Champion E-Correspondence

This is an e-mail communication related to the American Academy of Pediatrics (AAP) "Medical Home Chapter Champions Program on Asthma, Allergy and Anaphylaxis." It is designed to provide AAP Medical Home Chapter Champions with resources, as well as current clinical and other information. The Champion E-Correspondence is sent on a monthly basis. Feel free to share the Champion E-Correspondence with colleagues. Distribution information appears at the end of this newsletter.

Project Updates

Greetings from Elk Grove Village, Illinois! Please join us in welcoming our two newest Chapter Champions!

Theresa Bingemann, MD is a Clinical Assistant Professor of Pediatrics and Medicine at the University of Rochester in New York and is employed by Rochester Regional Health System. Her duties include teaching medical students, residents, and fellows in the clinical and academic settings. Dr Bingemann is also the Allergy and Immunology editor for Pediatrics in Review. She is board certified in Allergy and Immunology, Medicine and Pediatrics. Dr Bingemann is a Fellow of the American Academy of Pediatrics, American Academy of Allergy, Asthma, and Immunology.

Kensho Iwanaga, MD, MS is an Assistant Clinical Professor of Pediatrics at the University of California, San Francisco. As a pediatric pulmonologist, Dr. Iwanaga splits his time between the Oakland and San Francisco campuses at UCSF Benioff Children’s Hospital. His research focuses on understanding the impacts of air pollution on pediatric respiratory health and lung development. He is also the Associate Director of the UCSF Pediatric Pulmonology Fellowship Program and Medical Director of Respiratory Care Services at UCSF Benioff Children's Hospital Oakland.

Medical Home Highlight

Call for Applications: Innovative and Promising Practices in Pediatric Medical Home Implementation

The National Center for Medical Home Implementation (NCMHI) is collecting innovative and promising practices in pediatric medical home implementation. Applications are accepted from clinical, community, and state organizations. Projects that provide care for children and youth with asthma, allergy, and anaphylaxis are encouraged to apply. All application are reviewed by an expert panel, and selected applications are published on the NCMHI Web site and promoted through the NCMHI listserv, with over 5,000 subscribers.

Apply here!
Upcoming Events

- Webinar: *Insect Sting Allergy: To Worry or Not To Worry, and What to Do About It*, July 20, 4pm PT/5pm MT/6pm CT/7pm ET
- *2016 Pediatric and Allergy/Immunology/Dermatology Pearls Conference*, July 21, Nationwide Children’s Hospital, Columbus, OH
- *7th International Conference on Patient- and Family-Centered Care*, July 25-27, New York, NY
- PREP® EM, August 6-10, Chicago, IL
- *Pediatric Pulmonary Medicine Board Review Course*, August 19-22, Phoenix, Arizona
- *Practical Pediatrics Course*, September 2-4, New York, NY
- PREP® The Course, September 10-14, Philadelphia, PA
- *CME Course: Care of the Hospitalized Child*, September 28-30, San Francisco, CA
- *AAP National Conference and Exhibition*, October 22-25, San Francisco, CA

Reports

**Preventing Exacerbations in Preschoolers With Recurrent Wheeze: A Meta-analysis**

In a recent meta-analysis in *Pediatrics* (June 2016), study authors looked to synthesize evidence of the effects of daily inhaled corticosteroids (ICS), intermittent ICS, and montelukast in preventing severe exacerbations among preschool children with recurrent wheeze. Twenty-two studies (*N* = 4550) were included. Fifteen studies (*N* = 3278) compared daily ICS with placebo and showed reduced exacerbations with daily medium-dose ICS. Subgroup analysis of children with persistent asthma showed reduced exacerbations with daily ICS compared with placebo and daily ICS compared with montelukast. Subgroup analysis of children with intermittent asthma or viral-triggered wheezing showed reduced exacerbations with preemptive high-dose intermittent ICS compared with placebo. There is strong evidence to support daily ICS for preventing exacerbations in preschool children with recurrent wheeze, specifically in children with persistent asthma. For preschool children with intermittent asthma or viral-triggered wheezing, there is strong evidence to support intermittent ICS for preventing exacerbations.

