



# SAFETY TIPS FROMA DOCTOR (AND DAD)

Some days, parenting can feel like an uncharted path full of wonder and worry. And while parenthood doesn't come with a fail-proof handbook, there's a lot families can do to prevent life-threatening situations and prepare for real emergencies.

We asked Graham Snyder, MD, emergency medicine physician and medical director of WakeMed Medical Simulation Center, to share his top tips and thoughts on what every parent and caregiver should know and do.

Snyder recommends parents spend their energy on prevention and preparation steps that have been proven as effective ways to save lives and prevent serious injuries. Preventable injuries are the number one killer of children in the United States.

## **Action Steps to Take Today!**

- > Enroll in a CPR class to learn about how to give ageappropriate chest compressions, plus when and how to use the Heimlich maneuver (abdominal thrusts).
- > Take a class on how to stop bleeding.
- > Learn about the signs of drowning and how to resuscitate.



**Pay Attention to** Your Pediatrician's Concerns.

Remember, pediatricians are worried about what they've seen will seriously injure a child or put them in an intensive care unit. Focus on what your doctor thinks is most important for your child instead of just what's currently grabbing people's attention in the news headlines.





Get Your Child's Car Seat Checked.

Know that the car seat you're using is properly installed and appropriate for the height and weight of the child. And make sure you know whether it should be facing backward or forward. "Drive to your local fire department and have it checked," said Dr. Snyder. "It could save your child's life!"



A very real danger for children under 6 months old is child abuse that is often inflicted by a completely exhausted parent who breaks down and shakes their own baby.

"It's really important for parents to understand that it's OK to let a baby cry as long as you've checked the basics – change them, feed them, make sure they are properly swaddled or dressed for the temperature, and then safely place them on their back in a crib," said Dr. Snyder.

"Remember that a baby can sense when you are stressed out so it's important to give yourself a break from the constant crying."

## **Tips for those Crying, Trying Times**

- > Talk to your pediatrician.
- > Ask family and friends for help.
- > Take real breaks from caretaking.
- > Rest whenever possible.
- > Never shake a baby!

"Don't reach for alcohol in times of stress or exhaustion," advises Dr. Snyder. "It will make you more tired and compromise your judgment."



# Sign Up for Swim Classes & Learn CPR with Rescue Breathing.

Know where the bodies of water are near your home and any place you or your child visits, and put a plan in place to prevent unsupervised access. Pools, hot tubs, ponds, lakes and beaches are all common places of drowning for all ages.

"Children and parents should know how to swim," said Dr. Snyder. "A child's risk of drowning is higher if they have a parent who is afraid of the water."

# fact

The biggest risk factor of drowning is not knowing how to swim, and 80 percent of kids who drown never had a swim lesson.



# Know the Signs of Drowning.

- Shocked, wide-eyed look with mouth possibly open
- Appearance of bobbing or even playing with their head likely tilted back
- > Legs straight down
- > Arms stretched out trying to push up to get nose and mouth out of the water

Remember: A drowning child or adult can't breathe so they will be quiet. They will not call for help! Timing is critical, and a constant, watchful eye can be life-saving.



# Designate a Watcher While Swimming.

Do not let children out of your sight when they are near or in the water. When children are in the water, they should always be within arm's reach of a designated adult who can swim. The best thing to do is to get in the water and stay very close to young children or inexperienced swimmers. Do not assume that they're OK just because they've had some swim lessons.

"Adults should regularly scan the bottom of a pool and watch the eyes of children while they are swimming," said Dr. Snyder. "The instinctive drowning response will only last for 20 to 60 seconds if they are not rescued."

Even with more experienced swimmers, always designate a watcher who knows the signs of distress and will stay visibly focused on the children in the pool. "Never count on a group of adults to 'keep an eye' on children in or near water," warned Dr. Snyder. Be the watcher yourself or designate someone specific who you trust to really watch your child if you are not going to be nearby.



