



**Mesa Pediatrics
Professional Association**



**Care of
infants,
children &
adolescents**



MISSION / VISION STATEMENT

Mesa Pediatrics is committed to

the continuing pursuit of excellence

in pediatric medicine:

- wellness, preventative, episodic, and chronic care
- for children and adolescents from birth to age twenty-one
- neighborhood doctors with recognized expertise throughout the East Valley

A patient care model that recognizes the value of:

- the exchange of the most current medical knowledge among our caregivers
- uninterrupted patient care

INTRODUCTION

We have developed this book to help introduce you to our practice. In Part I, you will find a general description of Mesa Pediatrics and information to help you access our practice.

Part II is aimed at the common problems and frustrations parents are likely to encounter as they get to know, and learn to live with the squirming, unpredictable, confusing but wonderfully enchanting little person, "their newborn baby". By no means a complete resource, the booklet touches on the more common problems.

Part III introduces the subject of Postpartum Depression and its symptoms.

Thank you,

MESA PEDIATRICS PROFESSIONAL
ASSOCIATION (MPPA)



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PART I

Our Staff

PROVIDERS - CHANDLER OFFICE

Angela Wong, M.D., F.A.A.P. – Dr. Angela Wong attained her medical degree from Creighton University School of Medicine. She then completed her internship and residency at the Phoenix Children's Hospital/Maricopa Medical Center. In 1990 Dr. Wong started practicing general pediatrics and became certified by The American Board of Pediatrics.

Susan Chung, M.D., F.A.A.P. – Dr. Susan Chung graduated from the University of California, San Francisco School of Medicine and did her residency training at the University of California at San Francisco. She has been practicing pediatrics since 2000 and received board certification by The American Board of Pediatrics in 2001.

Lara Yoblonski, M.D., MPH, F.A.A.P. – Dr. Lara Yoblonski completed her medical education at Northwestern University Medical School. She then completed her internship and residency at the Phoenix Children's Hospital/Maricopa Medical Center where she became Chief Resident. Dr. Yoblonski launched her career in pediatrics in 1999 and also received her board certificate from The American Board of Pediatrics.

Molly Haley, M.D. – Dr. Molly Haley earned her medical degree from The University of Arizona College of Medicine and performed her residency at the Phoenix Children's Hospital/Maricopa Medical Center. Upon completion, she began practicing medicine in 2007 and became certified by The American Board of Pediatrics.

PROVIDERS - GILBERT OFFICE

Robin R. Laks, M.D., F.A.A.P. – Dr. Robin Laks holds a medical degree from The University of Iowa College of Medicine. After graduating, she performed her residency at the Phoenix Children's Hospital/Maricopa Medical Center and has been serving as a pediatrician since 1999. In the same year, she became certified by The American Board of Pediatrics.

Jennifer Wallace, M.D., F.A.A.P. – Dr. Jennifer Wallace attended medical school at The University of Arizona College of Medicine and completed her residency at the Phoenix Children's Hospital/Maricopa Medical Center. Dr. Wallace has been practicing since 2003 and is certified by The American Board of Pediatrics.



James J. Smith, M.D., F.A.A.P. – Dr. James J. Smith received his medical degree at the University of Oregon Health Science Center. His residency program was completed at the Phoenix Children's Hospital/Maricopa Medical Center. Dr. Smith has practiced general pediatrics since 1985 and became certified through The American Board of Pediatrics in 1988.

Angela Zankich, M.D. – Dr. Angela Zankich obtained her medical degree from the University of California, Davis School of Medicine. She then completed her residency at Phoenix Children's Hospital/Maricopa Medical Center. Upon completion, Dr. Zankich began her career with Mesa Pediatrics in 2007, and received her board certification from The American Board of Pediatrics.

Reyna Cuellar, M.D. – Dr. Reyna Cuellar will be joining MPPA in August 2008, after completing her residency in June 2008. She earned her medical degree from The University of Arizona College of Medicine.

Bill Gause, PA-C – Mr. Gause received a Bachelor of Science Degree, Human Biology, from Grand Canyon University and a Masters Degree in Physician Assistant Studies from Kirksville College of Osteopathic Medicine. He is certified by the National Commission of Physician Assistants and has been practicing medicine since 1999, a majority of that time exclusively in pediatrics.