**E-Cigarettes and Future Cigarette Use**

A study in *Pediatrics* (June 2016) found that adolescents who experimented with e-cigarettes had a sixfold higher risk of using regular cigarettes within two years, compared with those who did not try e-cigarettes. The findings, based on 2014 and 2015 Children’s Health Study survey data involving 300 students in grades 11 and 12 who were 18 years of age or older at follow-up, also showed that those who initially said they would not smoke but tried e-cigarettes were 10 times more likely to use regular cigarettes within the following year, compared with those who did not try e-cigarettes.

**Impact of Peanut Consumption in the LEAP Study: Feasibility, Growth, and Nutrition**

A study published in the *Journal of Allergy and Clinical Immunology* (June 2016) found that introducing peanut-containing foods during infancy as a peanut allergy prevention strategy does not compromise the duration of breastfeeding or affect children’s growth and nutritional intakes. These findings are a secondary result from the National Institute of Allergy and Infectious Diseases (NIAID)-funded Learning Early About Peanut Allergy (LEAP) clinical trial. Researchers found that babies who were fed peanut products to avoid allergies had similar breast-feeding duration, height, weight, and body mass index, compared with those who did not eat peanuts. The study also showed the same energy intake levels between both groups, but those who ate peanuts had higher levels of fat in their diet and those who did not had increased levels of carbohydrates.
Reports (continued)

**Fathers’ Roles in the Care and Development of Their Children: The Role of Pediatricians**
A new clinical report published in *Pediatrics* (June 2016) reviews new studies of the epidemiology of father involvement, including nonresidential as well as residential fathers. Fathers’ involvement in and influence on the health and development of their children have increased in a myriad of ways in the past 10 years and have been widely studied. The role of pediatricians in working with fathers has correspondingly increased in importance. The effects of father involvement on child outcomes are discussed within each phase of a child’s development. Particular emphasis is placed on (1) fathers’ involvement across childhood ages and (2) the influence of fathers’ physical and mental health on their children. Implications and advice for all child health providers to encourage and support father involvement are outlined.

**Residential Moving and Preventable Hospitalizations**
Researchers analyzed data on 237,842 children in the Welsh Electronic Cohort for Children and found that those who moved homes at least twice during the first year of life had a 45% higher risk of emergency admissions for potentially preventable hospitalizations (PPH) from ages 1 to 5, compared with those who did not move at all. The findings, published in *Pediatrics* (June 2016), also showed that frequent residential moves were associated with greater incidence rates of preventable hospitalizations for ear, nose, and throat infections, asthma, convulsions/epilepsy, injuries, dehydration/gastroenteritis, influenza/pneumonia, and dental conditions. Additional research that focuses on enhancing health and social support services for highly mobile families, educating parents about safety risks, and improving housing quality is warranted.

**Youth Risk Behavior Surveillance — United States, 2015**
Priority health-risk behaviors contribute to the leading causes of morbidity and mortality among youth and adults. The Youth Risk Behavior Surveillance System (YRBSS) monitors six categories of priority health behaviors among youth and young adults: 1) behaviors that contribute to unintentional injuries and violence; 2) tobacco use; 3) alcohol and other drug use; 4) sexual behaviors related to unintended pregnancy and sexually transmitted infections (STIs), including human immunodeficiency virus (HIV) infection; 5) unhealthy dietary behaviors; and 6) physical inactivity. US Centers for Disease Control and Prevention (CDC) researchers found that the number of teens who smoked tobacco dropped from 28% in 1991 to nearly 11% in 2015, but 24% of youth used e-cigarettes last year. The findings in the *Morbidity and Mortality Weekly Report* are based on 2015 Youth Risk Behavior Survey data involving more than 15,000 high-school students.

