

Familiesfirst

SUMMER 2021

Summer Vibes

STAY COOL. STAY SAFE.

BEDWETTING CHALLENGES & OPTIONS
KIDS COVID-19 VACCINATIONS

WakeMed 
Children's

Summer Vibes



There is just something about summer that typically brings back fun memories. Whether it's enjoying favorite pastimes, trying new activities, or grilling up tasty meals, families tend to get outside more together in the summertime. Trips, splash parties, campfire stories, scavenger hunts and other family adventures can create some pretty special memories.

We asked a few WakeMed Children's physicians to share their summer favorites along with some tips for staying cool and healthy when things really heat up.



WakeMed Physicians Share Summertime Tips & Favorites



Kim Erickson, MD, FACS

Pediatric Surgeon, WakeMed Children's

"Frozen grapes are a new summer favorite for me!"

Favorite Summertime Activities

As a child: Playing in local parks, swimming, roller skating and bike riding.

Now: Kayaking, paddleboarding, boating on the Neuse River in New Bern at my parents' home. Also, hiking in local parks with my husband, daughter and dog.

Summer Safety Tip

Wear a helmet for all sports and recreation activities that involve wheels. Roller skates, skateboards, hover boards, bikes, ATVs, scooters, etc.

Favorite Healthy Summer Snack

Cool, yummy frozen grapes! Just pop a bag of grapes in the freezer, and they're ready in 12 to 24 hours.

Tips for Staying Cool in the Summer Heat

- Get up and out early for activities like running or playground outings.
- Hike in the local state parks where it can be much cooler with lots of shade.
- Hit the pools and splash pads.
- Use insulated water bottles and keep them full of cold water for hydration.

Favorite Food to Cook on the Grill

Kabobs with chicken or steak and peppers and onions. We also enjoy grilled pineapple, corn on the cob, and BBQ chicken.

Tip: My husband (Dr. John Erickson) does all the grilling, and he says to put the BBQ sauce on the chicken only at the very end.

Summertime Recipe

Our herb garden usually gets overgrown with mint so this recipe is a summer favorite at our house!

WATERMELON, MINT + FETA SALAD

Watermelon - approx. 12 cups = 8 lb. seedless

Feta Cheese - 1.5 cups crumbled

Olive Oil - 1/4 cup

Lime Juice - 3, Fresh squeezed

Salt - 1.5 tsp.

Pepper - 3/4 tsp.

Fresh Mint -
1 cup chopped

- Cut watermelon into cubes
- Allow extra juice to drain in colander as you chop
- Place in a bowl and sprinkle with crumbled feta cheese
- Mix together olive oil, lime juice, salt and pepper
- Pour mixture over watermelon and feta
- Add the mint; toss it all together
- Best served within 1 hour of making





Samareh Hill, MD

Medical Director, WakeMed Children's – Pediatric Weight Management

"Whip up a cool, healthy dip with ranch spices and Greek yogurt!"



Favorite Summertime Activity

As a child: Going on road trips.
Now: Going to the beach.

Summer Safety Tip

Always be an arm's length away from a child who can't swim.

Favorite Healthy, Summer Snack

Watermelon

Tips for Staying Cool in the Summer Heat

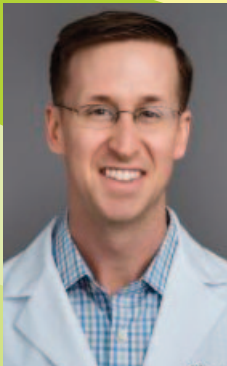
Get in the pool!

Favorite Food to Cook on the Grill

Kebabs

Summertime Grab & Go Favorite

Hummus is a favorite! You can grab it at the store, or it's an easy thing to make at home. Another easy option with veggies is to mix a ranch spice packet with plain Greek yogurt for a tasty and healthy dip.



Andy Jakubowicz, MD ("Dr. J")

Medical Director, WakeMed Children's Emergency Department

"Get out and play in the morning to beat the heat; stay hydrated!"

Favorite Summertime Activity

Swimming! Growing up we had a pool in our backyard in northwest Indiana. We spent our days playing outside until we were hot; then we'd go swimming. We pretty much repeated that all day, all summer.