Stefanie Rosenberg, PA-C – Ms. Rosenberg received a Master of Medical Science (M.M.S.) degree in Physician Assistant studies from Midwestern University and a Bachelor of Science (B.S.) degree in Sports Medicine. She has been practicing medicine since 2008.

PROVIDERS - SAN TAN OFFICE

Aleta DaSilva, M.D., F.A.A.P. – Dr. Aleta DaSilva holds a medical degree from the University of New Mexico School of Medicine. She completed her residency at Phoenix Children's Hospital/Maricopa Medical Center and began practicing pediatrics in 2005. She also became board certified with The American Board of Pediatrics that same year.

Andrea DeMets, M.D., F.A.A.P. – Dr. Andrea DeMets studied medicine at the University of Wisconsin-Madison Medical School. She then completed her internship at the Brown University/Rhode Island Hospital and residency at the University of Wisconsin-Madison Hospital and Clinics. Dr. DeMets began her career as a Pediatrician in 2005, and also received her board certification from The American Board of Pediatrics.

Chantelle Lassak, PA-C – Mrs. Lassak attained her Master of Medical Science (M.M.S.) degree in Physician Assistant Studies from Midwestern University and a Bachelor of Secondary Education (B.S.E.) degree in Biology, Chemistry, and Physics from the University of Arizona. She was certified with the National Commission of Physician Assistants in 2004 and has been practicing pediatrics since.

PROVIDERS - TEMPE OFFICE

Albert M. Schwartz, M.D., F.A.A.P. – Dr. Albert Schwartz obtained his medical degree from the Albert Einstein College of Medicine of Yeshiva University. Following graduation, he served as an intern at the University of California Medical Center (Berkeley), and performed his residency at the Bronx Municipal Hospital Center-Albert Einstein College of Medicine Medical Center where he also became Chief Resident. Dr. Schwartz became certified by The American Board of Pediatrics in 1972 and has been practicing general pediatrics since.

Joseph Piacentine, M.D., F.A.A.P. – Dr. Joseph Piacentine attended medical school at the University of Colorado School of Medicine and fulfilled his internship, along with becoming Chief Resident at the Phoenix Children's Hospital/Maricopa Medical Center. Upon completion, Dr. Piacentine began his career as a pediatrician in 1985 and received his board certification from The American Board of Pediatrics in 1989.

Delphis C. Richardson, M.D., F.A.A.P. – Dr. Delphis Richardson earned his medical degree from the Ohio State University College of Medicine. He completed his residency at The Children's Hospital, Columbus, Ohio where he became Chief Resident. In 1980 Dr. Richardson began practicing pediatrics and became certified by The American Board of Pediatrics. In addition, he received his board certification in sports medicine in 1997.

Kristin McClelland, M.D., F.A.A.P. – Dr. Kristin McClelland studied medicine at the East Carolina University School of Medicine and performed her residency at Phoenix Children's Hospital/Maricopa Medical Center. Upon completion, Dr. McClelland began practicing with Mesa Pediatrics in 2005 and became board certified by The American Board of Pediatrics.

Darcey Winterland, M.D. – Dr. Darcey Winterland graduated from The University of Arizona College of Medicine and completed her residency at the Phoenix Children's Hospital/Maricopa Medical Center. She then started her career as a pediatrician in 2007, and became board certified by The American Board of Pediatrics.

Leslie Sezate, R.N., B.S., C.P.N.P. – Mrs. Sezate obtained her B.S. Degree in nursing and is certified as a Pediatric Nurse Practitioner by the National Board



of Pediatric Nurse Practitioners and Associates. She has been practicing general pediatrics since 1973.

Jennifer Gibler, PA-C – Ms. Gibler received her Bachelor of Science Degree as a Physician Associate from the University of Oklahoma College of Medicine. She also received a Bachelor of Science Degree in Fitness and Wellness Management from Southern Nazarene University. Ms. Gibler began practicing general pediatrics in 1995 and in the same year became certified by the National Commission of Physician Assistants.

