties are served by the following practices:

**Jefferson:** Birmingham Pediatric Associates, Children's of Alabama, Midtown Pediatrics, Pediatrics West Bessemer and McAdory, Jefferson County Health Department, Central Health Center, Eastern Health Center, Western Health Center, Newborn Follow Up Program, Nurse Family Partnership of Central Alabama, UAB Primary Care Clinic, Simon-Williamson Clinic Pediatrics, and Tots N Teens Pediatrics

**Macon:** Southeast Pediatrics

**Marshall:** Kids R Us Pediatrics and Marshall County Pediatrics

**Monroe:** Monroe County Hospital and Primary Care Center of Monroeville

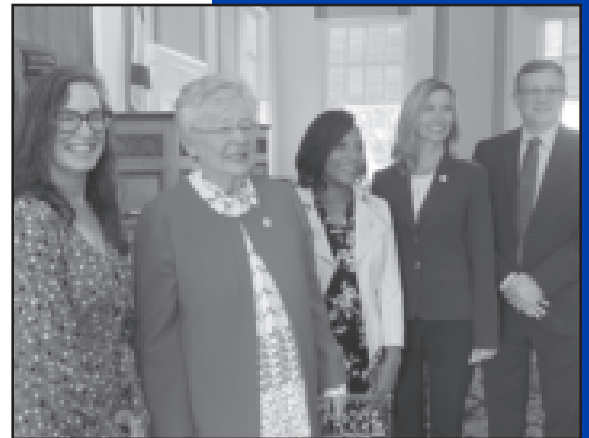
**Randolph:** Anniston Pediatrics, Model City Pediatrics, and Purohit Pediatric Clinic

"Under the Reach Out and Read program, the pilot counties have developed and began implementing comprehensive literacy strategies from which the rest of the state can learn," said Governor Kay Ivey. "Alabamians should be proud that state agencies are working together to improve literacy by exposing children to books early on through the Reach Out and Read program, as well as improving their health and well-being."

The funding will continue for three years, with ADECE funding matched by federal Medicaid administrative dollars, to be followed by funding through the CHIP program.

Congratulations to the Reach Out and Read staff, Medical Director Marsha Raulerson, MD, FAAP, and the state agency representatives who made this a reality!

Amy Crosby, ROR-AL Statewide Coordinator, was on hand with Governor Kay Ivey, Early Childhood Education Secretary Barbara Cooper, Medicaid Commissioner Stephanie Azar, and State Health Officer Scott Harris, MD, for the ROR-AL expansion announcement in July.

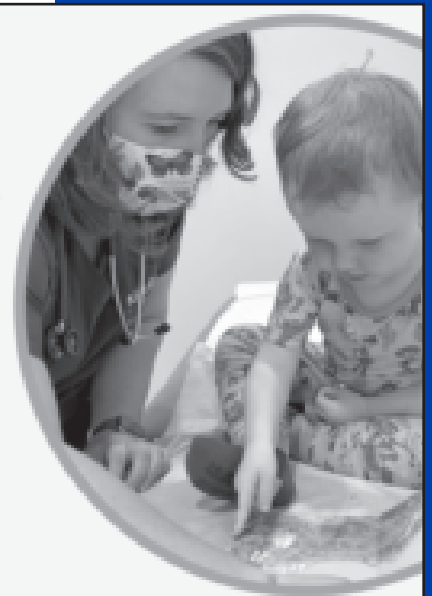


“

We believe that reading with a child is an important aspect of their overall development. Reading helps develop early literacy skills, builds their vocabulary, can help them learn social and communication skills, and even help them learn to cope with emotions. Books can foster imagination and spark their curiosity. Beyond that, the time spent reading together promotes bonding and helps to build and strengthen relationships between a parent and their child.

That is why we are excited to be partnering with Reach Out and Read-Alabama in the Campaign for Grade Level Reading Initiative! Through this partnership we can help provide children in our area with a solid foundation and opportunity to flourish in school and beyond.

— Tonya Miller, MD  
Kids R Us Pediatrics



## Event Calendar

September 24, 2021  
2021 Practice Management  
Workshop  
The Sheraton Birmingham

September 24 – 26, 2021  
2021 Annual Meeting &  
Fall Pediatric Update  
The Sheraton Birmingham

October 8 – 12, 2021  
2021 AAP National  
Conference & Exhibition

April 28 – May 1, 2022  
2022 Spring Meeting &  
Pediatric Update  
The Lodge at Gulf State Park  
Gulf Shores, AL

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## LET'S HEAR IT FROM OUR DEPARTMENTS OF PEDIATRICS!