## Rescue and Resuscitate.

When there is a drowning, you need to give rescue breaths. Dr. Snyder emphasized that the rescue breaths are important, but if someone is scared to, then they should still do chest compressions. "Ideally, you should give a couple breaths and then start CPR," said Dr. Snyder. "You don't need to pound on a child or adult to get water out of them." The focus should be on getting them breathing.

"You can save someone's life – pinch their nose, put your mouth on their mouth and give them a few breaths followed by chest compressions," advised Dr. Snyder. "They'll likely cry and throw up, and they might actually seem fine after that, but they absolutely need to go to the hospital because it's important to be watched closely after a submersion injury to the lungs." Over the next 12 hours or so after a person has been rescued from drowning, they can develop wheezing and might need oxygen support.



The best way to keep a child safe from guns is to remove all firearms from your home. If you must have a gun in your home, always unload it, lock it up and store ammunition in a completely separate locked place. Even if you don't have children living in your home, this prevention step can save the life of a visiting grandchild or the child of a relative or friend.

Parents should ask questions about guns stored in the homes of relatives and friends your child visits, and make sure they are unloaded and properly secured at all times.



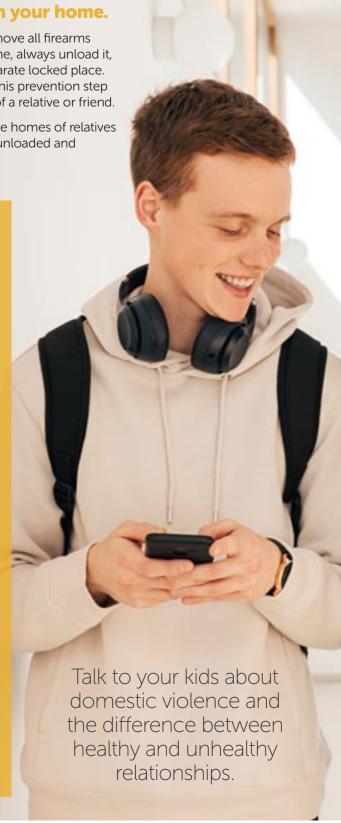
# **Empower teens to get out** of dangerous situations.

Do everything you can to make sure your teen is not tempted or coerced into driving carelessly or under the influence of alcohol or drugs. And make sure they know not to get into the car with anyone who has been drinking or using drugs. They should know not to ride with anyone who they don't know well and trust to drive safely. If they feel unsafe, they need to know they always have a way out.

they are or what they've been

"Be clear that they will not be punished for the situation and that what you care about is their safety," said Dr. Snyder.

He suggests adding a rideshare app to their phone once they start venturing out without you, and tie it to your credit card so they know they always have that simple, quick option for themselves and their friends. Snyder explained, "The key is to give teens as many ways as possible out of dangerous scenarios, and a quick click for a ride is likely to be extra helpful when peer pressure is in the mix."





## Lock up all medications and alcohol.

Just one experimental pill can be deadly to your child! "Kids of all ages are curious, and there are painkillers out there that can kill a child if they take just one," said Dr. Snyder. "If anyone your child spends time around has an opiate use disorder (known or unknown), they could be taking meds that are much stronger than you ever imagined."

- Parents and family members need to keep all drugs locked up regardless of what a child has been taught.
- > Teens and kids of all ages need to understand the serious danger of taking any pill that has not been prescribed by their own doctor.
- > Talk to them and explain the realities of drug-induced fatalities and that 'just one time' can be one too many.





# Discuss the Dangers of Underage Driving.

Put your car keys in a safe place. Kids should never have unsupervised access to any vehicle until they are legally licensed to drive. Joyriding is a real temptation for kids, and it can lead to a motor vehicle accident that causes serious injuries or death.