All of our providers are specialists in general pediatrics. We limit our practice to infants, children and adolescents. We do not take new patients into the practice after the age of eighteen years.

A physician will be available for consultation on any problems that our nurse practitioners, physician assistants, or the parents desire to discuss.

We are a group practice so that patients can see any of us at any location. We encourage our patients to become familiar with several of our providers. We rotate evening and weekend calls as well as attendance at the hospital.

SUPPORT STAFF

Medical Receptionists

The receptionists, also called front office staff, receive extensive training in order to meet the needs of our patients. Their primary duties are to answer the telephones, book appointments, and collect fees.

Nursing Staff

Our nursing staff, also called back office staff, is made up of RNs, LPNs and Medical Assistants. New staff are given a thorough orientation to our practice and its operations. The primary duties of the nursing staff are to get patients ready for the provider, to give injections, assist in treatments and talk to parents who call about common problems.

Billing Office Staff

The Billing Office is staffed with specialists in insurance billing and collections, and patient collections. Genelle Farrell is the manager of the Billing office.

Office Managers

Each of our medical offices is lead by an Office Manager; Kirsten Dustman in Chandler, Maria Rhoton in Gilbert, Twana Fairbourn in San Tan, and Danielle Madson in Tempe.

Referral Coordinators

There is a Referral Coordinator in each of the medical offices. The primary duty of the Referral Coordinator is to arrange for special diagnostic testing, appointments with specialty physicians, and/or appointments with therapists outside of MPPA.

Administration

Our Administrator is Karen Daugherty.

All employees of MPPA consider it a privilege to be asked by parents to participate in the care of their children. We work very hard to please you.

INFORMATION ONLINE

You may find information about Mesa Pediatrics on our website at **www.mesapeds.com**. Patient information is collected every year and verified at each appointment. This form as well as a number of others can be accessed and filled in prior to your appointment. In addition, there is a great deal of medical information available through our web site.

INSURANCE PLANS AND PAYMENT POLICY

Mesa Pediatrics works with a variety of insurance plans. A list of contracted insurance carriers is included as an insert to this booklet. It is also available online.

It is very important that you become familiar with the provisions of your insurance policy. The employer who provides the policy usually defines the provisions. Some plans cover nearly all office services. Others exclude well care, immunizations and other procedures. In some cases you are required to pay significant out of pocket expenses such as deductibles or coinsurance. Every employer's plan is different.

If we are contracted with your plan, we will bill the insurance company for the physician services we provide in the hospital or in the office. If we are not contracted, we can not bill for you, and payment is expected at the time of service.

Mesa Pediatrics collects all patient co-payments at the time of service. If a patient balance is generated after a claim is submitted to a contracted insurance plan, Mesa Pediatrics expects payment in full within 30 days after a bill is generated. Payment plans are available upon request. Patients who fail to pay their balance in full will be subjected to collection procedures.



If you have billing or insurance questions, please call our Billing Office at **480-820-7518**. Office hours are Monday through Friday from 8:00 am - 5:00 pm. If you call after hours, you may leave a message. We will return your call the next business day.

OFFICE HOURS

CHANDLER OFFICE

Regular office hours: Monday – Friday 7:45 am – 5:00 pm

We begin answering the telephone at 7:45 each morning and 1:45 each afternoon.

Nurse procedure appointments may be scheduled for suture removal, immunizations and weight check.

The Chandler Office is not open on Saturday or in the evening. Patients who desire these appointment times may be seen in the Tempe Office.

GILBERT OFFICE

Regular office hours: Monday – Friday 7:45 am – 5:00 pm

We begin answering the telephone at 7:45 each morning and at 1:45 each afternoon.

Nurse procedure appointments may be scheduled for cast removal, suture removal, immunizations and weight checks.

The Gilbert Office is not open on Saturday or in the evening. Patients who desire these appointment times may be seen in the Tempe Office.

SAN TAN OFFICE

Regular office hours: Monday – Friday 7:45 am – 5:00 pm

We begin answering the telephone at 7:45 each morning and at 1:45 each afternoon.