Summer Safety Tip

Water safety is key! It breaks my heart every year when we see a drowning. Please make sure there is a responsible adult as a "water watcher" at all times. Download a Water Watcher card at www.safekids.org.

Favorite Healthy, Summer Snack

Watermelon – yum!

Tips for Staying Cool in the Summer Heat

Try to get out and play in the morning before things get too hot. Use the afternoon to rest and go out again in the evening when it cools down (at least a little).

Favorite Food to Cook on the Grill

You can't beat burgers and hot dogs.

Summertime Grab & Go Favorite

Hummus with carrots and/or peppers is a great go-to snack. When I'm on the move, I try to pack granola bars and fruit.





Drowning is silent. There can be very little splashing, waving or screaming.



Watching your child in the water is your responsibility. A lifeguard's job is to enforce rules, scan, rescue and resuscitate.

Drowning is quick. Once a child begins to struggle, you may have less than a minute to react.



Swim lessons are essential, but skill level varies. Many children who drowned in pools reportedly knew how to swim.



Be Safe at the Pool

Make sure kids learn how to swim and develop these 5 water survival skills.



1 Step or jump into water over his/her head and return to the surface.



2 Float or tread water for one minute.



3 Turn around in a full circle and find an exit from the water.



4 Swim 25 yards to the exit.



5 Exit from the water without using the ladder.



Watch your kids when they are in and around water, without distraction.

Source: Safe Kids

Learn more at safekids.org.

