

FALL 2023



Oregon City Pediatrics

# TAKE CARE

HEALTHY TIPS  
FOR  
FALL

The kids are back in school, the leaves are changing colors, the sun setting earlier and earlier, the autumn routine is in full swing. In taking care of all your back-to-school necessities, don't forget to Take Care in between.



The Children's Health Foundation is a non-profit organization that partners with your Pediatrician to develop quality health care programs in our community. We work together to foster the highest quality care for children, to raise awareness on health issues, and to achieve better children's health outcomes. Please ask your provider for more information.

CHILDREN'S HEALTH *foundation*

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Portland, Oregon 97239  
503-222-5703 503-224-3938 (fax)  
[www.ch-foundation.org](http://www.ch-foundation.org)

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## 5 Ways to Help Your Kids Have a Healthy School Year

Parents should begin to teach their children about body safety between the ages of 3 to 5.

### 1. PRIORITIZE THE BASICS: SLEEP, EXERCISE & NUTRITION

Begin with the basics, ensuring that students get nutritious meals, sufficient sleep and physical activity. All of these are key to academic and social success. Studies show that children who eat a nutritious breakfast function better at school, for example. Many children qualify for free or reduced-price food at school, including breakfast. The forms for these services can be completed at the school office.

Getting enough sleep is also critical to staying healthy and thriving at school. Not getting enough sleep can affect memory, concentration, creativity and learning. In fact, lack of sleep is linked with lower academic performance, school attendance and tardiness.

### 2. STAY UP TO DATE ON CHECKUPS & IMMUNIZATIONS

If your child has not had a well-child checkup in the last year, schedule a back-to-school physical which will include any needed vaccinations. If they will be playing a sport, be sure to get a pre-participation (sports) exam. Your pediatrician can help you update any forms your child's school may need in case of a medical emergency.

The single most effective way to protect children as they return to school is to make sure they are up-to-date on all of their immunizations. We've seen a decline in vaccination rates nationally and are concerned about potential outbreaks of life-threatening diseases. A recent case of polio reported in New York reminds us that we cannot let down our guard. We also know that people vaccinated against viruses such as COVID and influenza (flu) are much less likely to have a severe illness or be hospitalized if they do get sick, compared with those who are unvaccinated.

If you have health insurance coverage through Medicaid or the Children's Health Insurance Program (CHIP), check that your contact information is up to date with your state Medicaid agency. This will ensure you get timely updates about your health coverage so you can avoid any gaps in coverage.

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### 3. TUNE IN TO YOUR CHILD'S MENTAL HEALTH

Many children and teens have experienced mental health struggles over the past few years. Let your child know it's OK to talk about how they're feeling, and make it safe for them to discuss tough issues with you. Kids often avoid talking about touchy subjects, especially if they expect to be judged, lectured or punished. If you haven't already made this clear, affirm that your child can tell you anything. Emphasize that these conversations will take place in a judgment-free zone and really listen to what your child is saying.

Stay on the lookout for any changes in behavior that worry you or any signs of anxiety, depression or distress. If you have a firearm in your home, make sure to lock it up and store the ammunition separately. The increased risk of suicide is higher for children and teens who live in a home where guns are stored loaded or unlocked.

Try to prioritize family meals and self-care breaks, like taking walks together. These can be great opportunities to talk. Ask your pediatrician if you are unsure if your child needs help or how to start a discussion. Schools may also offer sources of mental health support.

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*Source: American Academy of Pediatrics Council on School Health (Copyright © 2023)*

### 4. TALK ABOUT RACISM, BULLYING & KINDNESS

Talk with your child about racism and hate. Encourage children to seek help from a trusted adult if they are discriminated against or witness an act of bullying or discrimination against others. Emphasize the value of treating others with respect and how simple acts of kindness can make a big difference. In fact, research shows that kindness can reduce stress and offer health benefits for everyone.

### 5. PLAN FOR MINDFUL MEDIA USE

The change in routine is a good time to create or update your family media plan so you can help your child balance screen time with sleep, exercise and other healthy activities. Help your children choose high-quality programs or games and help them recognize sites that promote false information.

This is also a good time to engage in conversations with your child about if and how they use social media, which can be beneficial but also problematic for some. We are still learning about the ways social media can affect human health, especially among children and teens. (See "Social Media & Mental Health.")