**A Low-Literacy Asthma Action Plan to Improve Provider Asthma Counseling: A Randomized Study**
In an article published in *Pediatrics* (December 2015) authors looked to improve the quality of asthma counseling around a written asthma action plan (WAAPs). Study authors developed a health literacy–informed, pictogram- and photograph-based WAAP and examined whether providers who used it, with no training, would have better asthma counseling quality compared with those who used a standard plan. Physicians at two academic centers randomized to use a low-literacy or standard action plan (American Academy of Allergy, Asthma and Immunology) to counsel the hypothetical parent of child with moderate persistent asthma. Providers who used the low-literacy plan were more likely to use times of day, recommend spacer use, address need for daily medications when sick, and use explicit symptoms (e.g. ribs show when breathing). Mean (SD) counseling time was similar between groups. Use of a low-literacy WAAP improves the quality of asthma counseling by helping providers target key issues by using recommended clear communication principles.

*Subscription log in or purchase may be required to view full article*
Observations of Patient Experience in the Nation (OPEN) Asthma Survey – Findings Now Available
The Observations of Patient Experience in the Nation (OPEN) Asthma Survey was commissioned by the Allergy & Asthma Network and sponsored by Boehringer Ingelheim Pharmaceuticals, Inc. to explore current attitudes of healthcare providers and patients about asthma control and severity with the goal of identifying areas for improvement. The survey included people living with asthma who were treated with daily prescription medicine, as well as healthcare providers who treat patients with asthma. Survey findings revealed that people living with asthma do not self-report that the condition significantly affects their life. However, questioning by a healthcare provider about limits to specific activities can elucidate challenges people living with asthma are actually facing. Probing on the part of a healthcare provider about specific symptoms a patient is experiencing and use of objective classification tools can help assess true severity and level of control. Survey results reinforce the need to focus patient and healthcare provider dialogue on symptoms, limits to activities and asthma action plans in order to help patients achieve better asthma control. Survey results and related infographics are available here.

Webinar: Patient Centered Care at its Best: Shared Decision Making
The recorded webinar, Patient Centered Care at its Best: Shared Decision Making, is now available. This webinar was presented by Tonya Winders, MBA President and CEO of the Allergy and Asthma Network. Learning Objectives for this one hour webinar included, learn how to improve communications among caregivers and healthcare providers through shared decision making, learn how to partner with advocacy organizations to secure free medically accurate and patient friendly materials, and learn how advocacy organizations may support local, regional, and national efforts to enhance policies to help families.

Webinar Recordings Now Available: Thinking Outside the Box: How to Advance Health Equity and Care Quality in the Pediatric Medical Home
This webinar series hosted by AAP National Center for Medical Home Implementation (NCMHI) provided pediatric clinicians, Title V programs, families, and others with tools, resources, and strategies, to enhance the patient and family experience in the pediatric medical home. This includes, but is not limited to, the experience of diverse, vulnerable, and medically underserved populations. The series webinar recordings and slides are now available on the NCMHI website. The series included the following presentations:

- Changing Perception: How to Build Cultural Competence and Humility
- Changing Relationships: How to Foster Effective Communication with Patients and Families [referenced in webinar Plain Language Pediatrics book – includes a chapter on asthma, and reference to Dr Yin et al article]
- Changing Practice: How to Understand and Address Social Factors that Shape Child Health

Nationwide Children’s Hospital Introduces AsthmaCare App
AsthmaCare is a user friendly mobile health application for iOS and some Android devices designed for use by children and teenagers with asthma. This app was developed by pediatric asthma experts at Nationwide Children’s and is the first mobile health app shown to be effective through a clinical study. AsthmaCare was designed to provide education, improve the use of controller medications, and teach self-directed asthma care in an effort to prevent asthma attacks from occurring. The AsthmaCare app is free and available on the Nationwide Children’s website.