SAFE KIDS
WORLDWIDE



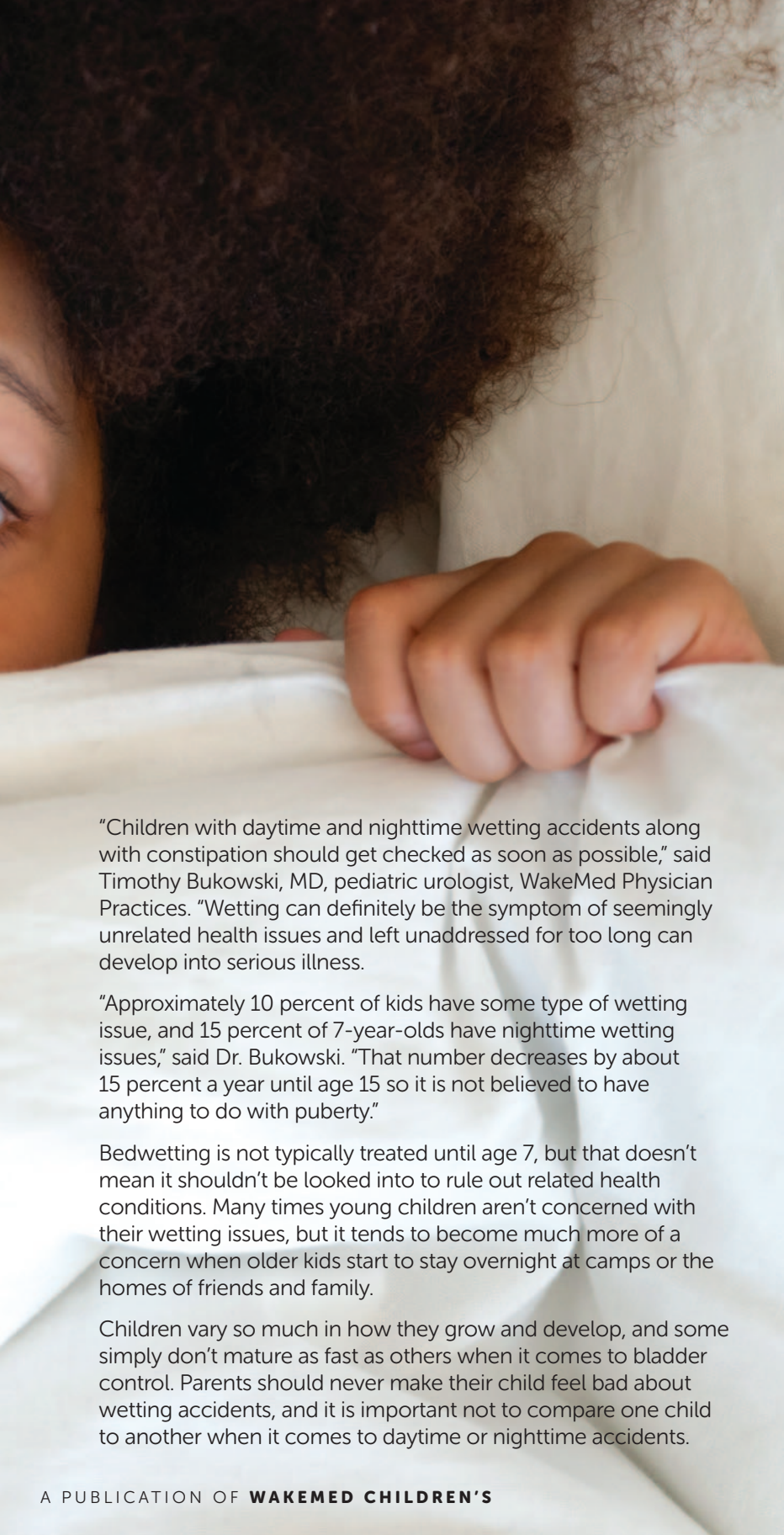
Baffled by **Bedwetting?**

If your family is losing sleep over wet sheets, and you are exhausted by it all, you're not alone. And you don't need to figure it all out by yourself! Millions of children wet the bed, and the reason why isn't always a simple answer because it could be happening for more than one reason. The most important thing to remember is that it's not your child's fault.

Any type of wetting disorder can be the source of a lot of distress for families. The key to figuring out when to be concerned is to pay attention to when it is happening and communicate with your child's pediatrician. They can help you understand what's normal versus a cause for concern.

Wetting disorders can run in the family so if a parent had trouble with urinary incontinence after age 5, it is more likely that their children will as well.

Wetting accidents for children age 5 or younger are fairly common, but it is important to pay attention to make sure it is not more than a passing phase. If a child is having daily struggles or continues to have accidents after age 5, especially with UTIs, don't delay in seeking medical advice.



OOPS MOMENTS!

Daytime wetting issues are less concerning and more likely to go away on their own. Most of the time, a little patience, guidance and reassurance from parents will go a long way in a child's developmental years. However, an overactive bladder or other health concerns could be contributing to daytime wetting issues so it's good to keep an eye on things and talk to your family's pediatrician.

"During the day, a child feels a pressure when they need to urinate, and over time the brain is trained to turn off the bladder until they have a place to go," said Dr. Bukowski.

"However, the brain isn't necessarily going to do that when a child is sleeping."

"Children with daytime and nighttime wetting accidents along with constipation should get checked as soon as possible," said Timothy Bukowski, MD, pediatric urologist, WakeMed Physician Practices. "Wetting can definitely be the symptom of seemingly unrelated health issues and left unaddressed for too long can develop into serious illness.

"Approximately 10 percent of kids have some type of wetting issue, and 15 percent of 7-year-olds have nighttime wetting issues," said Dr. Bukowski. "That number decreases by about 15 percent a year until age 15 so it is not believed to have anything to do with puberty."

Bedwetting is not typically treated until age 7, but that doesn't mean it shouldn't be looked into to rule out related health conditions. Many times young children aren't concerned with their wetting issues, but it tends to become much more of a concern when older kids start to stay overnight at camps or the homes of friends and family.

Children vary so much in how they grow and develop, and some simply don't mature as fast as others when it comes to bladder control. Parents should never make their child feel bad about wetting accidents, and it is important not to compare one child to another when it comes to daytime or nighttime accidents.

Baffled by Bedwetting?

Deep Sleepers

Many bedwetting issues are considered to be associated with a sleep issue. A child might have a bladder capacity issue or wet the bed due to stress or a traumatic event, but Dr. Bukowski said those cases are not as common.