#### **MEET THE EXPERT**



Graham Snyder, MD, specializes in emergency medicine and has practiced full-time as an emergency physician at WakeMed Health & Hospitals since 2002. He provides physician oversight and clinical leadership for the Medical Simulation Center. He serves as the Associate

Program Director for the University Of North Carolina Department of Emergency Medicine. He is a graduate of the University of North Carolina at Chapel Hill School of Medicine and also holds an undergraduate degree in chemical engineering from North Carolina State University. As the medical director of the Medical Simulation Center, he is able to combine his engineering and medical training to teach all levels of health care providers the art and science of emergency care.

# **Mash Your Fruits**

Fresh fruits and vegetables are packed with beneficial nutrients and are a great on-the-go snack, but it's important to take the time to wash them before enjoying that first bite. It might seem unnecessary, but it's definitely worth the little bit of extra time to avoid foodborne illness.

"Harmful germs on fresh fruits and vegetables can make you and your family sick, but there's a simple solution to reduce your risks," said Marissa Parminter, nutritionist, WakeMed Corporate & Community Health. "Simply wash them thoroughly under cold running water and then dry completely to help them last longer if storing for later use."

Parminter does not recommend using any soap or other chemicals to clean produce since they are easily absorbed into fruits and vegetables. "Stick to washing with cold water to remove any dirt and germs, which might be hiding in tight spaces on vegetables like broccoli, cauliflower, celery or green leaves," said Parminter. "Use your hands to gently rub delicate greens and berries, and use a clean brush to scrub firm vegetables such as cucumbers, potatoes or beets."

Don't skip the washing step just because you're planning to peel! Parminter explains you should still wash the outside of produce before peeling. Drying produce after washing can also help remove any remaining dirty water or bacteria. "It can be tempting to skip the washing step before peeling oranges, cucumbers, avocados, carrots and other commonly peeled produce," said Parminter. "Germs on the outside of fruits and veggies can be easily spread to the inside when you peel or cut into them."

There are several ways that dangerous bacteria can find its way onto produce, including irrigation, packing, processing and distribution. "It's impossible to know what's happened along the way from farm to market so it's best to focus on the things you can control and put good food handling practices in place to prevent common household contaminations."

# Wash Your Watermelon?

Yes, you should wash melons before you slice into them. Use cool running water and a clean scrub brush to remove any dirt

# Skip the Sink Soaking

The Centers for Disease Control (CDC) does not recommend soaking produce in the sink because of the likelihood of germs in the sink. Also, soaking fruits and veggies in a bowl could spread germs from one item to another.

Wash produce right before use because once you bring water into the mix, your fruits and veggies will have a shorter shelf life

# Steaming is an easy and simple way to help eliminate the risk of harmful bacteria, and cooking vegetables does not necessarily reduce the nutritional value. For some produce, cooking actually helps release nutrients. **Break Broccoli Beforehand** Produce that is likely to harbor dirt, bugs or

Produce that is likely to harbor dirt, bugs or harmful bacteria in crevices should be broken apart and washed piece by piece. Broccoli is a great example, as well as cauliflower and celery.

Beyond washing, there are several other important steps families should take when buying and handling raw fruits and vegetables. Share the checklist below with your family as a reminder of how to properly handle and prepare food.

- Wash your hands thoroughly before handling produce.
- Carefully select fruits and vegetables that are not bruised or damaged.
- Place raw meat and seafood in a separate grocery bag and store them separately in the refrigerator.
- Sanitize kitchen surfaces and appliances regularly; always before and after preparing food.

- > Keep your refrigerator clean.
- Clean cutting boards and knives with hot, soapy water after each use.
- Use different cutting boards and knives for meats and produce, or cut your veggies and fruit first.
- Only buy precut fruits and vegetables that are refrigerated and labeled as washed and ready to eat.
- CDC recommends refrigerating cooked or cut produce, including salads, within 2 hours. Produce exposed to temperatures of 90 degrees or hotter (for example at a picnic or in a hot vehicle) should be refrigerated within an hour.
- Pay attention to any food recalls.

