



## October 2024 INAAP News & Updates

### Letter from the INAAP President Evan Kreutzer, MD

One of my favorite parenting "hacks" is giving my children choices. It's such a simple and yet effective tactic. "Should we brush your top teeth or bottom teeth first?" "Would you like to clean up your Duplos or your Magnatiles?" Of course, I'm fine with whatever they choose, but that's because I'm dictating the options.

INAAP has options too. Do we spend our time running programs to directly help children and pediatricians or do we invest more in influencing our state legislature to support children? Your board of directors can best make these decisions when we know what our members want from our organization.

You will soon be receiving a link to complete our biannual member survey. It's one of the most important times to let your voice be heard. I hope you'll take 5-10 minutes to complete it. As a bonus, this year we'll be offering raffles for Amazon gift cards and discounts to future INAAP conferences for those who complete the survey. We genuinely care what you have to say and want to make sure our decisions reflect your priorities.



### Upcoming Events

**INAAP Webinar**

**Concussions: Scoliosis  
Updates**

October 15, 2024, 12:00 PM - 1:00  
PM

Zoom Webinar

[Register  
Now](#)

**INAAP Social Event: Learn  
to Play Pickleball!**

October 20, 2024 2:00 PM - 5:00  
PM

Go West Pickleball  
Indianapolis, IN

[Register  
Now](#)

## Welcome Our New INAAP Members!

Last month, the following individuals joined the INAAP community. Please join us in recognizing:

Allison Lyle, MD, MA | Sellersburg, IN

Erin Davis, MD | South Bend, IN

## INAAP Social Event: Learn to Play Pickleball!



**Details: Sunday, October 20th, 2024**  
**Go West Pickleball**  
**2:00 - 5:00 pm**

In an effort to provide members more opportunities to connect with other pediatricians in a variety of settings, INAAP is hosting a social event on Sunday, October 20th in Indianapolis.

Pickleball is the fastest growing sport in the world, and a great way to relax and stay active. The goal of this event is to allow INAAP members, their spouses, and children age 13+ to come and learn how to play pickleball in a fun and relaxing atmosphere. As part of this event, INAAP has partnered with a professional instructor to provide two hours of coaching on the fundamentals of the sport. This will be followed by an additional hour of play for anyone interested.

If you've been curious about pickleball but didn't know where to start, this is the perfect opportunity!

The event will take place at Go West Pickleball which is located on the west side of Indianapolis (9225 W 10th St, Indianapolis, IN 46234, USA). This event is free for INAAP members, their spouses, and children age 13 and above, but an RSVP is required by October 15th. Interested participants should bring their own water and paddle (if you have one). Additional paddles will be available to borrow for those who do not have their own.

Space is limited, so sign up today!

RSVP Now!

## 2024 INAAP Membership Survey

### What is the purpose of this survey?

Our goal at INAAP is to further the health and well-being of children in Indiana, and to serve you, our INAAP members, to the best of our ability.

To help in those efforts, it is critical that we collect information about what matters most to our members, and about what issues are in most need of the organization's time and effort.

Please take a moment and fill out the 2024 INAAP Member Survey using the button below. The Member Survey will help INAAP's Board of Directors set priorities for the next several years, identify members' interests, and plan events and services. It is critical that as many members as possible share their voices and perspective.



### Prizes for those who complete the survey!

In the hopes of collecting as many responses as possible, INAAP will raffle off prizes for those who submit a completed survey response. This year, INAAP will hold a drawing for three \$50 Amazon gift cards, as well as three free registrations for the 2025 INAAP CME Conference!

The survey is only open until November 15th, 2024 - so be sure to fill out your response today!

2024 Survey

## IDOH Alert: Increase in Mycoplasma Pneumoniae Reported Among Indiana Children



The Indiana Department of Health (IDOH) has received reports of increases in pediatric pneumonia cases, including those caused by *Mycoplasma pneumoniae*. This uptick has been also observed across various regions in the United States, particularly affecting young children.

