

American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

Wisconsin Chapter



Winter 2018

CALENDAR OF EVENTS

Visit the Events section of our website for details.

February 15, 2018
Pediatric Advocacy Day
A Visit to the Capitol
Madison, WI

October 5, 2018
Pediatric Mental Health for Primary Care
Waukesha, WI

October 18, 2018
Statewide Open Forum: Quality Improvement in Pediatrics
Oconomowoc, WI

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Wisconsin Chapter of the American Academy of Pediatrics

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Register Today! Pediatric Advocacy Day

Thursday, February 15, 2018



Your Wisconsin Chapter will host its Pediatric Advocacy Day on Thursday, February 15, 2018 at the beautiful Wisconsin State Capitol Building in Madison.

Invited speakers include Rep. Joan Ballweg, Mark Grapentine of the Wisconsin Medical Society, Dr. Mala Mathur and Dr. Dipesh Navsaria.

We look forward to welcoming Wisconsin pediatricians to this informative event.

Tentative Agenda:

- Welcome and purpose of the day
- Introduction to the Children's Caucus
- Legislative landscape in Wisconsin
- Advocacy 101 training
- Wisconsin Chapter AAP Update
- Legislative visits
- "Open Mic" review of the day

Chapter member	\$20
Non-chapter member	\$45
Resident/Student	Free

Register now: 2018PedsAdvocacy.eventbrite.com

Event hashtag: #WIPeds

The WIAAP Vision

Wisconsin children have optimal health and well-being and are valued by society. We practice the highest quality health care and experience professional satisfaction and personal well-being.

The Wisconsin Chapter of the American Academy of Pediatrics (WIAAP) strives to:

- Assure optimal health and well-being for all of Wisconsin's children and their families
- Provide support and education to our members, enabling them to continue to be the most effective providers of health care to children.

President's Message

Mala Mathur, MD, MPH, FAAP

This has been a busy year for pediatricians nationally and statewide as we continue to address issues to keep children insured and healthy. In 2017, WIAAP worked alongside national AAP in our efforts to advocate for continuation of Medicaid funding and reauthorization of CHIP funding (WI BadgerCare) to ensure Wisconsin children have access to health insurance so they can get the preventative care services they need to stay healthy. Thanks to all the Wisconsin pediatricians who advocated this year for these issues and continue to stay connected with WIAAP to advocate for the well-being of children in our state! Please join us at WIAAP's first Pediatric Advocacy Day at the State Capitol in Madison, WI on Thursday February 15, 2018 as we learn new advocacy skills, network with other pediatricians and child health advocates around the state, and meet our legislators. Register online at our website www.wiaap.org.

In addition to advocacy, WIAAP is committed to member education and was involved with planning two

successful HPV Vaccine Summits this October 2017 in Green Bay and Eau Claire, WI. We had a good turnout and those who were able to attend learned a great day about the public health implications of HPV disease and our critical role as pediatricians in discussing this important immunization with families. In addition, we had a well-attended WIAAP Adolescent Open Forum meeting in October in Oconomowoc, WI where we had local experts discuss issues surrounding adolescent gender identity, confidentiality, and social media and its impact on adolescents. The PATCH (Providers and Teen Communicating for Health) teens conducted a workshop demonstrating how health care providers can best communicate with adolescents. Check out our calendar on our website for upcoming WIAAP educational events and Open Forum meetings.

WIAAP members had opportunities to network through Chapter related social gatherings at the AAP National Conference and Exhibition in



September at a joint IL/WI Chapter reception Chicago and in Onalaska, WI with our Gundersen and Mayo Clinic colleagues this October. It has been wonderful to meet so many engaged colleagues doing great work around the state. I look forward to closer connections in 2018 as we strive to ensure all pediatricians feel supported in their work through WIAAP.

Wishing everyone a peaceful and Happy New Year!

Mala Mathur, MD, MPH, FAAP has been active in the WIAAP serving two terms as a board member. She currently practices general pediatrics at UW Health and has interests in advocacy and public health, early childhood, quality improvement, and community engagement in improving the lives of children and youth in our state.

Welcome to the Wisconsin Chapter!