# Create A Teddy Bear Cli

Medical play is a great way to incorporate role-playing activities with children, and it can help you have conversations with your child about past or future health care experiences. "This type of play gives adults a better perspective of kids' concerns and questions, and it helps children feel more comfortable with different concepts of care," said Erin Hurlock, supervisor, WakeMed Children's Child Life Services. "At WakeMed, we incorporate play in many ways to help pediatric patients relax and communicate."

Hurlock suggests setting up a Teddy Bear Clinic with basic supplies that you likely have around your home. Simply use your imagination to turn some common household items into your own medical supplies and equipment.

Hurlock says you will probably find some helpful items in your first aid kit. Just be sure to put the unused items back or replace them right away so you have them when you really need them.

Gather your child's favorite stuffed animals and mix in creativity to get the role-playing started.

## **Tips & Talking Points**

- Take a little time for a teaching moment about what could happen if your animal friends don't follow safety rules.
- Incorporate a safety message such as wearing a bike helmet or staying away from hot things in the kitchen.
- Role-play a common hospital or pediatrician visit scenario.
- Keep it fun and follow the child's interests.
- Listen & learn! Let the kids lead the conversation for a while and see where it goes.

See the back page for the next WakeMed Teddy Bear Clinic held at Marbles Kids Museum. Plan to join us!

## **Supply Ideas**

Bandanas

Bandages

Clipboard

Cotton Balls

Cotton Swabs

**Empty Bottles** 

Popsicle Sticks

Scarves

Socks

Stickers

Tape

Tweezers

Your Imagination!



Share photos with WakeMed Children's via social media with hashtag **#TeddyBearClinic.** 



# **BABIES & HEART DISEASE**

# Concerns, Causes & Care

Congenital heart disease (CHD) is the most common birth defect, affecting 1 in 100 babies born in the United States. "Of those infants affected, approximately 1 in 4 have critical congenital heart disease that requires cardiac surgery within the first year of life," said Jennifer Whitham, MD, WakeMed Children's - Pediatric Cardiology. "About 25 percent of infants with CHD have physical, developmental or cognitive disorders."

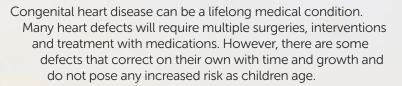
It's important for families to understand that congenital heart defects are 60 times more prevalent than childhood cancer and can be fatal, but there are approximately 1 million children and 1.4 million adults living with congenital heart disease today.

Congenital heart defects occur when parts of the heart do not form or form improperly during fetal development. The heart of a fetus is fully formed and beating by 3 weeks of pregnancy, long before a woman even knows she is pregnant! "Congenital heart defects range from a small hole in between the inner walls of the heart to those where essentially half the heart did not form," said Dr. Whitham. "Most of the time a cause is not identified but more and more research is finding certain genetic mutations that are prevalent in those individuals with congenital heart disease."

"I am often asked to describe what I do as a pediatric cardiologist. In the simplest of terms, I am a really fancy plumber and electrician! I study the heart with multiple tools and figure out how the surgeon can 're-connect the plumbing' so that the blue blood (deoxygenated) gets to the lungs and the red blood (oxygenated) gets to the body, all while sometimes using medicines to keep the heart beating as strong and efficiently as it can until those repairs can be made," said Dr. Whitham.

### **Known Causes of Congenital Heart Defects**

- > Maternal diabetes, obesity, rubella, phenylketonuria (PKU)
- Genetic syndromes (Down Syndrome, Turner Syndrome, Noonan Syndrome and others)
  - > Maternal tobacco, alcohol, and illicit drug use
    - Certain medicines taken during pregnancy (ie. lithium, Retin-A®, Zoloft®)



#### **What Can Parents Do?**

- If you are pregnant and have a history of a congenital heart defect or have a close relative who had/has one (mother, father, brother, sister, son, daughter) tell your obstetrician.
- In infants, if you notice poor feeding, blueness of the mouth (particularly the gums and tongue), constant fast breathing, or difficulty gaining weight, call your pediatrician. Some signs of poor feeding include fatigue, panting during feeds and sweating with feeds.
- > Talk to your pediatrician if you have concerns about your child's heart. They will perform a thorough examination, listen to your concerns and help guide you if further evaluation by a pediatric cardiologist is warranted.