*M. pneumoniae* usually peaks every 3 to 7 years, with variation of strain types contributing to this pattern.

*M. pneumoniae* infections began increasing in Indiana in late spring/early summer 2024, including emergency department visits across all pediatric ages.

### Guidelines

Healthcare providers should have increased suspicion of *M. pneumoniae* among patients presenting with compatible symptoms or clinical presentations, including pneumonia.

Children younger than 5 years of age may have a milder, subclinical illness that does not result in pneumonia.

Complications can include asthma exacerbation, severe pneumonia, hemolytic anemia, renal dysfunction, mycoplasma induced rash and mucositis, and others.

Diagnosis is often clinical. However, testing can be molecular (RVP), if available, or serology (IgM). Serologic testing for *M. pneumoniae* can have false positives but with the increase in cases, if pre-test probability is high, it is likely accurate.

## Treatment

The preferred treatment is with macrolides, including azithromycin. Other treatment options include tetracyclines and fluoroquinolones. *Mycoplasma pneumoniae* does not respond to beta-lactams and should also be considered in the differential for a patient failing this therapy.

Macrolide resistance is expected to be low (<10%) in Indiana, despite higher rates in other geographic areas. Reported cases have been responsive.

## Reporting

Cases of *M. pneumoniae* are not reportable however outbreaks or unusual clusters of *M. pneumoniae* should be reported to your local health department or to the IDOH Infectious Disease Epidemiology and Prevention Division at 317-233-7125.

## Prevention

Emphasize the importance of good respiratory hygiene and infection control practices to patients and their families to help prevent the spread of respiratory infections.

## For More Information

[CDC Clinical Care of \*Mycoplasma pneumoniae\* Infection](#)

[CDC \*Mycoplasma pneumoniae\* Infection Surveillance and Trends](#)

[CDC Respiratory Virus Guidance](#)

# Update: RSV Protection for Pregnant Women and Infants for 2024-25 Season



RSV is a virus that can cause respiratory illness in people of all ages, but can be more serious for infants, especially under 6 months of age, and older adults. Per the Centers for Disease Control and Prevention (CDC), each year RSV leads to over 2 million hospital visits and 58,000 to 80,000 hospitalizations among children 5 and younger, with another 100,000 to 160,000 hospitalizations among adults 60 years and older. A guide to vaccines that protect against respiratory illness is available [here](#).

In addition to hand hygiene and staying in when sick there are several ways at risk Hoosiers can protect against RSV this year.

## Prenatal Guidelines

CDC and gynecologists (ACOG) recommend a respiratory syncytial virus (RSV) vaccine for pregnant women to protect their babies from severe RSV disease.

Pregnant women should receive during September through January a single dose of vaccine during weeks 32 through 36 of pregnancy who do not have delivery planned within two weeks.

Women who received the RSV vaccine in a previous pregnancy are not recommended to have the RSV vaccine in subsequent pregnancies.

Only Pfizer's Abrysvo is authorized for use during pregnancy.

- Other RSV vaccines (GSK's Arexvy and Moderna's mResvia) are not approved for use during pregnancy.

These other CDC-recommended vaccines are commonly given during pregnancy.

- COVID-19 - any time during pregnancy

- Influenza - any time during pregnancy
- RSV - 32 - 36 weeks
- Tdap - 27 to 36 weeks

## Pediatric Guidelines

Maternal RSV vaccination or infant immunization with RSV monoclonal antibody is recommended to prevent severe RSV disease in infants, either. Most infants will not need both.

Nirsevimab (Beyfortus) monoclonal antibody, found to be 90% effective at protecting infants from RSV-associated hospitalization, should be given in October through March:

### Supply

No anticipated shortage for this season.