“More than likely children with nighttime wetting issues are also sound sleepers,” said Dr. Bukowski. “Until they start waking up when their body signals it’s time to go, the accidents continue.”

In addition to the confusion and frustration many families experience with bedwetting, the ongoing cost of pull-ups and even new mattresses can really start to add up. Most families try a number of things with sleep routines to troubleshoot, but many times they aren’t able to find a rhyme or reason.

Seeking Solutions

A referral to a urologist can be helpful in ruling out causes, alleviating concerns and navigating next steps for possible bedwetting solutions.

“The first thing we do is make sure the child doesn’t have a physical problem that would lead to bedwetting,” said Dr. Bukowski. “Concerns would include anything anatomical or spinal that could require surgery.”

Urinary tract infections (UTIs) are also a concern that parents should be aware of and watch for any signs or symptoms.

If a child’s bedwetting is due to an overactive bladder, they might respond well to medication. A pediatric urologist will likely prescribe something to try for a short period of time and assess if it is helping reduce or stop the nighttime accidents.

Bedwetting alarms are another option that helps some kids wake up when they start to go so their brain begins to recognize the sensation, but Dr. Bukowski explained they won’t do much good if the child sleeps through the alarm sound. Instead, many times the rest of the family is awakened and annoyed. “In the future, it is possible there will be wearable devices that help track and predict nighttime bedwetting,” said Dr. Bukowski.

FOODS TO WATCH

The following foods can irritate the bladder and might contribute to nighttime wetting at any age. Talk to your pediatrician and check with a dietitian before starting any type of elimination diet for your child or yourself.

- Sugary foods
- Acidic foods (citrus fruits)
- Carbonated beverages (even diet or caffeine-free)
- Tomato-based foods
- Dairy products
- Tea and coffee (including decaffeinated and some herbal)



How Often Should Children Go?

Parents often wonder what's a normal frequency of urination for kids. Dr. Bukowski provided these basic guidelines to help families notice when something might be wrong.

- **Newborns** - Every Hour
- **At 6 months** – Every Three Hours
- **Potty Trained** – Five Times a Day

To help keep young children on track, Dr. Bukowski recommends parents encourage the following schedule for going to the bathroom.

- When they wake up
- Mid-morning
- Lunchtime
- Afternoon/afterschool
- Before bed

Pediatric Therapy for Bladder & Bowel Issues

Pelvic floor dysfunction is very common among children. It's also very treatable. WakeMed Outpatient Rehabilitation physical therapists offer services for:

- Urinary incontinence
- Urinary frequency/urgency
- Urinary retention
- Painful urination or with bowel movements
- Fecal frequency/urgency
- Encopresis (bowel incontinence)
- Constipation

Services are available by physician referral at WakeMed's new practice at 505 Oberlin Road as well as locations in North Raleigh and Cary. Please call 919-350-7000 for information or to schedule an appointment for your child (or you)! Pelvic health therapies are available for adults at these locations, too.

WakeMed 
Rehabilitation

Troubleshooting Tips

- Adjustments to a child's diet to avoid foods that can irritate the bladder.
- Decreasing the amount of fluid after dinner. Make sure they drink a liter of water (approximately 4 cups) throughout the day.
- Try to get kids to bed at same time every day.

Waking Kids Up to Go?

Some parents try waking their child up late at night when they go to bed, but Dr. Bukowski warns this has varying success and doesn't necessarily train them to wake up more easily when their body needs to urinate. Regardless, some families find this at least helps prevent some accidents and gives the rest of the family a better night of sleep.

UTI

Signs & Symptoms

Most people have heard about or experienced a UTI. But what exactly are they, what causes them, and why are they a concern?

UTI stands for Urinary Tract Infection. Basically, they occur when bacteria enter the body and get into the urinary tract, which includes the urethra (where urine exits the body), the connecting ureters, the bladder and the kidneys.

Although they are common in kids, Dr. Bukowski urges parents not to take them lightly. "They aren't likely to get better on their own if unaddressed, and they can progress to a dangerous state very quickly," said Dr. Bukowski. "Children who have multiple UTIs with fevers could be having kidney infections that leads to scarring."

As soon as you suspect a child has a UTI, get them to a doctor.