Luke Adesso (Delafield)
 Puneet Arora, MD, FAAP (Brooklyn, NY)
 Keturah Baker, MD (Marshfield)
 Vivek Balasubramaniam, MD, FAAP (Madison)
 Daniel Beardmore, DO (Stoughton)
 Kelleen Boehlke (Madison)
 Katherine Carr (Wauwatosa)
 Alejandro Castro, MD (Onalaska)
 Sarah Cole, MBBS, FAAP (Milwaukee)
 Nita Davis, MBBS, FAAP (Milwaukee)
 Adriana de Moya, MD (Milwaukee)
 Lesley Delgado, MD, FAAP (Mount Pleasant)
 Anna Ellason, DNP, CPNP (Ashland)

Nicole Francis, MD (Marshfield)
 Mikayla Gallenberger (Kewaunee)
 Daphne Gonzales, MD (Marshfield)
 Constance Gundacker, MD, MPH, FAAP (Milwaukee)
 Jessica Hayes (Milwaukee)
 Will Hollabaugh (Milwaukee)
 Laura Holt, MD, FAAP (Madison)
 Xiangxin Hu, MD, FAAP (Wauwatosa)
 Saima Hussain, MD (Marshfield)
 Sanjeev Jain, MD, FAAP (Middleton)
 Caitlin Kaepler, MD, FAAP (Milwaukee)
 Prasanna Kapavarapu, MD (Milwaukee)
 Ammar Khayat, MBBS, FAAP (Milwaukee)

Amornluck Krasaelap, MD (Milwaukee)
 Michael Kuklinski, MD, FAAP (La Crosse)
 Santoshi Lattupally, MBBS (Marshfield)
 Hau Le, MD, FAAP (Madison)
 Sarah McAndrew, MD, FAAP (Brookfield)
 Nital Patel, MD, FAAP (Milwaukee)
 Adam Spanjer, MD (Marshfield)
 Alicia Sprecher, MD (Wauwatosa)
 Christina Stan (Grafton)
 Jenna Tanem, FNP-BC (Milwaukee)
 Brittany Van Remortel (Madison)
 Raji Venkitachalam, MD (Milwaukee)
 Shravani Vundavalli MD, FAAP (Madison)

AAP Award Recipients

The following WIAAP members were honored at this year's AAP National Conference and Exhibition in Chicago, IL:



◀ **David Bernhardt, MD, FAAP,** UW Health, (center) received the Thomas Shaffer Award from the Council on Sports Medicine and Fitness, recognizing lifelong contributions to the field of sports medicine.

Todd Mahr, MD, FAAP, FAAAAI, FACAIAI, Gundersen Health, (right) was presented the Jerome Glaser Distinguished Service Award. This award recognizes an outstanding pediatric allergist-immunologist for contributions primarily of service to the section in education and as a clinician and teacher.



◀ **Marlene Melzer-Lange, MD, FAAP,** Medical College of Wisconsin, (right) received the Council of Injury, Violence and Poison Prevention Fellow Achievement Award.



WIAAP Leadership

President

Mala Mathur, MD, MPH, FAAP
UW Health, Madison

Vice President

Dipesh Navsaria, MD, MSLIS, MPH, FAAP
UW Health, Madison

Secretary/Treasurer

Sarah Campbell, MD, FAAP
Ascension, Appleton

Immediate Past President

Jeffrey Britton, MD, FAAP
Aurora Children's Health, Sheboygan

Executive Director

Kia LaBracke
Oconomowoc

Board of Directors

Paula Cody, MD, FAAP
UW Health, Madison

Margaret Hennessy, MD, FAAP
Ascension, Racine

Jennifer Kleven, MD, MPH, FAAP
Gundersen Health System, La Crosse

Barbara Kolp-Jurss, MD, MBA, FAAP
Aurora Children's Health, Milwaukee

Betsy Peterson, MD, FAAP
Community Pediatrics, Beaver Dam

Lynn K. Sheets, MD, FAAP
Children's Hospital of Wisconsin, Milwaukee

AAP's Headquarters of the Future

In December 2017, the AAP moved into its new headquarters in Itasca, IL, containing 183,000 square feet of workplaces, meeting rooms and other spaces designed to foster connectivity and innovation among members, staff and partners across AAP's programs and initiatives.

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OpEd: Common-Sense Laws, Education Needed to Address Youth Gun Safety

Like many pediatricians, all of us have had experience with gun-related injuries. For one of us, as a medical student, she had a patient blinded due to a suicide-by-firearm attempt. As a pediatric resident, she cared for a 10-year-old boy, accidentally shot while helping his brother clean his hunting rifle. Both were heart-breaking — and preventable.

Over the course of the 30 regular checkups done from birth to 21 years, we discuss numerous preventive health topics — among them immunizations, safe sleep, injury prevention, substance abuse and online safety. Many are major public health successes, dramatically reducing death and disability and allowing children to grow up to be happy, productive adults. However, one topic our society struggles to succeed at is firearm safety.

In Wisconsin, we have a strong hunting culture and history. Why should we be concerned about gun safety? A look at the data may be instructive.

Compared to other developed nations, the U.S. has a 35.7 times higher rate of death from guns. For ages 5-14, firearm suicide is eight times higher and accidental death 10 times higher. For those younger than age 20, nearly 1 in 5 injury deaths were firearm-related, with 1 in 4 in the 15-19 year group. These deaths resulted from homicide, suicide and unintentional injury.