### Dose

#### **Age fewer than 8 months**

- 50 mg if <5kg, administered as single dose
- 100mg if ≥ 5kg, administered as single dose

#### **Age 8 through 19 months**

- 200mg administered as two 100mg injections

**One dose of nirsevimab is recommended for infants younger than 8 months of age who were born shortly before or are entering their first RSV season if:**

Infants <34 weeks should receive nirsevimab regardless of maternal vaccination status, or

- The mother did not receive the RSV maternal vaccine, or
- The mother's vaccination status is not known, or
- The window between maternal vaccination and birth was <14 days, or
- The healthcare provider determines the incremental benefit of Beyfortus is warranted because the infant is at increased risk, or when there are concerns about the adequacy of the maternal immune response or placental antibody transfer.

**One dose of nirsevimab for infants and children aged 8–19 months who are at increased risk for severe RSV disease and entering their second RSV season.**

- Increased risk includes children with conditions such as chronic lung disease of prematurity requiring medical support in the 6 months prior to RSV season, severe immunocompromise, cystic fibrosis with either manifestations of severe lung disease or weight for length < 10th percentile, or American Indian or Alaska native children.
- Note: A different monoclonal antibody, palivizumab, is limited to children aged 24 months and younger with certain conditions that place them at high risk for severe RSV disease. It must be given once a month during RSV season.

## Prevention

Emphasize the importance of good hand hygiene and staying in when sick. In addition to this it is important to get vaccinated for RSV at the appropriate time along with other recommended vaccines.

## For More Information

The Indiana Department of Health operates a publicly funded vaccine program to provide vaccines to individuals that are uninsured, underinsured or if under age 19, Medicaid eligible. If you are interested in participating in a this program, or have questions, please send an email to [immunize@health.in.gov](mailto:immunize@health.in.gov) or call Clair Perry-Stewart at 317-697-0162.

# Help Ensure Hoosier Children are Tested for Harmful Lead

By: Lead and Healthy Homes Division Director, Paul Krievins and Chief Medical Officer, Guy Crowder, MD, MPHTM



**Indiana**  
**Department**  
**of**  
**Health**

Protecting children from lead is important to their lifelong health. Lead is a naturally occurring metal that can be found in the air, soil, dust and paint inside or outside of some homes and other buildings built before 1978. Lead is toxic to everyone, but because their bodies are still

developing and growing rapidly, lead especially toxic to unborn babies and children younger than 6 years of age. No level of lead in the blood is safe, but lead toxicity can be prevented.

In recent years, Indiana has taken several steps to identify lead poisoning and improve outcomes, including lowering the accepted blood lead threshold for children, increasing lead testing requirements, and increasing the reporting of those test results to Indiana Department of Health (IDOH).

We still have a lot of work to do. In 2023, 35.4% of children younger than 3 years old and 19.1% of children younger than 7 years old were tested at least once. You can help minimize the health risks caused by lead through improved testing and reporting.

**Indiana statute changed effective on Jan. 1, 2023, (HEA 1313 and 410 IAC 29-3-1) and requires:**

- All children younger than 7 be tested for lead, and if not, to offer this testing to the parent or guardian of that child
- Children should be lead tested between 9 and 15 months of age (1-year checkup, for example), and again between 21 and 27 months (such as 2-year checkup), or as close as reasonably possible
- All blood lead tests, regardless of results, are required to be reported to IDOH no later than one week after completion. This requirement applies to both the provider and the laboratory, clinic, etc. responsible for the analysis of the specimen.
- or guardian of that child

**Reporting and other guidance:**

- Report blood lead test results into Children and Hoosier Immunization Registry Program (CHIRP), or through the electronic gateway portal Lead Data Flow (LDF) or HL7 messaging.
- Utilize EMR prompts as testing reminders whenever possible. Entering results exclusively into an EMR will not guarantee that they are being reported into CHIRP and to IDOH.
- Visit the IDOH Lead and Healthy Homes Website or call 317-233-1296 for reporting information and instructions, and other helpful information.
- Click the Healthcare Providers section of the IDOH Lead and Healthy Homes Division webpage for other resources.

Thank you for helping to ensure all Hoosier children are tested and treated for lead poisoning.

Please contact the Lead and Healthy Homes division if you have questions, and complete

this survey to provide feedback about lead testing and reporting.