If a child has symptoms of a UTI, it is helpful to encourage fluids, and acetaminophen could provide some symptom relief until they can be seen by a doctor.



DON'T IGNORE THESE EARLY SIGNS!

"A bladder infection can lead to a kidney infection, which is what we worry about," said Dr. Bukowski. "As soon as you suspect a child has a UTI, get them to a doctor."

Common Symptoms

- Burning on urination
- Frequent urination
- Fever
- Chills
- Poor appetite
- Vomiting
- Pain in back or side
- Abdominal pain/ belly feels full
- Cloudy or bloody urine
- Urine with strong smell
- Wetting accidents (potty trained child)
- Irritability
- Exhaustion
- Jaundice



Recurring UTIs are concerning and need to be looked into seriously to determine the cause and properly treat the infection with a focus on prevention in the future.

With a proper diagnosis, UTIs are typically easy to treat and will probably clear up in a week or so. The germs are killed by taking an antibiotic, but it is important to follow a doctor's instructions and complete the prescribed dosage. Even if your child seems better, the infection might not be completely cleared up.

A Concern for All Ages

- Children under 18 months can't tell you how they're feeling when they have a UTI, but a fever is a common sign of concern.
- As children get older and identify sensations in their bladder, they will likely communicate that it hurts when they have to go.
- Children with weakened immune systems are more susceptible to UTIs.
- Drinking plenty of fluids is always important and can be especially helpful in clearing up a UTI.

Prevention Tips

- Keep the skin around babies' and toddlers' urinary area clean; teach them to do the same.
- Teach girls to wipe front to back.

Meet the Expert – Dr. Bukowski



Timothy Bukowski, MD, is a board-certified pediatric urologist providing a full range of pediatric urology care, including advanced laparoscopic procedures. He brings over 25 years of experience to WakeMed Children's and was selected as one of the Best Doctors in America by Best Doctors® for the last 18 consecutive years. Dr. Bukowski earned his medical degree from SUNY at Buffalo School of Medicine in Buffalo, New York, and completed fellowships in pediatric urology at the University of Cincinnati College of Medicine Children's Hospital Medical Center and at the Children's Hospital of Michigan.



COVID-19 Vaccine for Your Tweens & Teens

Thousands of children age 12 and older have received the two-dose Pfizer-BioNTech COVID-19 since the Centers for Disease Control & Prevention (CDC) green-lighted its emergency use authorization a few months ago. Yet some parents are still on the fence about whether or not to vaccinate their kids. We asked Dr. Rasheeda T. Monroe, medical director, WakeMed Children's – Pediatric Primary Care to answer some top questions to help families learn more.

Meet the Expert – Dr. Monroe



Dr. Monroe is a board-certified pediatrician and serves as the medical director for the practice. She is also the campus director for the UNC program based at WakeMed Raleigh Campus, where she provides oversight and direction of medical students' educational activities and assignments while at WakeMed and the surrounding community. She received her medical degree from the East Carolina University Brody School of Medicine where she graduated AOA (medical honor society), and completed her residency in pediatrics at The University of North Carolina at Chapel Hill. In addition to her role with WakeMed Children's, Dr. Monroe has played an integral role in WakeMed's efforts to provide underserved members of our community with COVID-19 vaccinations.

Q&A with Dr. Monroe

Should children and teens age 12+ get the COVID-19 vaccine?

When parents ask me this question, I remind them about the CDC's rigorous investigations of the Pfizer vaccine's safety and efficacy among children, and, if they haven't already, I encourage them to look at the information on the CDC's website. The science is there to support the use of the Pfizer vaccine in children.

In addition to being a pediatrician, I'm a parent to an adolescent and a 10-year-old. I share with parents that my adolescent has been vaccinated and my 10-year-old is enrolled in the Pfizer-BioNTech study for younger kids, so he may also be vaccinated already. The COVID-19 vaccine essentially eliminates the risk of serious illness related to the disease and even death. This scientific fact alone is reason enough for me to have my children vaccinated.

What about kids with chronic health conditions?