Healthy Living Patient Education App Now Available
Generate custom patient education handouts on healthy living topics with this new app -- "AAP Patient Education: HealthyGrowth." Topics for children 5 years of age and younger include bottle-feeding, breast-feeding, physical activity, picky eaters, screen time, and more. Handouts can be personalized and are available in both English and Spanish. For more information, or to purchase this app, visit iTunes or Google Play.
Kids Count Pediatrics: Innovating and Promising Practice in Pediatric Medical Home Implementation
This group pediatric practice in Elkin, North Carolina provides family-centered care for children with special health care needs in a low-income, rural community. Patients and families benefit from a full time case manager who assists with coordinating care and following up with specialty providers. To find out more about the pediatric medical home program at Kids Count Pediatrics, including practical pediatric medical home implementation tips and strategies, visit the National Center for Medical Home Implementation website.

Implementation Insights:
- Co-locate multidisciplinary services including mental and behavioral health with primary care.
- Establish a 24 hour telephone service to enhance access to care.
- Foster relationships with specialty care centers in the community to enhance care coordination.

Education from PEHSU on Pediatric Environmental Health Issues
The Pediatric Environmental Health Specialty Units (PEHSU) program National Classroom employs experts from across the United States to provide comprehensive materials to educate the medical community on various issues of interest surrounding reproductive and pediatric environmental health. To register for an upcoming webinar, view an archived webinar, or access an online course, click here.

High Value Care: New Transitions of Care Toolkit
A Transitions of Care Toolkit containing tools developed to assist physicians in transitioning young adults with specific chronic diseases/conditions into adult care settings is now available. It was developed by the American College of Physicians (ACP) Council of Subspecialty Societies, with participation from the American Academy of Pediatrics (AAP), medical specialty groups and patient advocacy organizations. The toolkit is derived from the Six Core Elements of Health Care Transition model of Got Transition and the clinical report, “Supporting the Health Care Transition From Adolescence to Adulthood in the Medical Home,” from the AAP, ACP, and American Academy of Family Physicians.

Attacking Childhood Asthma: Care Coordination
A new white paper from the Health And Wellness Alliance For Children describes how care coordination played a key role in reducing pediatric asthma emergency room visits by 49% in Dallas, Texas. Three facets helped tie together care coordination: a standardized Asthma Action Plan, the mobile asthma-management app My Asthma Pal, and a community ambassador pilot program. To learn more about how these facets worked together and to read the white paper, click here.

Medical Home Modules for Pediatric Residency Education Now Available
A series of five case-based, educational modules on key medical home principles for pediatric residency programs are now available. Each module, both as a full set and individually, is designed to be incorporated into existing curriculum by residency program directors and faculty. Collectively, the modules educate residents about characteristics and benefits of the patient- and family-centered medical home, care coordination, care planning, transition to adult care, and team-based care. Click here to download the modules.

Community Access to Child Health (CATCH)
The 2017 Cycle 1 Call for Proposals for CATCH Planning, Implementation, and Resident Grants is open. Grants of up to $10,000 for pediatricians and fellowship trainees and $2,000 for pediatric residents are available for innovative initiatives that will ensure all children, especially underserved children, have medical homes, timely immunizations, and access to health services not otherwise available in their communities. Applications are due by July 29.
Resources (continued)

Special Resident Grant: Community Access to Child Health (CATCH)
CATCH has partnered with the AAP Council on Community Pediatrics, Council on School Health, and Section on Medical Students, Residents, and Fellowship Trainees in funding Resident Grants that address their respective strategic priorities. Topics include early brain development, food security, poverty, social-emotional health, toxic stress, and working with schools to promote early literacy, mental health, pregnancy prevention, and violence prevention. Applications are due by July 29.