## Improving Oral Health Outcomes For Your Patients



INAAP has received a grant from the AAP to focus on enhancing oral health education and outcomes within the primary care setting. The project will be led by a quality improvement consultant. INAAP will partner with McMillen Health, an non profit health education center, to create resources for participating practices. This project aims to compassionate care that is effective. Providers will receive training and many resources to better serve patients. The resources will cover many topics including brushing, oral health, nutrition, substance use, and HPV. This imitative

aims to integrate oral health into the clinic through various ways.

1. Enhance Comprehensive Medical Home: Equip pediatricians with oral health-focused education and resources.
2. Promote Patient Centered Oral Health Education: Engage patients and families in understanding the importance of oral health.
3. Increase Fluoride Varnish Applications: Promote fluoride varnish use to avoid tooth decay.
4. Caries Risk Assessment: Improve the identification and management of caries risk in children.
5. Increase HPV Vaccination: Encourage HPV vaccination when age appropriate to prevent health issues.

### Resources

- Recorded training
- 10 educational handouts
- Access to oral health consultant in office periodically
- Assistance with implementation and data collection
- Fluoride varnish kits

### Requirements

- 1 hour initial training completed live or by watching pre-recorded video
- Certification to provide fluoride varnish
- Provide oral health services to 15 Medicaid patients age 13-18 quarterly
- Utilize Oral Health Education Materials provided
- Record utilization of Oral Health Risk Assessment, Fluoride Varnish, Oral Health Education, HPV Vaccination Status, and establishment of or maintenance of dental home
- Meet 4 times with QI coach and dental advocate to submit and review data along with educational review: December 2024, February 2025, April 2025, June 2025

# CEASE 2024 Enrollment Open Now!

## QI Initiative to Address Youth + Family Tobacco Use

Tobacco use and exposure to tobacco smoke is a serious concern for all family members. Child healthcare clinicians are in a unique and important position to address tobacco use and exposure to tobacco smoke because of the regular contact they have with families and the harmful health consequences that tobacco smoke exposure has for their patients.



The Clinical Effort Against Secondhand Smoke Exposure (CEASE) addresses family tobacco use in a routine and effective manner. CEASE adds a comprehensive tobacco screening tool into your workflow, making it easy to address and treat family and youth tobacco use. The program has been funded by the Indiana Department of Health for the last 6 years, allowing us to provide all materials, technical assistance, and training free of cost to your clinic. *Participation also could qualify you for MOC Part 4 credit.*

**Let's work together to make a lasting impact on your patients!**

Contact Kelsey Back at [kb@inaap.org](mailto:kb@inaap.org) for more information or to get started with CEASE.

Learn more about CEASE

Visit our Website

## Tobacco Prevention & Cessation Conference

The CEASE team is so excited to be attending the Partner X change tobacco conference in Nashville, IN this month from October 22-24! We will be a featured speaker of a breakout session on the final day of the conference. The session will cover an introduction to CEASE, insights of the program from a CEASE provider (Dr. Iorio) and a discussion on the ACT (Ask, Counsel, Treat) Model provided by Dr. Bauer. The breakout session will end with an immersive activity for all attendees to think critically about the county they serve. We are so happy to have been chosen to be a highlighted speaker at this event.

## INAAP's Mental Health Program



### School Mental Health

Fall has arrived, and with it, fall break. Some families use this time to squeeze in a quick getaway, while others prefer the simple joy of doing absolutely nothing. Fall break also gives families Returning to school can be both exciting and stressful for students and their families. Preparation is key, and some parents may benefit from a friendly reminder. Talking to families about the importance of "Back-to-School" routines can help reduce student anxiety and the duration of this adjustment period. The American Psychological Association has some helpful tips that you can share with families.



# BACK-TO-SCHOOL TIPS: HOW TO HELP KIDS TRANSITION



**RESTART YOUR FAMILY'S SCHOOL YEAR ROUTINE:** Establish a more regular bedtime and wakeup schedule that allows kids to get out the door in time for school. Organize school supplies, including backpacks, binders, and lunchboxes.