### New sports cardiology clinic at UAB

By Mitch Cohen, MD, FAAP, Katharine Reynolds Ireland Chair of Pediatrics, University of Alabama at Birmingham School of Medicine; Physician in Chief, Children's of Alabama



Mitch Cohen, MD, FAAP

A new multidisciplinary clinic at UAB has been established to help young athletes safely get back to exercising. This sports cardiology clinic combines the expertise of UAB Sports Medicine and Pediatric Cardiology in order to address all the issues that potentially arise as athletes return to play. The clinic is run by Sara Gould, MD, MPH, an associate professor of orthopedic surgery, and Camden Hebson, MD, an assistant professor of pediatric cardiology, who will see patients together during visits. While the clinic can serve the needs of all patients seeking care or clearance to get back into sports, there are specific, often

challenging, conditions that will be emphasized.

COVID-19 and its complications are an expected focus. With concerns for cardiac involvement (myocarditis, risk for arrhythmias, etc.) after COVID-19, return to athletics is a topic of potential unease. The sports cardiology clinic will offer all of the needed cardiac testing to evaluate patients prior to returning to sports (or if symptoms develop while exercising), as well as exercise prescriptions and training advice for those in need of these specifics. The clinic also treats athletes who are experiencing post-COVID fatigue. Testing to determine current level of fitness, set goals with the patient, and then build a treatment plan with exercise prescription will be a typical care pathway.

Another group of patients on which the clinic will focus are those with orthostatic intolerance, including postural orthostatic tachycardia syndrome (POTS). This fairly common group of clinical syndromes is particularly important to address in a multi-disciplinary manner, as many symptoms (palpitations, syncope, dyspnea) seem “cardiac” in nature, while exercise is a staple of treatment over time. For these patients, complete diagnostic and cardiac testing will be offered, followed by detailed treatment plans, including exercise prescription. We have seen an increasing number of patients with POTS-type pathophysiology and symptoms after COVID-19, so these patients in particular would be ideal to see in clinic. POTS symptomatology after concussion, other viral illness, or without a known cause are also great reasons for referral.

The sports cardiology clinic, which opened in late May, is located on the UAB Highlands Campus. For more information or clinic appointments, call 205-930-8339 or 205-934-3460.



Camden Hebson, MD

### The debate over masks in schools

By David Gremse, MD, FAAP, Chair, Department of Pediatrics, University of South Alabama



David Gremse, MD, FAAP

Whether or not children should wear masks at school has become a controversial topic among many parents. A statement on [healthychildren.org](https://www.healthychildren.org) sums up the AAP position by stating: “Masks reduce transmission of COVID-19 and can make in-person schooling possible during the pandemic.”

Many of the USA faculty, led by Benjamin Estrada, MD, FAAP, have been advising school districts on approaches to COVID-19 to keep schools open and reduce the risks to students. Haidee Custodio, MD, FAAP, Natalie Fox, DNP, PNP-BC, PCMH, CCE and I were invited to speak at a meeting in August of the Baldwin County Board of Education that was open to the public. Dr. Custodio gave an excellent presentation refuting misconceptions about masks such as the transmission via droplets instead of isolated small viral

## Departments of Pediatrics continued from page 12

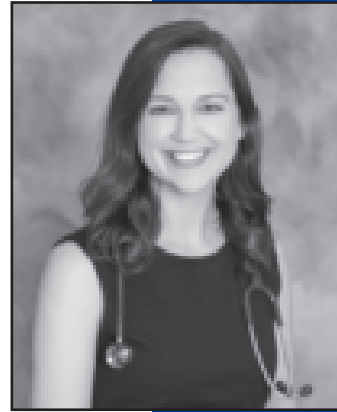
particles that parents argued can penetrate masks. The board allowed 30 parents to address the community, 15 in favor and 15 opposed to the mask policy.

As I listened to the speakers, common themes emerged among those who spoke for and against the mask policy. Those who spoke against masking focused on a more selfish perspective, touting personal freedom. Examples include parents exclaiming “I know what’s best for my child” and a student who complained that “masks are ruining MY high school experience.” Those who spoke in favor of masking focused on what’s best for the community. Examples included several parents who made the comment that if the inconvenience of wearing masks makes it safer for all our children, I’m OK with that.

