

BRIGHTON HILL PEDIATRICS, RLLP

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WELCOME: We are a team of licensed, Board Certified Pediatricians dedicated to the health and welfare of children. We are all Fellows of the American Academy of Pediatrics (FAAP), and hold clinical faculty appointments at Upstate Medical University. We attend newborns at Crouse.

Having Nurse Practitioners on our team adds a level of care that is irreplaceable. Your child can be seen by one for routine check-ups, as well as sick and follow-up visits.

We employ Registered Nurses and Licensed Practical Nurses who are skilled and sensitive to the needs of both our patients and our parents. Most of them are also experienced mothers.

OFFICE HOURS: Our office is open weekdays from 8:30 a.m. to 4:30 p.m., with lunch from noon to 1:00 p.m. **ALL** office visits are by appointment only. On Saturday, we are available for emergency sick visits from 8:30 a.m. to noon, again by appointment only. We try to accommodate your child's needs, and require 24 hours' notice to cancel an appointment so that we can care for someone else's child. You will be charged \$25 for appointments not kept.

SICK CHILDREN: If you feel your child needs to be seen, call us and we will arrange an appointment. We try to honor your requests for specific time slots and providers, but logistically speaking, this is not always possible, as we try to have ill children seen as soon as possible. If you need advice about an illness, or are unsure as to whether your child needs to be seen, call and speak with one of our nurses.

WELL CHILDREN: We follow the recommendations of the American Academy of Pediatrics for health supervision visits and immunizations. These well visits/physicals should be scheduled well in advance. We suggest that you schedule your child's next visit before you leave the office.

EMERGENCIES: IN EXTREME LIFE-THREATENING SITUATIONS, DIAL 911. ALWAYS TAKE YOUR CHILD TO UNIVERSITY HOSPITAL'S PEDIATRIC EMERGENCY ROOM. Many insurance companies require referrals for such visits. Please call our referral desk in the morning.

AFTER-HOURS: Brighton Hill Pediatrics subscribes to a pediatric after-hours telephone triage service. Although costly for the practice, families are not billed for the use of this triage service at this time. **WE REQUEST THAT THIS SERVICE BE UTILIZED ONLY FOR URGENT OR EMERGENT PROBLEMS**, and that calls of a more routine nature be reserved for our usual office hours, as our own nurses have your chart available, allowing for better continuity of care for your child. The phone number for this service is the same as our daytime number: (315) 469-8191.

ATTENTION PARENTS OF NEW PATIENTS:

Please provide our office with your insurance information. It is important that you list one of our doctors as your child's primary care physician immediately. If another doctor is listed with your insurance company, claims may be denied or paid incorrectly; then you would be responsible for payment. We will not be able to refer you to a specialist; should the need arise, if one of our doctors is not listed as the PCP. Please be sure to bring your insurance card to all appointments and provide us with any updated insurance information.

ATTENTION PARENTS OF NEWBORNS:

It is important that you add your baby to your insurance as soon as possible. Many insurance companies have filing limits for claims. It is imperative that we submit your claims as soon as possible to avoid filing limits. You must verify that your baby is added to your policy and provide us with all of your insurance information immediately. If we do not receive your billing information in a timely manner, the result may be unpaid claims for which you will be responsible. Please be sure to bring your insurance card to all appointments and provide us with any updated insurance information. You must list one of our doctors as your child's primary care physician. If another doctor is listed with your insurance company, claims may be denied or paid incorrectly, then you would be responsible for payment. You will receive statements from our office for the newborn charges. You are NOT expected to remit payment immediately. You will continue to receive bills until we have the insurance information for your newborn. After we receive a copy of your child's insurance card and information, we will submit the claims to your insurance company. If you have questions regarding this process, please feel free to contact our billing department.

We have provided a copy of our immunization schedule as recommended by The American Academy of Pediatrics

Hepatitis B #1 within 12 hours of birth (@Hospital)

6-8 weeks Pentacel (DTaP,Hib,IPV) #1, Pneumococcus 13(Prevnar)#1, Rotavirus(Rotateq) #1, Hepatitis B #2

4 months Pentacel (DTaP,Hib,IPV) #2, Pneumococcus 13(Prevnar)#2, Rotavirus(Rotateq) #2

6 months Pentacel (DTaP,Hib,IPV) #3, Pneumococcus 13(Prevnar)#3, Rotavirus(Rotateq) #3, Hepatitis B # 3
[Influenza vaccine if in season]

9 months Hepatitis #3 [catch up if needed], Influenza #2(if not already given)

12 months Hepatitis A #1, Measles, Mumps & Rubella(MMR) #1, Varicella(Varivax) #1

15 months Pneumococcus 13(Prevnar) #4, Hib #4 or Pentacel(DTaP,Hib,IPV) #4

18 months Hepatitis A #2, DTaP #4 [if did not receive Pentacel (DTaP,Hib,IPV) #4]

2,3,4 yrs [catch up if needed] Hib #4, Pneumococcus 13(Prevnar) #4
[up to 59mos]

4 years Measles, Mumps & Rubella (MMRV-Proquad) DTaP #5, IPV #4 or #5 [if rec'd Pentacel #4]

5 years (If did not receive @ 4yr)DTaP #5, IPV #4 or #5 [if rec'd Pentacel #4]

11-15 yrs Tdap (Adacel), Meningococcus(Menactra) #1[catch up Varicella(Varivax)]

16-17 yrs Meningococcus(Menactra) #2

11-26 yrs HPV 4 or HPV 9 (Gardasil) (check insurance)
3 doses in 6 months [0, @2mos, @6mos]
Dose #1-#2 minimum of 4 weeks apart
Dose #2-#3 minimum of 12 weeks apart
[#3 must be 24 weeks after #1 and 16 weeks after #2]

College PE Tdap(Adacel) (if none before), PPD (if TB test required) [catch up Varicella(Varivax)]

Annual Influenza Vaccine after 6 months of age [<9yr at time of first influenza vaccine need 2 doses, one month apart]

Immunization explanation:

Adacel : Tdap(Tetanus,Diphtheria,Acellular Pertussis) (IM)>11yr.(minimum of 2yrs. since last Tetanus)

DTaP: Daptacel (Diphtheria,Tetanus,Acellular Pertussis)(IM)

Flu Vaccine (Influenza): Fluzone(IM), Flumist (intranasal)

Hepatitis A: Hepatitis A Vaccine (IM) Hepatitis B: Hepatitis B Vaccine (IM) Hib: Haemophilus Influenza type B (IM)

HPV: (Gardasil) Human Papillomavirus Vaccine (IM)

IPV: Inactivated Polio Vaccine (SC)

Menactra : Meningococcal (Menigitis) conjugate Vaccine, 11yrs. and older (IM) MMR: Measles,Mumps and Rubella (SC)

Pentacel: DTa P, I PV,and Hib

PPD: Tb test (intra-dermal)

Prevnar: Pneumococcal 13 Valent Conjugate Vaccine (IM) Rotateq : Rotavirus Vaccine (oral)

Td: Adult Tetanus and Diphtheria (IM)

TD: Pediatric Tetanus & Diphtheria age 6 to 8 years (IM) Varivax: Chicken-Pox Vaccine (SC)