**GET TO KNOW YOUR NEIGHBORS:** If new to the neighborhood, arrange play dates for your child or find safe hangout spots for older kids.



**BUILD IN SOME ONE-ON-ONE TIME:** Take a few moments to ask your child about their fears, worries, and concerns. Incorporate positive aspects of their previous school experience into the new one.



**EMPATHIZE WITH YOUR CHILDREN:** Show understanding and empathy—encourage kids to confront their fears and celebrate their courageous actions.



**GET INVOLVED AND ASK FOR HELP:** Engage with the community through parent-teacher organizations or local activities. Seek help from a licensed psychologist if stress becomes overwhelming.

© American Psychological Association

## Talking to Families about CARE

As a reminder to those unfamiliar with the program, CARE connects children and their families to the mental health services they need. The CARE Program and CARE Line help to identify and address barriers that negatively impact a family's ability to seek out and effectively engage in mental health services. The CARE Program is Indiana's only mental health referral resource dedicated to children and families.

We know it can be challenging to engage families in the conversation when it comes to a child's mental health. That challenge is compounded when you have concerns and parents/caregivers can't seem to get on the same page. We know it can be challenging because we are navigating these conversations, too! Our CARE Team prioritizes building rapport with families, establishing trust, and developing meaningful relationships. We approach every client referral carefully, as we are well aware of the underlying fragility that can make or break the mental health experience for these families.

Have you considered referring a patient to our CARE Program, but ultimately did not because you were unsure about the family's willingness to participate? Our skilled, emotionally intelligent, and culturally competent Family Navigators are trained and ready to help families overcome their reservations. Please complete a Primary Care Provider Referral Form or Client Intake Form on behalf of patients who could benefit from mental health services and support.

## Connect with CARE

There are multiple ways to refer patients to the CARE Program!

### Option 1: Client Intake Form

- Referring providers, parents, or legal guardians can complete the form below on behalf of a child or adolescent.
- The form asks for basic patient information such as name, address, medical insurance, etc.
- The form also allows parents to identify the specific mental health service(s) and

type(s) of treatment(s) they are seeking (but can also be left blank if they are unsure).

- Once submitted, a CARE Program Family Navigator will reach out to the family to schedule an intake session.

[Complete a Client Intake Form](#)

### Option 2: Primary Care Provider Referral Form

- PCPs can use this form to refer patients when various barriers, such as access to technology or inertia prevent the family from completing the client intake form themselves.
- This referral form is designed to be brief and should take less than five minutes to complete.
- None of the fields on the form are required. Provide the information you can, and the CARE Program will do the rest!

[Submit a Primary Care Provider Referral Form](#)

### Option 3: The CARE Line

- Anyone can connect to the program by calling the toll-free phone number:

[855-495-7271](tel:855-495-7271)

[Visit our Website](#)

## INAAP Career Center

INAAP is proud to announce the launch of its new Pediatric Career Center. Whether you are looking for a new opportunity or looking to hire top pediatric clinicians, this is the spot for you:

- Search and apply to top pediatric jobs at institutions that value your credentials.
- Upload your resume so employers can contact you. You remain anonymous until you choose to release your contact information.
- Create Job Alerts and receive an email each time a job matching your specified criteria becomes available.
- Access career resources, job searching tips, and tools.
- Post your job, or your institution's job, where the industry's most qualified pediatric professionals go to advance their careers.
- Email your job directly to INAAP job seekers via our exclusive Job Flash™ email.
- Search our Resume Bank using robust filters to narrow your candidate search.



Explore the benefits of our new career center by logging in or creating a new account today!

[Visit our New Career Center](#)

# INAAP's Payor Council is Here to Help!

Do you have a payment, prior authorization, or formulary issue that you just can't get resolved? Help is here! Submit your problem to INAAP and our payor council will work with our partners at the Indiana State Department of Health and the Family and Social Services Administration to see if we can find a solution.

Email concerns to Chris Weintraut at [cw@inaap.org](mailto:cw@inaap.org).



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## PEDIATRICS On Call



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from the AAP



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