#### **MEET THE EXPERT**

Jennifer Whitham, MD, pediatric cardiologist with WakeMed Children's began her medical career in 2006 and has worked in numerous hospital settings in pediatric and pediatric cardiology departments. In addition, she served as an assistant professor of pediatrics in the division of pediatric cardiology at The University of North Carolina at Chapel Hill. Her clinical interests include congenital heart disease, fetal cardiology and sports cardiology. Dr. Whitham knew early in her medical career that she wanted to work with children, and has enjoyed helping children with heart disease survive and thrive.





#### Kick it at WakeMed Soccer Park

WakeMed is a proud supporter of the NC Football Club and the Carolina Courage. Come out and join us for some family fun this spring and summer as we cheer on the home teams.

Check **northcarolinafc.com** and **nccourage.com** for schedules, ticket information and promotional nights.

### Take Me Out to the Ball Game!

Join the Carolina Mudcats and WakeMed for some summer fun at the ballpark. Special promotion and ticket offers are available all season long, including a chance to play catch on the field after every Sunday game. Family Sunday games and the post-game catch are presented by WakeMed Children's.

Visit **milb.com/carolina-mudcats** to view Mudcats schedules, promotions and ticket information.

## **How You Can Help**

Ongoing support for the growing health care needs of the patients at WakeMed Children's is made possible through the generous donations of readers like you to the WakeMed Foundation.

To learn how you can support the expansion of WakeMed Children's services, please visit the WakeMed Foundation at www.wakemedfoundation.org or call 919-350-7656.



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#### Out & About

WakeMed is proud to support the following events and series in our community this spring and summer. Get out and enjoy!

# Spring Daze Arts & Crafts Festival

Saturday, April 29 9 am to 5 pm Bond Park, Cary

### Apex Peak Fest

Saturday, May 6 9 am to 5 pm Downtown Apex

# Meet in the Street

Saturday, May 6 10 am to 4 pm Downtown Wake Forest

# Friday Night on White

Second Fridays
April – September
Downtown
Wake Forest



#### **Advisory Panel for Families First**

Jerry Bernstein, MD, Raleigh Pediatric Associates, PA
Karen Chilton, MD, Chief Medical Officer, WakeMed
Children's & Senior Vice President & Chief Quality Officer
Bridget Donell, MD, Medical Director, WakeMed Physician
Practices – Pediatric Critical Care and Hospital Medicine
Amy Griffin, MD, Wake Emergency Physicians, PA
Andy Jakubowicz, MD, Medical Director,
WakeMed Children's Emergency Department
Jeff Langdon, Executive Director, WakeMed Women's
& Children's

Bill Lagarde, MD, Executive Medical Director, Subspecialty Medicine, WakeMed Children's Debra Laughery, Vice President, WakeMed Marketing & Communications

J. Duncan Phillips, MD, Surgeon-in-Chief/ Director, WakeMed Children's - Pediatric Surgery Chris Schmidt, Editor Leesa Brinkley, Design



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#### Follow us.









# **Teddy Bear Clinic**

Saturday, May 20 • 11 am to 2 pm Marbles Kids Museum 201 E. Hargett Street, Downtown Raleigh

Bring a teddy bear who's under the weather or treat one of ours! From bandages and splints to X-rays and hugs, registered nurses, child life specialists and other guests from WakeMed Children's will have just the right treatment to get your cuddly friends on the road to recovery.

> This event is free with paid admission to the museum.

For museum admission information, visit www.marbleskidsmuseum.org

