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# Kudos for Kids

## What is a "D.O."?

Like M.D. physicians, osteopathic physicians complete 4 years of medical school and can choose to practice in any specialty of medicine. However, osteopathic physicians receive an additional 300 - 500 hours in the study of hands-on manual medicine and the body's musculoskeletal system.

Osteopathic medicine is dedicated to treating and healing the patient as a whole, rather than focusing on one system or body part. An osteopathic physician will often use a hands-on approach to make sure that the body is moving freely. This free motion en-

ures that all of your body's natural healing systems are able to work unhindered.

Osteopathic physicians hold to the principle that a patient's history of illness and physical trauma are written into the body's structure. The osteopathic physician's highly developed sense of touch allows the physician to feel (palpate) the patient's "living anatomy" (the flow of fluids, motion and texture of tissues, and structural makeup).

Like M.D.s, osteopathic physicians are licensed at the state level. Osteopathic physicians who wish to specialize may

become "board certified" (in much the same manner as M.D.s) by completing a 2- to 6-year residency within the specialty area and passing the board certification exams.

D.O.s practice in all specialties of medicine, ranging from emergency medicine and cardiovascular surgery to psychiatry and geriatrics. A majority of osteopathic doctors use many of the medical and surgical treatments that are used by other medical doctors.

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## CapitalCare Pediatrics -Clifton Park

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### Special points of interest:

**Learn CPR.** CPR can help you save a child's life. Learn CPR and get recertified every two years.

When purchasing a helmet for your child, look for a label or sticker that says the helmet meets the CPSC safety standard.

## What is a Physician Assistant?

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Physician Assistants are health care professionals licensed to practice medicine with physician supervision. Because of the close working relationship the PAs have with physicians, PAs are educated in the medical model designed to complement physician training. As part of their comprehensive responsibilities, PAs conduct physical ex-

ams, diagnose and treat illnesses, order and interpret tests, counsel on preventive health care, assist in surgery, and in virtually all states can write prescriptions. Within the physician-PA relationship, physician assistants exercise autonomy in medical decision making and provide a broad range of diagnostic and therapeutic services. PAs are trained in intensive education programs accredited by the Accreditation Review

Commission on Education for the Physician Assistant (ARC-PA). Physician assistants take a national certification examination developed by the National Commission on Certification of PAs in conjunction with the National Board of Medical Examiners. Graduation from an accredited physician assistant program and passage of the national certifying exam are required for state licensure.

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# Playground Safety

The playground should have safety-tested mats or loose-fill materials (shredded rubber, sand, wood chips, or bark) maintained to a depth of at least 9 inches. The protective surface should be installed at least 6 feet (more for swings and slides) in all directions from the equipment.

\* Equipment should be carefully maintained. Open "s" hooks or protruding bolt ends can be hazardous.

\* Swing seats should be made of soft materials such as rubber, plastic or canvas.

\* Make sure children cannot reach any moving parts that might pinch or

trap any body part.

\* Never attach—or allow children to attach—ropes, jump ropes, leashes, or similar items to play equipment; children can strangle on these.

\* Make sure metal slides are cool to prevent children's legs from getting burned.

\* Do not allow children to play barefoot on the playground.

\* Parents should never purchase a home trampoline or allow children to

use home trampolines.

\* Parents should supervise children on play equipment to make sure they are safe.



**Always inspect the equipment you allow your child to use!**

Source: <http://www.healthychildren.org/English/safety-prevention/at-play/pages/Safety-Tips-For-Home-Playground-Equipment.aspx>

# Lawn Mower Safety



Try to use a mower with a control that stops the mower from moving forward if the handle is let go.

Children younger than 16 years should not be allowed to use ride-on mowers. Children younger than 12 years should not use walk-behind mowers.

Make sure that sturdy shoes (not sandals or sneakers) are worn while mowing.

Prevent injuries from flying objects, such as stones or toys, by picking up objects from the lawn before mowing begins. Have anyone who uses a mower wear hearing and eye protection.

Do not pull the mower backward or mow in reverse unless absolutely nec-

essary, and carefully look for children behind you when you mow in reverse.

Always turn off the mower and wait for the blades to stop completely before removing the grass catcher, unclogging the discharge chute, or crossing gravel paths, roads, or other areas.

Do not allow children to ride as passengers on ride-on



# Skateboard, Scooter, In-line Skating and Heelys Safety

\* Children should never ride skateboards or scooters in or near traffic.

\* All skateboarders and scooter-riders should wear a helmet and other protective gear; wrist guards are particularly important.

\* Communities should continue to develop



**ALWAYS WEAR a HELMET!**

skateboard parks, which are more likely to be monitored for safety than ramps and jumps constructed by children at home.

\* While in-line skating or wearing Heelys, be sure to wear appropriate protective equipment

and only skate on designated paths or rinks and not on the street.



# Bicycle Safety

\* Do not push your child to ride a 2-wheeled bike until he or she is ready, at about age 5 or 6. Consider the child's coordination and desire to learn to ride. Stick with coaster (foot) brakes until your child is older and more experienced for hand brakes.

\* Take your child with you when you shop for the bike, so that he or she can try it out. The value of a properly fitting bike far outweighs the value of surprising your child with a new one. For more information on finding the proper fit, go to [http://www.healthychildren.org/English/safety-prevention/at-play/pages/Bicycle-Helmets-What-Every-Parent-Should-](http://www.healthychildren.org/English/safety-prevention/at-play/pages/Bicycle-Helmets-What-Every-Parent-Should-Know.aspx)

[Know.aspx](http://www.healthychildren.org/English/safety-prevention/at-play/pages/Bicycle-Helmets-What-Every-Parent-Should-Know.aspx)

\* Buy a bike that is the right size, not one your child has to "grow into." Oversized bikes are especially dangerous.