Parents opposed to wearing masks remarked that the incidence of COVID-19 infection among children in schools with mask mandates does not significantly differ from those in schools that do not require masks. The explanation for this observation is that most infections probably occur through spread in the community rather than in schools. Opponents then ask, what difference does it make whether students wear masks or not? The answer is to take reasonable measures to reduce the risk of infection to our most vulnerable children.

There are many asymptomatic children in whom COVID-19 is detected by pre-procedure testing at USA Children’s and Women’s Hospital. It is these children who do not know they are infected who could attend school and infect others without knowing it. The most compelling reason for masks was given by the father of a child with cystic fibrosis. He explained that his child struggled with virtual learning last year and performed better in a classroom setting. In my experience, parents of children with chronic medical conditions are extremely careful about limiting the risk of exposure for their children to coronavirus outside the home. For these children, their biggest risk of exposure to COVID-19 is at school. If parents determine that the benefits of a classroom education for their child exceed the risk of exposure to coronavirus at school with a mask policy in place, then they will send their children to school.

The wearing of masks will not guarantee that every single child is protected from coronavirus. However, if children who have asymptomatic infections are wearing masks, the risk of their spreading the infection to vulnerable children with chronic medical conditions is greatly reduced. Furthermore, by reducing the total number of children who become infected through the wearing of masks, it reduces the number of healthy children who may acquire an infection resulting in severe acute COVID-19 or MIS-C. At the end of the presentations, the Baldwin County School Board voted overwhelmingly to continue the mask policy.



Brooke Goar, MD, FAAP

### Early Career Spotlight:

#### Dr. Brooke Goar back at home in Haleyville caring for rural families

By Nola Jean Ernest, MD, PhD, FAAP,  
Chapter Early Career Pediatrician  
Representative

This month, it is our honor to spotlight one of our newest early career pediatricians, Dr. Emily “Brooke” Goar. Dr. Goar is a 2020 graduate of the UAB Pediatric Residency Program and now serves as a general pediatrician in Haleyville, Ala.

Haleyville is a small city with a population of around 4,000, known for being the town where the first 911 call occurred! It is also where Dr. Goar spent her childhood years. “I’ve known I was going to be a doctor since the second grade. I have always been

drawn to rural medicine and knew I would end up in an underserved area one day. I’m grateful to be home and serving the children in the same community in which I grew up.”

Now back in Haleyville, she has become active with the Marion County Child Death Review team. Dr. Goar is interested in child advocacy and preventative medicine and is also involved with the Alabama Chapter in a project to improve communication with school nurses. Within her clinic, she is becoming known as an advocate for sleep – both promoting safe sleep for infants and proper sleep hygiene for adolescents.

Dr. Goar is not just a pediatrician – she is also a wife to her high school sweetheart, Clay, and mother to two young boys, Owen and Henry. They love Mexican food and spending time outside together. She is also a bibliophile and especially enjoys Jodi Picoult books.

When Dr. Goar and her family moved back to Haleyville, she filled a void that had been in that community for as long as any local can remember. The staff at Haleyville Pediatrics summed up our sentiments well when they said, “Haleyville Pediatrics has had such a huge impact on not only this community but also the surrounding communities as well. Dr. Brooke has such a compassionate, caring heart for her patients and their family members. We cannot wait to see what the future holds for Dr. Brooke and her practice.”

## Coding

### O r n e r

### New and revised 2022 ICD-10-CM diagnosis codes

by Lynn Abernathy Brown, CPC

The list below includes a few new and revised 2022 diagnosis codes effective 10/01/2021. For a complete list refer to <https://www.cdc.gov/nchs/icd/icd10cm.htm>.