In 2009, 114 people younger than age 20 died as a result of firearms accidents — only 66 of these occurred in adolescents. Fatal shootings are usually inflicted by other children or youth, typically friends or siblings. In Wisconsin, from 1999-2014, 408 children were killed by guns, 27 from accidents — averaging two deaths per year in our state. Firearms are the third-leading cause of injury-related deaths for Wisconsin children, killing more than drownings, fires, and falls — combined.

Additionally, suicide is the third-leading cause of death for American youth age 15-19. Firearms remained the most common method used by this age group, and the most lethal, with about 90% dying. Adolescents are at a higher risk of attempting suicide as a consequence of their often-impulsive (but developmentally-normal) behavior.

Strong evidence suggests that the presence of firearms in the home increases the risk of successful suicide among adolescents.

Firearm-related injuries are often fatal, making prevention essential — it's difficult to treat the injuries that result once they happen. Second, attempted suicide is more likely to be successful if guns are present in the home. Although nationally most firearm injuries and deaths of children involve handguns, long guns are frequently involved, especially in rural areas. Access to guns also increases conflict-related deaths and injuries. Finally, unsafe storage and access to unsecured guns creates risk of serious unintentional injury and death.

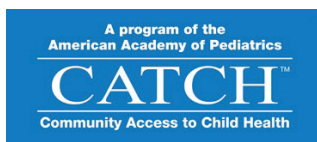
For decades the American Academy of Pediatrics has advocated for gun safety through the enactment of appropriate, common-sense laws, including stronger background checks, assault weapon bans, addressing firearm trafficking and encouraging safe storage. Additionally, we need violence-prevention programs and to address the needs of children exposed to violence and other adverse circumstances. It is critical that we educate families about the safety risks of firearms and safe gun storage. As pediatricians, we will continue to screen adolescents for depression and focus on access to mental health services.

In the state of Wisconsin, pediatricians are advocating at the local and state level to ensure the children of Wisconsin remain as safe as possible whether at home, school, in their community or involved in the sport of hunting. We hope as parents, caregivers and engaged members of our society, that you will join and support our efforts to keep all children safe in Wisconsin from firearm-related injuries and death.

None of us wants the next generation of pediatricians to have tragic stories like these to share.

First published in the USA Today Network, November 17, 2017. *Dr. Mala Mathur, Dr. Dipesh Navsaria and Dr. Sarah Campbell, MD, FAAP are officers of the Wisconsin Chapter of the American Academy of Pediatrics.*

Building Local-Global Resident Experiences through Community Partnerships



Funded through an AAP Community Access to Child Health (CATCH) grant, the Medical College of Wisconsin's Residency Global Health Track program welcomed ROME Visiting Professor Dr. Sarah Webber and Dr. Karen Collier of Centro Hispano in Madison. The two lead a collaboration on community-based efforts to improve health inequities in their community. By sharing their experiences faculty,

residents and community partners, MCW seeks to create a Milwaukee-centric local-global elective experience for its residents.

"Creating a local-global elective will help us achieve a long-term goal – to provide global-health trained residents with skills and knowledge transferrable to all underserved communities, whether internationally or locally," said Dr. Bethany Weinert, Director of the MCW Pediatric Residency Global Health Track.



From left to right:

Caitlin Kaeppler, MD (Associate Director, MCW Pediatric Residency Global Health Track), **Karen Collier, PhD, MPH** (Executive Director, Centro Hispano), **Sarah Webber, MD** (Pediatric Hospitalist, UW School of Medicine & Public Health), **Bethany Weinert, MD, MPH** (Director, MCW Pediatric Residency Global Health Track) and **Heather Paradis, MD, MPH** (Medical Director, CHW Community Services)

Funding from the Leonard P. Rome CATCH Visiting Professorship promotes advocacy for children and advances the field of community pediatrics. The program was established in honor of Leonard P. Rome, MD, a pediatrician and tireless advocate who dedicated his life to improving children's health.

WIAAP Adds Pediatric Residency Program Liaisons to Board of Directors



Sarah Dickes, MD, MPH
Medical College of
Wisconsin



Brittany Samson, MD
Marshfield Clinic



Sadie Skarloken, MD
UW Health

WIAAP has expanded its board of directors to include three representatives from each pediatric residency program in the state. Liaisons will lend early career physician perspectives and orient fellow residents on chapter activities and ways to get involved. We look forward to their contributions!

Chapter Opportunities

Please consider the following ways to become involved with our chapter. Details are on the web site and updated in our monthly e-Newsletter. Further questions? Contact Kia LaBracke, KLaBracke@wiaap.org, or 262.751.7003.