Parents who have children with chronic illnesses and immunodeficiencies are often hesitant to vaccinate their children when actually these are the kids who should definitely get their COVID-19 vaccinations. They run the greatest risk of serious illness and potentially long-term side effects such as lung and heart problems.

Are there children who should not get vaccinated against COVID-19?

There are very few contraindications for COVID-19 vaccine in adults and children. People who had an anaphylactic (severe allergic) reaction after getting the first vaccine should not get the second. People who have had an anaphylactic reaction to polyethylene glycol, which is in the Pfizer-BioNTech vaccine, should also refrain from getting the vaccine.

You mentioned your 10-year-old is enrolled in the Pfizer-BioNTech trial for children ages 5 to 11. When do you anticipate Pfizer-BioNTech will receive emergency use authorization for this age group?

It looks like early fall.

The Delta variant sounds serious. What should parents know?

It is. It's extremely contagious and can cause severe disease among people who are not vaccinated. For the most part, children have been spared from serious COVID-19 illness, but we don't know how long this will last as more and more serious variants pop up. The more people who are vaccinated decreases the virus's ability to mutate and spread.



Are you and your children ready to get back to in-person school?

I'm so excited to send them back, and the fact that my older son has been vaccinated against COVID-19 is a comfort to me. Plus, I feel like the teachers are prepared, with many of them being vaccinated themselves and well versed in masking and social distancing.

Online school has been so isolating and simply not optimal for kids. We are all ready to get back to activities, clubs, sports and safe social gatherings. It's time.



KUDOS TO CHILDREN'S ED!

The Children's Emergency Department has once again been named the best place for emergency care by Wake Living Magazine. This is the fifth time the department has won this award, which is voted on by readers of the publication.

Specifically designed to meet the emergency care needs of children, the WakeMed Children's Emergency Department was the first freestanding facility of its kind in North Carolina and is the only dedicated Children's Emergency Department in Wake County, caring for thousands of pediatric patients every year. Located on the WakeMed Raleigh Campus, the Children's Emergency Department offers a non-threatening, comfortable environment with a cheerful atmosphere, bright murals, children's wall-art and child-sized furnishings. All this and a staff of doctors, nurses and support staff who know how to treat kids like kids, not little adults.

WakeMed 
Children's Emergency Department

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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Children's

OH Baby

THERE'S A LOT TO LEARN

Kids don't come with handbooks, but WakeMed is here to help you learn, make decisions and feel more equipped and confident about your family's health and well-being!

Birth & Family Classes

WakeMed offers classes for expectant parents, new parents, grandparents, babysitters and siblings. All of our classes have transitioned to a live online experience EXCEPT for the following: Infant Safety & CPR, Siblings, CPR: Infant, Child, Adult, and Grandbabies.

Caring for Baby

- Baby Basics Class: Bringing Home Baby
- Breastfeeding: Getting a Great Start
- Breastfeeding Support Groups
- Breastfeeding for Multiples
- Breastfeeding 2 - Working Without Weaning
- Boot Camp for New Dads®
- Choosing & Using Quality Child Care
- Women's Pavilion & Birthplace Tours

Labor & Birth

- Labor & Birth Education
- Multiples Labor & Birth Class
- Labor & Birth Review
- Preparation for Cesarean Birth
- Fitness Classes for Mom (in partnership with Fit4Mom)
- Doula Services
- Gestational Diabetes
- Postpartum Support Group

Caring for Families

- CPR: Adult, Infant and Child
- Friends & Family CPR®
- Grandbabies
- Safe Sitter

To learn more and register online, visit wakemed.org and search "Birth & Family Classes".



Advisory Panel for Families First

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Karen Chilton, MD, Chief Medical Officer, WakeMed Children's

Bridget Donell, MD, Medical Director, WakeMed Physician Practices – Pediatric Critical Care and Hospital Medicine

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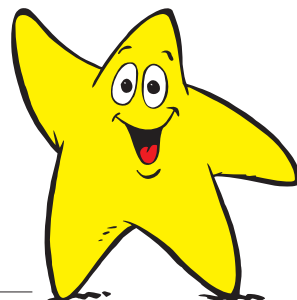


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