ICD-10-CM Code	Code Description
	<b>LOW BACK PAIN (Replaces M54.5)</b>
M54.50	Low back pain, unspecified
M54.51	Vertebrogenic low back pain
M54.59	Other low back pain
	<b>NEWBORN</b>
P00.82	Newborn affected by (positive) maternal group B streptococcus (GBS) colonization
	<b>NEONATAL SCREENING (Replaces P09)</b>
P09.1-P09.9	Abnormal findings on neonatal screening: includes inborn errors of metabolism, congenital endocrine disease, congenital hematologic disorders, cystic fibrosis, critical congenital heart disease, neonatal hearing loss
	<b>COUGH (replaces R05)</b>
R05.1	Acute cough
R05.2	Subacute cough
R05.3	Chronic cough
R05.4	Cough syncope (Code first Syncope and Collapse R55)
R05.8	Other specified cough
R05.9	Cough, unspecified
	<b>SYMPTOMS AND SIGNS</b>
R45.88	Nonsuicidal self-harm
	<b>FEEDING (Replaces R63.3)</b>
R63.30	Feeding difficulties, unspecified
R63.31	Pediatric feeding disorder, acute
R63.32	Pediatric feeding disorder, chronic
R63.39	Other feeding difficulties (includes Feeding Problems in infant and Picky eater)
	<b>IMMUNIZATION COUNSELING</b>
Z71.85	Encounter for immunization safety counseling

DISCLAIMER: Children's of Alabama does not accept responsibility or liability for any adverse outcome from the advice of Lynn A. Brown, CPC, for any reason, including inaccuracy, opinion and analysis that might prove erroneous, or the misunderstanding or misapplication of extremely complex topics. Any statement made by Lynn A. Brown, CPC, does not imply payment guarantee by any payor discussed.

## Practice Management Association update

By Lori Coletta, PMA Chair

On July 22, 2021, the PMA kicked off its Quarterly Regional Sharing /Hot Topics meeting. The next Regional Sharing /Hot Topics meeting will be in October. Register now for the PMA Fall Meeting, set for Friday, September 24, 2021, at The Sheraton Birmingham. The next PMA educational webinar is scheduled for November 17, 2021, at 12:15 p.m. Speaker Jan Blancher will address Pediatric ICD and CPT coding updates for 2022.

Is your practice manager not involved in the PMA? He or she can sign up on the Chapter website and begin networking with managers across the state! Visit <https://www.alaap.org/practice-management-association-who-we-are>.

## CHAPTER BRIEFS

### Stubblefield joins ADPH



Wes Stubblefield, MD, FAAP

Congratulations to Wes Stubblefield, MD, FAAP, Chapter Immediate Past President, who joined the Alabama Department of Public Health team as a District Medical Officer for the Northern and Northeastern Districts. Dr

Stubblefield is originally from Vernon, AL. He received his B.S. in Biology from David Lipscomb University in Nashville, TN in 1999, and his M.D. from the University of Alabama School of Medicine in 2004. He completed a residency in pediatrics at Vanderbilt Children's Hospital in 2007. He most recently practiced at Infant's and Children's Clinic in Florence. He has been an active force in the Alabama Chapter leadership since 2008, and served as President from 2017-2020. The Chapter looks forward to working with him in this new role!

### Whitley receives Rotary Vocational Service Award for 2020-2021



Richard Whitley, MD, FAAP

Richard Whitley, MD, FAAP, professor in the UAB Division of Infectious Diseases, has been named the recipient of the 2020-2021 Rotary Vocational Service Award by the Rotary Club of Birmingham. This award

is given each year to a non-Rotarian person in recognition of excellence in a vocational service that is recognized beyond the territory of the club.

Dr. Whitley was selected for this award for his important work and contributions related to the COVID-19 pandemic.

Congratulations, Dr. Whitley!

### Feig receives PAS Service Award



Daniel Feig, MD, FAAP

Daniel Feig, MD, FAAP, professor in the UAB Division of Pediatric Nephrology, received a Service Award from the Pediatric Academic Society for his leadership, service, and commitment as a member of the Pediatric Academic Societies 2021

Meeting Program Committee.

Dr. Feig represented the International Pediatric Hypertension Association on the Meeting Program Committee. His dedication to advancing child health and working collaboratively with other researchers and health care professionals made a significant contribution to building a high-quality scientific program.

Kudos, Dr. Feig!

## 2020-2021 AAP PMA Executive Committee

Chair: Lori Coletta, Over the Mountain Pediatrics

1st Vice Chair: VACANT

2nd Vice Chair: Gena Allen, South Baldwin Pediatrics  
Secretary/Treasurer: Stephanie Hancock, Midtown Pediatrics

Communications Chair: Lynn Brown, CPC, Children's of Alabama

Immediate Past President: Carol Aiken, Smith Family Clinic for Genomic Medicine

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