### REMEMBER

Children are resilient and can overcome many challenges with the help of trusted adults around them. Talk with your pediatrician if you have any questions or concerns about your child, including changes in mental or behavioral health. Look for any notable changes in sleep, weight, eating habits or other everyday patterns. Your pediatrician is here to help!

## Is My Child Up to Date with COVID Vaccines?



COVID is still spreading. And the virus that causes COVID changes over time. That's why getting the updated vaccine is the best thing to do to keep your kids healthy. It also helps make sure that your kids can keep attending child care, school and other activities that are so important for their physical and mental health.

Updated COVID vaccines are recommended for kids age 6 months and older. Nearly 200,000 children and teens younger than 18 years old have been hospitalized with COVID since August 2020. The vaccine provides broad protection against serious illness.

Your child will be ready to resist infection—and it's an important way to protect the health of others.

### A VACCINE FOR BABIES, KIDS & TEENS

The COVID vaccine dose your child will get is based on their age. Your pediatrician can explain which vaccine is right for your baby, child or teen. They can also advise if or when your child should get another dose.

### REMEMBER

Everyone age 6 months and older should receive at least one 2023-2024 COVID vaccine to be considered up to date. Some people (6 months through 4 years or immunocompromised) may need more than one dose to be considered up to date.

Most insurance plans and the Vaccines for Children program will cover the vaccine at no cost to patients. The Bridge Access Program provides no-cost access to the vaccines for adults without insurance or whose insurance will not provide no-cost coverage.

[Vaccines for Children \(VFC\) Program \(Centers for Disease Control and Prevention website\) https://www.cdc.gov/vaccines/programs/vfc/parents/index.html](https://www.cdc.gov/vaccines/programs/vfc/parents/index.html)

*Last Updated: 9/13/2023 Source: American Academy of Pediatrics (Copyright © 2022) The information contained on this Web site should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.*

# New Monoclonal Antibody, Nirsevimab, protects Infants and at-risk Toddlers against RSV

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The AAP is recommending all infants under 8 months receive the new monoclonal antibody nirsevimab to protect them from respiratory syncytial virus (RSV), while also providing guidance for continued use of palivizumab in the 2023-'24 season.

"Pediatricians are sadly familiar with the dangers of RSV and its devastating consequences for some families," AAP President Sandy L. Chung, M.D., FAAP, said in a press release. "We are eager to offer all infants this protection and urge federal officials to see that it is made available and affordable in all communities."

RSV causes about 58,000 to 80,000 hospitalizations and 100 to 300 deaths per year in children under 5 years, according to data from the Centers for Disease Control and Prevention (CDC).

Nirsevimab (Beyfortus) is a long-acting monoclonal antibody given as an intramuscular injection that is intended to protect children against lower respiratory tract disease caused by RSV. It was approved by the Food and Drug Administration in mid-July and the CDC in early August. It is expected to be available this fall, although some children may not have immediate access.

## ELIGIBLE CHILDREN

Nirsevimab is recommended for all infants under 8 months born during or entering their first RSV season.

It also should be given to children 8 months through 19 months who are at increased risk of severe RSV disease and entering their second RSV season. This high-risk group includes children with chronic lung disease of prematurity who require medical support during the six months before the start of the second RSV season, children who are severely immunocompromised, children with cystic fibrosis who have manifestations of severe lung disease or weight-for-length below the 10th percentile, American Indian children and Alaska Native children.

## TIMING

For most of the continental U.S., the typical RSV season is October through March. Infants born shortly before or during the RSV season should receive nirsevimab in their first week of life either in the hospital or an outpatient setting. Newborns with a prolonged hospital stay should get it shortly before or after discharge.

For other infants and eligible toddlers, nirsevimab should be administered shortly before the start of the RSV season. Age-eligible infants and toddlers who did not receive a dose at the start of the season can receive a dose at any time during the season. Only eligible

high-risk children should get a dose in both their first and second seasons, even if they are younger than 8 months entering their second season. However, a healthy infant born at the end of the season who did not receive nirsevimab and is less than 8 months entering their second RSV season may receive nirsevimab.

Providers can adjust administration timing based on local RSV activity if needed. In tropical climates and Alaska, providers should consult state, local or territorial guidance on the timing.