\* Your child needs to wear a helmet on every bike ride, no matter how short or how close to home. Many accidents happen in driveways, on sidewalks, and on bike paths, not just on streets. Children learn best by observing you. Set the example: Whenever you ride, put on your helmet.

\* When purchasing a helmet, look for a label or sticker that says the helmet meets the CPSC safety standard.

\* A helmet protects your child from serious injury, and should always be worn. And remember, wearing a helmet at all times helps children develop the helmet habit.

\* A helmet should be worn so that it is level on the head, not tipped forwards or backwards. The strap should be securely fastened, and you should not be able to move the helmet in any direction. If needed, the helmet's sizing pads can help improve the fit.



# Help Your Kids Swim Safely This Summer

## Drowning Prevention Tips

Keeping our children safe is a priority both inside and outside. Whether children are swimming at a home pool or in natural bodies of water, with friends or with family, water safety is always key. Two children 14 years and under die every day from drowning and it is the third leading cause of all deaths for children ages 1 to 4.

**Learn to swim.** Swimming lessons, even among toddlers and young children, can help protect them from drowning.

**Learn CPR.** CPR can help you save a child's life. Learn CPR and get recertified every two years.

**Use the buddy system.** Always swim with a buddy. Look for swimming sites that have lifeguards on duty whenever possible.

**Do not use air-filled or foam toys as safety devices.** Do not use toys such as "water wings", "noodles," or

inner-tubes, instead of life jackets. While they may be fun, they are not designed as safety equipment.



**Supervise your children.** Supervise young children at all times around bathtubs, swimming pools, and natural bodies of water.

When supervising kids near water, avoid distracting activities such as playing cards, reading books, or talking on the phone and always stay close enough to reach out and touch young children at all times.

**Don't drink alcohol.** Avoid alcohol before or during swimming, boating, or water skiing. Never drink when supervising children.

**At home; Install 4-sided fencing.** Install a four-sided pool fence, at least 4 feet high, that separates the house and play area from the pool area. Use self-closing and self-latching gates that open outward with latches that are out of the reach of

children.

**Clear the pool deck of toys.** Immediately remove floats, balls and other toys from the pool and surrounding area after use. These toys may encourage children to enter the pool area unsupervised and potentially fall into the pool.

**Around natural bodies of water:**

**Know the local weather conditions!** Avoid swimming/boating whenever there are strong winds and thunder or lightening.

For more information please visit:

[www.cdc.gov/HomeandRecreationalSafety/Water-Safety](http://www.cdc.gov/HomeandRecreationalSafety/Water-Safety)

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*We are dedicated to providing  
excellent medical care to your  
children in a timely , friendly and  
compassionate manner*



Some trivia for you!

Do you know the most popular names of 2010? According to the Social Security Administration May 2010 records, the following are the top 10 girl names:

- |              |             |           |            |
|--------------|-------------|-----------|------------|
| 1. Emma      | 2. Isabella | 3. Emily  | 4. Madison |
| 5. Ava       | 6. Olivia   | 7. Sophia | 8. Abigail |
| 9. Elizabeth | 10. Chloe   |           |            |

For boys:

- |                |              |            |            |
|----------------|--------------|------------|------------|
| 1. Jacob       | 2. Michael   | 3. Ethan   | 4. Joshua  |
| 5. Daniel      | 6. Alexander | 7. Anthony | 8. William |
| 9. Christopher | 10. Matthew  |            |            |



**A new way to communicate with us!**

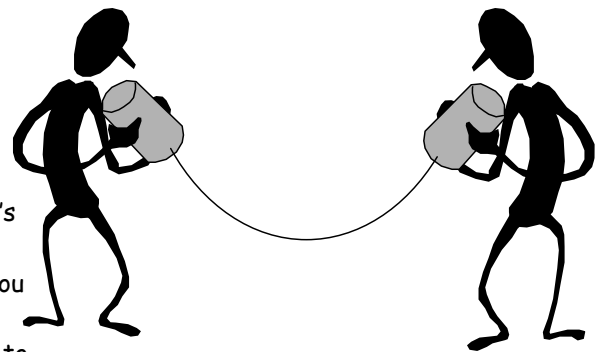
Recently our practice joined forces with Relay Health. Relay Health is a secure, private way to communicate with your doctor's office online.

Take care of non-urgent healthcare matters—quickly and easily. The benefit to you the patient (parent) is that you can now contact our office at your convenience for non-urgent requests. These requests can be prescription renewals, lab results, referrals, billing questions and of course appointment requests. After you register to become a patient via their secure website, we are notified that you are signing up and we need to accept you as our patient. Once complete, you will be able to e-

mail your primary care doctor's nurse and secretary for non-urgent requests. Of course you can still contact our office during routine business hours to meet any of these requests as well—that will not change!

If you are interested, but want to find out more, please visit their website at [www.RelayHealth.com](http://www.RelayHealth.com). If you want to sign up via our office, give our secretary your email address and she can invite you to become a patient.

We want your feedback on this service! Please share any concerns or comments that you may have with your pediatrician or our office manager, Erin Atzeni.



Thank you for trying it out and letting us know how it works for you.