Nurse procedure appointments may be scheduled for cast removal, suture removal, immunizations and weight checks.

The San Tan Office is not open on Saturday or in the evening. Patients who desire these appointment times may be seen in the Tempe Office.

TEMPE OFFICE

Regular office hours: Monday – Thursday 7:45 am – 8:00 pm
Friday 7:45 am – 5:00 pm
Saturday 7:45 am – Noon

We begin answering the telephone at 7:45 each morning and at 1:45 each afternoon.

Nurse procedure appointments may be scheduled for cast removal, suture removal, immunizations and weight checks.

Saturday and evening appointments are for acute illnesses and injuries. Appointments for routine checkups, minor illnesses or chronic problems should wait for regular weekday office hours. There is no additional charge for visits during evening hours and on Saturdays.

APPOINTMENTS

Appointments are required for all office visits. We request that you call at least two weeks in advance to make an appointment for well child visits. However, we will be able to see all newborns within 3-5 days from hospital discharge. We will accommodate sick children as quickly as possible, generally within 24 hours. We do ask that you notify us 2 hours in advance if you are unable to keep an appointment so that we can use that appointment for another child.

The fewer other children you bring to the visit, the better. This allows us to concentrate on the child who has the appointment.

We try very hard to see our patients as close to the appointment time as possible. If you are late for your appointment, we may ask you to reschedule for another time.

If you have a life-threatening emergency please call 911 immediately. If you find yourself with a situation that requires immediate attention such as a possible broken bone or laceration, please call our office so that we can prepare for the problem or refer you to the proper facility.

TELEPHONE CALLS

Our busiest telephone times are between 7:45 am and 9 am and between 3:00 pm and 4:00pm. Our telephones are also very busy on Saturday mornings. We can provide you with the best service if you schedule routine visits or request prescription refills Tuesday - Friday during our less busy telephone times.

We have a voice mail system to help manage telephone calls and to provide assistance as soon as possible. You may be asked to leave a message for one of our nursing staff or medical providers. If your child is ill, your call will be returned within 1-2 hours. For all other general medical advice, we will return your call within 24 hours. If you reach our voice mail and need to speak to us about



an immediate medical problem, you may select an option to reach the nurse emergency line.

When you leave a message please leave your name and telephone number or numbers where you can be reached as well as your child's name, with spelling and date of birth.

AFTER HOURS

If you are calling after normal business hours, your call will be directed to our answering service. Your call will then be routed to our phone triage service.

Please limit your after-hour calls to those conditions which clearly cannot wait for office hours.

MEDICATION REFILL REQUESTS

When you need a refill for a medication, please contact your pharmacy first. If the pharmacy is unable to refill the prescription, please call our office and leave a message on our refill line.

Please allow two working days for a refill request to be processed. If the request is for a prescription to be mailed, please allow one week.

EMERGENCY ROOM AND EMERGENCY CALLS

In the event of a life-threatening emergency, please call 911. If you elect to go to the emergency room please go to the nearest facility. Tell them that MPPA is your medical provider. MPPA works most closely with Banner Desert Medical Center ER. This emergency room is staffed by pediatricians and is supported by a pediatric intensive care unit.

If your child eats or drinks something you feel is harmful, call **Poison Control at 602-253-3334**. They will instruct you with the necessary treatment and will be in touch with our office.

In the event of a less severe illness that occurs after office hours, an Urgent Care center may be appropriate. Always check with your insurance plan for the closest covered Urgent Care center.

HOSPITAL CARE

MPPA limits its hospital work to Banner Desert Medical Center. If your child is born or hospitalized at another hospital, we will provide continuing care after discharge.

PART II

Newborn and Infant Care

We thank you for the opportunity to participate in the care of your newborn baby. We will see you and your baby each day that you are in the hospital. An MPPA practitioner will examine your baby and under most circumstances will perform a circumcision if requested.

We would like to recheck your baby in the office 3 - 5 days after discharge and again at one month of age.