## CO-ADMINISTRATION WITH ROUTINE CHILDHOOD VACCINES

The AAP recommends nirsevimab be given at the same time as age-appropriate vaccines. Nirsevimab is not expected to interfere with the immune response.

## RSV symptoms in babies

Typically, RSV causes cold symptoms, which may be followed by bronchiolitis or pneumonia. **RSV symptoms are typically at their worst on days 3 through 5 of illness.** Symptoms generally last an average of 7-14 days.

COLD: Upper Respiratory Tract Infection	BRONCHIOLITIS: Lower Respiratory Tract Infection
<p>Cold symptoms may include:</p> <ul style="list-style-type: none"><li>• Fever (temperature of 100.4 or higher)</li><li>• Cough (dry or wet sounding)</li><li>• Congestion</li><li>• Runny nose</li><li>• Sneezing</li><li>• Fussiness</li><li>• Poor feeding</li></ul>	<p>May include <b>cold symptoms, plus:</b></p> <ul style="list-style-type: none"><li>• Fast breathing</li><li>• Flaring of the nostrils &amp; head bobbing with breathing</li><li>• Rhythmic grunting during breathing</li><li>• Belly breathing, tugging between the ribs and/or the lower neck</li><li>• Wheezing</li></ul>





## Breakfast-for-Lunch Bento for Kids

By Holley Grainger, M.S., RD

### Ingredients

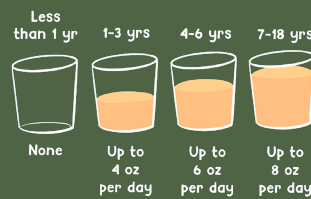
- 2 whole-wheat waffles, toasted
- 1 tablespoon sunflower seed butter
- ¼ cup thinly sliced apple
- ½ cup no-salt-added cottage cheese
- ¼ teaspoon ground cinnamon
- 1 large hard-boiled egg, halved
- ½ cup grape tomatoes, halved lengthwise
- ½ cup grapefruit segments

### Instructions

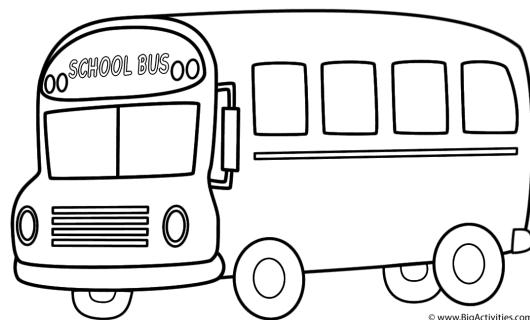
1. Spread 1 waffle with sunflower seed butter and layer on apple. Top with the remaining waffle and cut into quarters. Pack in a medium container.
2. Place cottage cheese in a medium container and sprinkle with cinnamon.
3. Pack egg and tomatoes in a medium container and grapefruit in a small container.

How much **juice** is ok for my child?

sll.stories



## Draw Yourself on the School Bus!



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busybeekidsprintables.com



### AUTUMN WORD SEARCH

APPLES  
AUTUMN  
FALL  
HARVEST  
LEAVES  
RAKING  
SCARECROW  
SEPTEMBER

W A W  
N J U N Z  
W U A D K Q K  
M V O M T Q O  
C P G A U T U M N  
S C A R E C R O W  
S P D C B R C I D I Z  
Y E K Y A A P P L E S  
J A P K V F A F Y L T  
G C I T H X Y Y E M Z  
X N F I E P S A H K B  
G F A L L M V P X P W  
I V S N V E B H I Z I  
J Y A S W K E W H  
U D R O K A U R Q  
G W Z M U D F  
H A R V E S T  
Y M A W C  
G U O



## What parents can do to prevent their kids from vaping or help them quit

Set a good example by being tobacco-free



Talk to your child or teen about why e-cigarettes are harmful



Seek help -

Set up an appointment with your child's health care provider so they can hear from a medical professional about the health risks



For more information visit [healthoregon.org/vaping](http://healthoregon.org/vaping)

Oregon Health Authority

## Why are e-cigarettes so dangerous for teens?



E-cigarette use among Oregon 11th-graders **increased 77%.**

**1 in 4**  
Oregon teens uses nicotine e-cigarettes like Juul



If you know a young person who's ready to quit:  
Text DITCHJUUL to 88709

Oregon Health Authority