Legislative Committee Seeking Members

On February 15, 2018, at our Pediatric Advocacy Day, we will roll out the new Legislative Committee for WIAAP. The sheer number of policy proposals at the state and federal level have piqued the interest of many who want to get more involved. We look forward to strength in numbers!

Open Seat on WIAAP Board of Directors

Serving on the WIAAP board of directors is an opportunity to expand your reach and influence child health policy and practice in Wisconsin. We have one (1) position open for election this spring, with the term beginning in July 2018.

Annual WIAAP Awards

Nominations are due February 1, 2018 for this year's chapter awards.

They are: **Pediatrician of the Year**, **Community Service Award** and **Legislator of the Year**.

Advertisements

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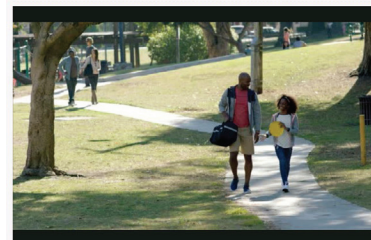
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- Introduction (2:13)
- Focus Clearly on Cancer Prevention (2:12)
- Recommend HPV Vaccination Consistently (2:57)
- Don't Wait (2:44)
- Vaccinate Boys as Well as

Drs. Alix Casler and Chris Lupold share how to give a clear recommendation for HPV vaccination.

View the videos at: <http://bit.ly/2CjRXKo>



Addressing Maternal Mental Health

New Resource Available to Support Providers

Mental health disorders are the most common complication of pregnancy and most often, the least likely to be addressed. Yet most providers do not receive adequate training to effectively recognize, diagnose and treat perinatal mental health disorders. That is why **The Periscope Project** was created. **The Periscope Project** supports providers and builds their capacity to care for maternal mental health without sacrificing clinical time.

The Periscope Project is a free resource for health care providers treating pregnant and postpartum women struggling with mental health and/or substance use disorders. The project offers three services: provider to provider perinatal psychiatric teleconsultations, provider education and tools, and information on additional services that support the mental health and wellbeing of perinatal women and families.

Perinatal psychiatric disorders will affect approximately 15% of the 66,000 births in Wisconsin each year. Untreated maternal mental health disorders can negatively affect a child's cognitive and social development. Pediatric providers are in a unique position to screen for maternal depression and refer moms for care that can positively impact the mother-child dyad. In October 2010, *Bright Futures* and the AAP Mental Health Task Force recommended screening for maternal mental health be integrated into the well-child care schedule. HealthCheck providers can now bill for a caregiver-focused health risk assessment instrument, such as a standardized depression screening tool as part of the child's HealthCheck visit and in addition to the HealthCheck exam codes. For further information check with your Forward Health Fee schedule.

It's important to note that screening a new mother with a validated screening tool, (e.g. Patient Health Questionnaire-9 or Edinburgh Postnatal Depression Scale) is a good starting point, however screening alone is not enough. Providers should follow up after the screening no matter the results. Ask mom one or two opened ended questions to learn why she chose the answers she did. If she expresses feelings of depression or anxiety let her know she is not alone, it's not her fault, and with treatment she will get better.

Any provider that is meeting with postpartum women and is picking up on concerns about their mental health can utilize The Periscope Project to have provider to provider conversations that help the providers help the patients they are serving.

*October 2010 AAP recommendation: "The primary care pediatrician, by virtue of having a longitudinal relationship with families, has a unique opportunity to identify maternal depression and help prevent untoward developmental and mental health outcomes for the infant and family. Screening can be integrated, as recommended by Bright Futures and the AAP Mental Health Task Force, into the well-child care schedule and included in the prenatal visit."



Real time provider to provider teleconsultations with a subspecialty

perinatal psychiatrists. Providers call The Periscope Project Monday through Friday from 8am to 4pm CST and within 30 minutes they can consult with a perinatal psychiatrist. Consultations can support pediatric providers with screening tools, how to follow up with mothers, and up to date information on psychotropic medication use while lactating.



Information on additional resources and programs that support maternal

mental health and wellbeing. Pediatric providers can call or email for information on psychiatrists, psychologists, therapists, support groups, and family support programs that specialize in the perinatal period. Currently, resource information is focused on the greater Milwaukee area, with statewide resource information expected in the future.



Provider education through online toolkits and videos, as well as, in person didactic and Grand Round presentations upon request.

Contact Us via the Provider Line

877-296-9049

theperiscopeproject@mcw.edu

For more information, visit us online
www.the-periscope-project.org

American Academy of Pediatrics

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Wisconsin Chapter

PO Box 243

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Best Practices
in Pediatrics



Pediatric
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MARCH
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