A newborn blood screen will be performed during the hospital stay and will need to be repeated 7-10 days after discharge. It is your responsibility to see that the infant is brought to the lab at that time for the blood test. **It is essential that you remember this very important blood test.**

BREAST FEEDING

Breast milk is an ideal source of nutrients for the growing infant and is the preferred first choice. Breast feeding is best accomplished sitting in a comfortable position with your baby held close. Breast feeding schedules should be individualized for your baby. We suggest initially feeding your baby on demand. A good rule of thumb, however, is to nurse 10 - 20 minutes on each breast if you are comfortable doing so. Babies generally want to breast feed every two to three hours for the first month or so, so follow the baby's lead.

Although most babies tolerate breast-feeding without problems, if your baby is excessively fussy, a trial of eliminating caffeine, dairy products, cauliflower, chocolate, broccoli and/or green leafy vegetables may help.

Supplemental feedings are not required for most babies in the newborn period. A supplemental feeding, however, will be recommended for babies showing signs of dehydration or jaundice (very few wet diapers, dry mouth, and difficulty waking up).

If you have any problems or concerns about breast feeding, we will be glad to help you or to recommend a lactation consultant.

BOTTLE FEEDING

For bottle-fed babies, we recommend starting with a cow's milk formula. Cleanliness is very important, but we do not believe that sterilization is



necessary. If disposable bottles are used, follow the instructions furnished by the manufacturer. Tap water is satisfactory and need not be boiled. Just before feeding time, the bottle may be warmed to body temperature (test it on the inner surface of arm). If the complete feeding is not taken in 30 minutes, discard it and do not feed the baby again until the next feeding time.

Hold your baby close in your arms for feedings - this will make it much more enjoyable for you and the baby and makes it less likely that the baby will spit up, vomit or choke. Never put baby into bed with a bottle.

It is in the best interest of your infant to stay on breast milk or formula for one year.



FEEDING SCHEDULES

Do not be too rigid about the feeding schedule. Try to feed your baby when hungry. Please see the section on Breast Feeding for specific information on breast feeding schedules.

Pacifiers sometimes satisfy the avid sucker between feedings and may prevent overfeeding. Be sure to burp your baby well before, at about the middle and after each feeding. Babies vary in their ease of being burped. Be gentle when you burp your baby. Spitting up is very common in the first six months and is usually not of concern unless it becomes forceful or the baby is having other problems, such as poor weight gain, recurring bronchial infections, or significant fussiness.

INFANT SLEEP POSITIONING AND SIDS

Parents and caregivers should place infants on their backs when putting them down to sleep. This is because there is an increased incidence of Sudden Infant Death Syndrome (SIDS) for infants who sleep on their stomachs. There is no evidence that sleeping on the back is harmful to normal infants.

Give the baby supervised tummy time during the day to help the baby's head shape remain normal.

CIRCUMCISIONS

After the circumcision, Vaseline should be applied to the penis tip with every diaper change for the first week and then once a day until healed. Do not

attempt to retract the remaining foreskin until after the first month. It is normal to have yellowed areas of healing tissue for 1-2 weeks.

If your baby is uncircumcised, no special care is needed. DO NOT try to manually retract the foreskin. The baby will have spontaneous erections which will result in separation of the glands (head of penis and foreskin) within the next few years.

JAUNDICE IN THE NEWBORN PERIOD

Jaundice is a yellow pigmentation in the skin that occurs frequently in newborns. Babies are born with more red blood cells than they need. After birth, a rapid adjustment occurs and the hemoglobin in the excessive red cells is released. The yellow pigment from hemoglobin is called Bilirubin and it is what causes jaundice.

This type of jaundice is called "physiologic jaundice". It appears anywhere from the 2nd to 4th day of life in many newborns. The yellow pigment will start in the baby's face and may move down the legs. If your baby becomes yellow below the belly button, please call the office.

If jaundice becomes severe, its intensity will be measured through laboratory tests and the appropriate treatment, if any, will be started. Treatment frequently is with a special light system, which can be set up in your home. The light changes the bilirubin in the small blood vessels close to the skin to a compound easily removed from the body by the kidneys. It is painless, and is not associated with any known serious complications.



CARING FOR YOUR BABY

For a good reference, we recommend **Caring for your Baby and Young Child; Birth to Age 5** by The American Academy of Pediatrics.