Healthy Tomorrows
Healthy Tomorrow Partnership for Children Program (HTPCP) funding helps projects that support clinical or public health services. HTPCP applications should represent either a new initiative within the community or a new component that builds upon an existing community-based program or initiative. For additional assistance with submissions, visit the HTPCP website. Applications are due by August 2.

Financial Wellness Series from the AAP: Buying Insurance
Buying insurance is not hard and does not have to be a hassle if you know what you need. Your financial success is not complete until you have considered insurance coverage. Find out what is available through your association and take part in the AAP Insurance Program’s Financial Wellness Series of short, informative videos. Follow our blogs to get tips from your colleagues.

Children’s EHR Format Enhancements
In addition to the 2015 and 2016 electronic Clinical Quality Measures, the United States Health Information Knowledgebase (USHIK) has been updated with enhancements to the Children’s EHR Format. These enhancements were the result of a recent effort by Agency for Healthcare Research and Quality (AHRQ) to improve the Children’s EHR Format by making its requirements clearer, more actionable, and better supported with additional context. The enhancements include the grouping of 47 items onto a Priority List, which has been integrated into the updated Children’s EHR Portal in USHIK.

NIH News in Health – Seeking Allergy Relief
The National Institutes of Health (NIH) News in Health June monthly newsletter focused on Seeking Allergy Relief – When Breathing Becomes Bothersome. The newsletter feature for consumers also includes lists of allergy symptoms and links to additional resources for allergy sufferers.

AAP Voices: Don’t Forget the Dads
Related to the AAP clinical report on fathers released on Monday, June 13, the AAP published two related blogs leading up to Father’s Day.

- In a new AAP Voices blog post, Michael W. Yogman, MD, FAAP, describes the child-health benefits of hands-on fathers and why he writes prescriptions for daily playtime with dad.
- David Hill, MD shares his perspective about the benefits of fathers being involved from birth in a post on HealthyChildren.org.

Connect with AAP for MOC Success
The AAP continues to expand its offerings for members to fulfill requirements for Maintenance of Certification (MOC). The Academy provides solutions for individuals from online quality improvement courses to PREP self assessment to live CME events. The AAP MOC Portfolio also provides guidance for members interested in developing or providing MOC activities through nationally affiliated AAP groups (e.g., Sections and Councils). Discover which MOC solution is right for you, and keep up with developing news at the newly revised http://www.aap.org/mocinfo.
Help Families Prepare for Disasters
Disasters can be particularly difficult for families with children and youth who have special needs. During hurricane season, begin conversations with families about potential disasters in their area. Share the new AAP/Family Voices handout and follow the Federal Emergency Management Agency (FEMA) Administrator on Twitter for the latest information and resources during hurricane season.

AAP Textbook of Pediatric Care, 2nd Edition
This landmark guide to pediatric medicine provides a complete update of this premier clinical reference, including 75 new chapters (375 total) covering the full breadth of pediatric practice. It features new sections on pediatric assessment and care of special populations, extensive coverage of health supervision, physical examinations, patient- and family-centered medical home, plus expanded mental health topics. It also includes free eBook access plus more than 600 full-color photos and illustrations.

Problems with E-Cigarettes, Vape Products, Hookah, Cigarettes, or Tobacco? Tell the FDA.
The Department of Health and Human Services’ Safety Reporting Portal (SRP) provides a standardized way for consumers, health care professionals, manufacturers, and clinical investigators to let the Food and Drug Administration (FDA) know about an unexpected health or safety issue with a tobacco product. As part of its charge to protect public health and reduce harm from tobacco products, FDA is interested in reports from consumers about tobacco products that are damaged, defective, or contaminated. These reports could identify concerns that range from cigarettes containing mold to a tobacco product that just smells or tastes wrong. FDA also wants to know if tobacco product users have experienced an unexpected health or other safety problem that they believe has been caused by use of a particular product. Additional information on what to report, how to report, and what the FDA does with the information is found here.

