

SEPTEMBER UPDATES

HOW ARE THINGS GOING?

Hopefully the start to the school year has gone well for your family. This is a good time to check in with your kids to catch any issues with things like work completion, grades, making friends, peer interactions, teacher interactions, extreme dislike of school, elevated stress or worsening mood early so we can address things. If your child is struggling, schedule an appointment so we can take steps to improve sooner rather than later!

HELPFUL QUESTIONS TO IDENTIFY CONCERNS:

- What is the best/worst thing about school so far?
- What's easy/hard for them at school?
- How do they like their teacher(s)?
- How do their teachers like them?
- Do they have a best friend/friend group in their class?
- Who do they play with at recess and what do they play?
- Who do they sit with at lunch? How does that go?
- Is school work and homework being turned in on time every day?
- Do they feel like they have a good morning/school/afternoon/evening routine?

CHILD DEVELOPMENT AT SCHOOL AND AT HOME

Several careers ago, I taught 2nd grade and I have always believed that schools and teachers can play a huge role in child development. As a pediatrician I especially enjoy working with schools to find ways to support entire communities of students.

I'm currently working with a local school on a fascinating project. We will be meeting with teachers to discuss the behaviors in children that are the most predictive of happiness and achieving their potential as adults; things like...emotion regulation, curiosity, prosocial behavior, etc. and discuss ways to specifically teach and reinforce these behaviors in the classroom setting. By reinforcing these behaviors over years, kids are certainly more likely to internalize these behaviors and beliefs for themselves (hopefully).

I never had time to discuss these topics at my old office, but if parents would ever like to come in to discuss these "big picture" topics on child development, there's time at Direct Pediatrics!



Reinforcing Positive Behaviors

Dr. Steve Johnson

- Parents, talk with your partner about what qualities and values you would like to see your child/children develop and be on the lookout for opportunities to encourage these qualities and values.
- In our family, we went out of our way to look for opportunities to encourage and reinforce kindness and hard work in our own kids. For example, if one of our kids was having a hard time doing a puzzle during the toddler years, but kept working on it and didn't give up, we would make a big deal about how hard he or she tried even when it was hard.

| A NEW IDEA...



If there is interest, I would love to do a series of presentations for parents on topics that I think would be useful.



TOPICS COULD INCLUDE...

- Top 10 myths in pediatrics
- ADHD
- Phone/Internet Issues
- Anxiety
- Alcohol/Vaping/Substance use
- Resilience
- Sports Psychology
- Anything parents want to discuss!

These would be 60-90 minute interactive presentations (probably on a Sunday evening) with the goal of providing families with practical information that they could start using immediately.

**LET ME KNOW IF YOU'RE INTERESTED
AND HAVE ANY TOPICS YOU WOULD LIKE
TO DISCUSS!**





RSV: Is there a vaccine?

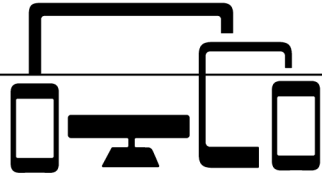
Dr. Kyle Stewart

The product that is now widely available for infants is called “Beyfortus.” This isn’t technically a vaccine, but rather what we call a “monoclonal antibody.” AKA a fancy way to say that we actually give pre-made antibodies to the RSVirus to a child and they hang out in the bloodstream for about 6 months and slowly wane away. So it differs from the vaccine as it doesn’t actually prompt the baby to make their own antibodies, but rather just pumps them up with antibodies. Functionally, it serves a similar effect to help clear an infection if the baby ever comes across it. Beyfortus is available to children <12 months entering their first RSV season.

RSV: What to watch for

- RSV is a viral infection. We hear about it a lot as it has a propensity to be worse in children < 2 years old.
- The VAST majority of children with RSV will have runny nose and light cough for 2 weeks and be totally fine afterward.
- Occasionally, in younger children, the amount of mucus can overwhelm the respiratory system and turn into a “lower respiratory infection” called bronchiolitis.
- Feeding issues can sometimes follow as the kids are so snotty that they can’t drink well, and we can see dehydration develop in rare cases. Symptoms typically build over 5 days, crest, then take another 2 weeks to totally resolve.
- The two main serious complications with RSV are breathing troubles and dehydration. If you notice your child breathing fast and hard, suction out some of the snot and see how things look after that. Also, keep a tally on wet diapers. You can transition to Pedialyte which can be easier to get down than formula or breast milk, and as long as your child is making >3 wet diapers a day, we’re in the clear.