GENERAL NEWBORN CARE

Prohibit persons with a "cold" or infections of any sort from being near the baby. A person who has "only a cold" or "just a cough" may be infectious and could cause serious illness in your baby. Do not take the baby into crowded places such as stores or theaters. Always wash your hands carefully with soap and water before handling your baby or the baby's utensils. Others who handle the baby should be asked to do the same. The fewer visitors the first 6-8 weeks, the better.



Your baby may sleep approximately 20 hours per day and often will have nights and days mixed up. During the day, feel free to allow your baby to be exposed to normal household noises. At night, try to limit excess stimulation when your infant wakes.

The best room temperature is a temperature that you usually have in your room. Dress your baby accordingly, avoiding drafts or air conditioning or evaporative cooler currents.

Your baby will cry. Crying may be due to several causes and is frequently quite normal, indicating no serious problems. The amount of crying varies enormously from one baby to another and is more common and frequent in the first 12 weeks of life. Allowing a baby to cry for 5-10 minutes is perfectly acceptable.

Hiccups and sneezes are normal for newborns. Please do not give your child water to stop the hiccups, as excess water may be harmful. Hiccups do not bother babies as they do some adults.

ADDITIONAL SAFETY INFORMATION

The most accurate way to take an infant's temperature is rectally. Until 2 months of age, please notify the office if your infant's temperature is above 100.3° F rectally.

Please insure that all smoke detectors in your home are in working order and have new batteries.

Water heaters should be set below 120° F.

Crib slats should be no more than 2 ³/₈" apart — you should not be able to get a soda can between them.

CARE OF THE SKIN

Until the navel and circumcision are healed, limit bathing to sponge baths. When the navel and circumcision are well healed, warm water tub baths may be given.

Many babies enjoy a bath. It is not necessary to give a complete bath every day, but wash the diaper area and scalp with soap or baby shampoo daily. Use mild, non-perfumed soap.

The bath water should be approximately at body temperature (about 95°-98°) for very young babies. The bath should be of short duration. Never leave the baby unattended even for a second while in or near the bath.

Dry the skin quickly and well, do not rub. Pay particular attention to the folds and creases. We do not recommend using powder, as your baby may inhale it. Most of the lotions, fragrances and skin conditioners are neither necessary, or recommended.

Do not attempt to clean out the nose, ears, eyes or mouth unless some foreign material is visibly present. Most baby girls have a thick mucousy vaginal discharge. Wipe the excess out gently, only as needed. About one out of ten girls will have a little "bloody show" for a day or two after going home from the hospital. This is due to absorbed maternal hormones and should cause no concern.

Don't over dress the baby. Clothing should be light, non-irritating and loose fitting. Cotton is best; avoid the use of wool and silk. A good rule of thumb is what you are comfortable in plus or minus a layer.

CARE OF THE SCALP

Care of the scalp is as important as the care of the skin. There is a very common condition known as cradle cap that occurs in more than half of all babies. Cradle cap is caused by retention of dead skin and skin flakes. It may be healed easily with a dandruff shampoo. Wash your baby's hair as needed with baby shampoo or the soap you use for bathing. You can also use baby oil or mineral oil on the scalp and lift the scale off with a fine-toothed comb or toothbrush.

CORD AND NAVEL

The cord is usually still attached when you take the baby home. It should be left alone and kept dry. Oozing, (sometimes blood-tinged), is not uncommon. Some protrusion of the navel is frequently seen. "Belly bands" are not recommended.

STOOLS

Generally, parents become more concerned over the type of stools their infant has than about any other body function. Occasionally a child will have sufficient difficulties with bowel movements to cause problems, but this is uncommon. Newborns usually stool anywhere from once every feeding to every few days. Generally, bottle fed babies have fewer stools than breast fed babies. They will vary in appearance from loose, mushy, watery stools to firm toothpaste consistency stools and the color will vary from yellow to dark brown, occasionally green. As long as they are passed spontaneously with little sign of distress,



they are normal. It is normal for a child to grunt and strain with stools though prolonged crying does indicate difficulties. Do not use cathartics, laxatives, enemas or suppositories without consulting us first.