Funding Opportunities Now Available
Maternal and Child Health Bureau (MCHB), Office of Epidemiology and Research (OER), Division of Research (DoR)
HRSA-17-011: R40 MCH Field-Initiated Innovative Research Studies (FIRST)
HRSA-17-012: R40 MCH Secondary Data Analysis Studies Research (SDAR)

Policy and Advocacy

AAP Past President Addresses Importance of Healthy Environments
In recent weeks, AAP Past President Renée Jenkins, MD, FAAP, (pictured left) spoke at a Capitol Hill briefing titled “Where We Live: The Connection between Environmental Stressors and Kid’s Health,” hosted in cooperation with the Congressional Children’s Health Care Caucus. The briefing provided insight into national and community efforts aimed at improving child health and creating healthy environments. Dr Jenkins’ remarks focused on the impact of poverty on child health. She spoke about AAP’s recent policy statement Poverty and Child Health in the United States and noted the important role that federal and state anti-poverty and safety net programs play in helping protect against poverty.

The Medical Home Chapter Champions Program on Asthma, Allergy and Anaphylaxis is a program of the American Academy of Pediatrics Division of Children with Special Needs, which is made possible by funding from Allergy and Asthma Network (AAN).

July 2016
Ensuring Children’s Access to Specialty Care Act (H.R. 1859/S. 2782)
The AAP has obtained signatures of over 70 societies – including the Advocacy Council of the American College of Allergy, Asthma, and Immunology, the American Academy of Allergy, Asthma, and Immunology, and the American Association for Bronchology and Interventional Pulmonology, -- in supporting a bill that would strengthen the pediatric subspecialty workforce. The legislation would amend the Public Health Service Act to allow pediatric subspecialists practicing in underserved areas to participate in the National Health Service Corps (NHSC) loan repayment program. The AAP Department of Federal Affairs will be strongly advocating for the passage of this legislation, which serves as a needed step toward curbing today’s demonstrated critical shortage of pediatric medical subspecialists, pediatric surgical specialists, and pediatric mental health specialists to help provide children with timely access to the vital health services they need. Please share the attached letter with your elected representatives. In addition, AAP members are encouraged to engage their senators and representative on the issue right now through the AAP federal advocacy action center.

Are You Working to Transform Health Care?
CMS’ Quality Improvement Organization (QIO) program recently established the Strategic Innovation Engine (SIE) to advance health care quality. Its mission is to identify, evaluate, and spread proven innovations to achieve the three-part aim of better care, healthier people/communities, and smarter spending. If your organization has created or adapted an innovative practice in any of these five topics that has improved patient care, the SIE wants to hear from you.

- Managing multiple chronic conditions
- Engaging patients and families as active members of the care team
- Coordinating care within and across settings
- Streamlining patient flow
- Integrating behavioral health into care

Submit an application for consideration of your practice to be spread within the health care community. You will receive public recognition for the work you have done and broad dissemination of your practice through SIE Communications channels to foster spread throughout the health care community. The SIE will brand the practice with the organization’s name and provide a web badge acknowledging its selection as an SIE-approved practice. Learn more here.

In the News...
- Asthma Symptoms Can Bloom in Springtime
- Fewer Inhaled Steroids May Be Ok for Asthmatic Children
- Many Parents Ill-Informed About Kids’ Asthma Meds
- ‘Hard’ Tap Water Linked to Eczema in Babies
- Kansas Food Pantry Helps Low-Income Families with Allergies
- Scientists Seek Genetic Clues to Asthma’s Toll on Black Children
- E-Cigarettes Account for Increasing Numbers of Children Injured by Nicotine Poisoning, and Increased Hospitalizations
- School-Based Asthma Program Crucial to Address Gap in Pediatric Care
- Rural Children Have High Rates of Medical Complexity
- Potential Marker of Disease Activity Identified for Eosinophilic Esophagitis
- Counseling on Child’s Second Hand Smoke Exposure Helps Parents Quit Smoking
- WHO: Air Pollution Levels Increase in Low and Middle Income Countries
- Food-Triggered Atopic Dermatitis in Children May Lead to Life-Threatening Anaphylaxis Risk
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In the News... (continued)