SCREEN TIME AND MENTAL HEALTH IN CHILDREN



Screens are everywhere—tablets, phones, computers, and televisions are a part of daily life for most children.

While technology can offer opportunities for learning and connection, too much screen time can also impact children's attention, sleep, and emotional well-being. *Finding the right balance is key.*

How Screen Time Affects Children

Research shows that heavy or unstructured screen use can influence several areas of development:

- Attention: Rapid switching between apps, games, and videos can make it harder for children to focus on slower-paced tasks like reading or homework.
- Sleep: The blue light from screens can interfere with melatonin production, making it difficult for kids to fall asleep or stay asleep.
- Mood: Extended screen time—especially on social media—can increase stress, irritability, and feelings of comparison.



Signs of Unhealthy Screen Use Parents may notice:

Emily Moran, M.Ed., LPA

- Difficulty transitioning away from devices
- Moodiness or meltdowns when screens are removed
- Loss of interest in non-screen activities
- Sleep struggles or persistent fatigue
- Declining school performance or attention

TIPS FOR HEALTHY SCREEN HABITS



- **Set Clear Limits:** Create family rules about daily screen time and stick to them.
- **Encourage Tech-Free Zones:** Keep mealtimes and bedrooms screen-free.
- **Model Balance:** Children follow adult behavior—show them how to unplug.
- **Promote Alternatives:** Encourage sports, outdoor play, reading, or creative hobbies.
- **Monitor Content:** Not all screen time is equal—educational programs or interactive activities are healthier than passive scrolling.



BOTTOM LINE:

Not all screen time is harmful—educational games, video chats with family, or co-viewed shows can be positive. The key is balance, structure, and mindful use.



Results from this week's virus/bacterial testing in Louisville

Below is Dr. Alan Junkins' (Chief of Microbiology) weekly report on viruses and bacteria detected in the Louisville area. It provides insight into what's on the rise and what's fading in our community. A few key points:

- The value represents the positivity percentage. For example, if 7% of COVID tests came back positive last week, the value for COVID is 7%.
- Viruses/bacteria increasing for two weeks in a row are marked in red.
- Viruses/bacteria decreasing for two weeks in a row are marked in green.
- The table includes the most common cold viruses, with the most familiar ones at the top.

	Week of 9/1/25	Week of 8/25/25	Week of 8/18/25	Week of 8/11/25
COVID	12%	14%	17%	20%
Influenza A (Flu A)	<1%	<1%	<1%	<1%
Influenza B (Flu B)	<1%	<1%	<1%	<1%
Respiratory Syncytial Virus (RSV)	<1%	1%	<1%	<1%
Strep	12%	12%	10%	12%
Adenovirus	2%	2%	2%	2%
Coronaviruses (non-Covid)	<1%	<1%	<1%	<1%
Human Metapneumovirus	1%	1%	<1%	1%
Mycoplasma Pneumoniae	<1%	<1%	<1%	<1%
Parainfluenza (Croup)	4%	3%	4%	3%
Pertussis (Whooping Cough)	<1%	<1%	<1%	<1%
Parapertussis	<1%	<1%	<1%	<1%
Rhinovirus / Enterovirus	30%	32%	28%	19%



As a person, Dr. Johnson is one in a million. As a doctor, he's one in a trillion! He sets the bar for quality care and represents everything you could want in a medical provider plus infinitely more! His sincerity is evident from the moment you meet him. Dr. Johnson is motivated to do only what's best for the children in his care, and because of his practice model, he can do just that!

IN THE JOHNSON HOUSE

About half of my weekday evenings are spent watching Alexis play high school soccer. I've discovered that signing up to be an announcer for the soccer games is a good fit for me because it completely prevents me from making any less than positive comments from the stands! However, I've also discovered that when I'm announcing games, I can't respond to patient texts until half time or the end of the game, so if you send a question/request between 7:30-9:30pm on Mondays and Wednesdays, you may not get a reply until after 9:30.



IN THE STEWART HOUSE

My family and I were able to go to upstate NY over Labor Day weekend to meet up with some friends that currently live in Canada. We continue to adjust to life with a kid in Kindergarten and we're loving the new rhythm! Additionally, I just finished making a low budget astroturf 9 hole golf course in my backyard (and it's a blast!).



Office Logistics:

DR. JOHNSON IS OUT OF THE OFFICE

THURSDAY 9/18

DR. STEWART OUT OF THE OFFICE

TUESDAY 9/23

FLU VACCINES ARE IN!

CALL THE OFFICE TO GET YOUR FAMILY (EVEN NON DP MEMBERS) ON THE SCHEDULE!



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