USEFUL ITEMS TO HAVE AT HOME

The following items are things that you will likely find useful during the next few years. It is much easier to purchase them now than try to find them on the weekends or in the middle of the night. They should be kept on hand and be available for use upon the provider or nurse's orders.

- **Acetaminophen Solutions** such as Tylenol, available in infant drops, elixir or tablets. Do not give to an infant under 2 months without calling your doctor.
- **Ibuprofen Liquid** may also be kept available. Do not give to an infant under 6 months.
- **Bulb syringe** for nasal suction. Be gentle, use cautiously and infrequently. Overuse may make problems worse.
- **Cool mist vaporizer** (large enough to operate all night without refilling). Use only if recommended by a doctor or nurse for a specific problem.
- **Digital thermometer** Ask the nurse how to take an axillary (arm pit) temperature. If you do not know how to read it, ask the nurse for instructions.

CAR SEATS

Car restraint seats are essential and are required by law in the state of Arizona for all children under the age of 5. Children are required to be rear facing until they are 20lbs. and one year old.

IMMUNIZATIONS

The recommended schedule of immunizations is included as an insert in this booklet and will be given at the first well visit. Please review your immunization benefits on your policy. We participate with the VFC program for those parents who do not have this insurance benefit.

Be sure to bring your child's shot record to all well visits.





PART III

The Baby Blues and Postpartum Depression

Giving birth is one of the most significant life-changing events a woman will ever experience. Approximately 55% of all new mothers will experience the baby blues and 10-20% of all new mothers will experience postpartum depression. Postpartum psychosis is an extremely rare disorder but one that requires immediate intervention.

The **Baby Blues** may begin as early as 3-5 days postpartum and can last from two days to two weeks. Symptoms can include:

- Mood Swings
- Irritability, restlessness
- Trouble concentrating, confusion
- Anxiety
- Sadness, crying for no apparent reason

Postpartum Depression can begin anytime following the birth of a baby (up to one year later) and is characterized by some or all of the following symptoms:

- Sadness, crying
- Difficulty concentrating, indecisiveness, memory impairment
- Sleep disturbances, especially the inability to sleep when the baby sleeps
- Lack of interest or the inability to experience pleasure
- Decreased appetite or hunger without the energy or desire to eat
- Feelings of inadequacy, guilt, worthlessness, helplessness, hopelessness
- Exhaustion, feelings of being overwhelmed, lack of motivation, sluggishness
- Desire to run away from all responsibilities
- Mood swings, irritability, anger, restlessness
- Intrusive or disturbing thoughts, thoughts of death (*including harming yourself or your baby*)
- Anxiety, panic, fearfulness (*especially the fear of being alone with the baby*)
- Feeling detached from the baby

Postpartum Psychosis is characterized by extreme moods (sadness or euphoria) and some symptoms are as follows:

- Severe insomnia
- Extreme anxiety or agitation
- Bizarre thoughts, feelings, behaviors
- Intrusive thoughts that won't stop
- Delusions
- Thoughts of hurting yourself or your baby
- Hallucinations

If you have questions or concerns about how you're feeling, please mention it to your healthcare provider during your visit.



**Mesa Pediatrics
Professional Association**



Chandler Office

60 S. Kyrene Rd., Ste. 1
Chandler, Arizona 85226
Between Chandler Blvd. & Frye Rd.
480-785-8700

Gilbert Office

2550 E. Guadalupe Rd., Ste. 115
Gilbert, Arizona 85234
NE Corner Greenfield & Guadalupe
480-632-1544

San Tan Office

3592 S. Atherton Blvd., Ste. 101
Gilbert, Arizona 85297
East of Higley, South of Pecos
480-214-2170

Tempe Office

6301 S. McClintock Dr., Ste. 101
Tempe, Arizona 85283
NE Corner McClintock & Guadalupe
480-831-6800

Billing Office

2222 S. Dobson Rd., Ste. 402
Mesa, Arizona 85202-6457
480-820-7518
Fax 480-820-7573

Visit us on line at:
www.mesapeds.com