- New HET Wearable System May Help Track User’s Wellness to Predict Asthma Attacks
- Food Intolerance Expert Dr Gill Hart Warns Parents Over Proposed Nestle Milk Allergy Testing
- Easing Your Child’s Allergies
- Peanut Allergy Prevention is Nutritionally Safe, NIH-Funded Study Shows
- The Facts of the FDA’s New Tobacco Rule
- Avoiding Allergens Could Be the Best Approach to Prevent Food Allergies
- Primary-Care Based Program Can Help Improve Assessment and Treatment of Asthma in Children
- TARGET My Hives App for People Impacted by Chronic Urticaria Now Available in Android, iOS Systems
- Researchers Aim to Improve Medical Treatment for People With Insect Venom Allergy
- High Fiber Diet Can Help Reduce Food Allergies

Chapter Champions Call to Action

Are you attending the American Academy of Pediatrics (AAP) 2016 National Conference & Exhibition, October 22nd – 25th in San Francisco? If so, see below for a list of sessions by day that may be of interest to you. The title of each session is hyperlinked to a session detail page in the new Conference Planner.

Instructions on How to use the Conference Planner

Create an Account
Search Sessions
Save Sessions to your Schedule

OCTOBER 22\textsuperscript{ND}

- Section on Allergy & Immunology Program: Day 1-H1097
- Chronic Cough: Allergy, Pulmonary, GI- How to Know and How to Treat?-A1117
- Innovative Practice Strategies: Engaging Families as Partners-I1118
- Inhalers and Powders and Spacers, Oh My! -W1058/W2063
- Care Coordination in Your Practice: Implementation & Measurement-I1159 (link not active)
- Practice Transformation: Organizational Change, Payment Reform, and Harnessing New Technology-F1108

OCTOBER 23\textsuperscript{RD}

- Section on Allergy & Immunology Program: Day 2-H2019
- Council on Quality Improvement & Patient Safety Program: Scientific Abstracts Session-H2067 (link not active)
- Joint Program: Section on Allergy & Immunology and Section on Dermatology-H2107
- Chronic Cough: Allergy, Pulmonary, GI- How to Know and How to Treat?-A2045
- Common Allergy Conundrums in the Pediatric Office-A2128
- Improving Preventive Care in Your Practice Without Burden-I2051
- Practice Transformation: Organizational Change, Payment Reform, and Harnessing New Technology-F2034
- How to Recognize, Diagnose, and Manage Food Allergy and Anaphylaxis in a Medical Home-F2190

The Medical Home Chapter Champions Program on Asthma, Allergy and Anaphylaxis is a program of the American Academy of Pediatrics
Division of Children with Special Needs, which is made possible by funding from Allergy and Asthma Network (AAN).
Chapter Champions Call to Action (continued)

OCTOBER 24™

- Section on Pediatric Pulmonology & Sleep Medicine Program-H3023
- Common Allergy Conundrums in the Pediatric Office-A3044
- Improving Practice Quality: Lessons Learned From Military Medical Homes-I3149
- Preventing Food Allergy Through Maternal or Infant Diet: New Recommendations-F3071 and F3165
- How to Recognize, Diagnose, and Manage Food Allergy and Anaphylaxis in a Medical Home-F3135
- Office Spirometry: Implementation in a Busy Pediatric Practice-W3125
- Tele-tools: Telemedicine Equipment to Extend the Medical Home-W3126 and W3162

OCTOBER 25™

- Office Spirometry: Implementation in a Busy Pediatric Practice-W4034
- Practice Transformation: Mastering the New Environment of Pediatric Practice-P4044

As always, we regularly update the program website with resources that might be useful to champions. Be sure to check out our website!