



January Updates

STAY WARM OUT THERE!

DIRECT PEDIATRICS HAS INCREASED OUR ANNUAL BILLING DISCOUNT FROM 5% TO 10%

WHY SWITCH TO THE ANNUAL PLAN?

- ✓ Save nearly \$200 a year with our new 10% discount
- ✓ Enjoy the convenience of one simple payment for the whole year
- ✓ Lock in your membership for uninterrupted care

IF YOU'D LIKE TO SWITCH TO THE ANNUAL PLAN OR HAVE ANY QUESTIONS, JUST REPLY TO THIS EMAIL OR CALL OUR OFFICE AT 502-515-6601. WE'LL TAKE CARE OF EVERYTHING FOR YOU!

Other great news, **as of January 1**, there's new legislation that mandates all **HSA funds can be used for DPC services**, up to \$150/month. If you enroll in our discounted yearly plan, you'll be eligible for **full coverage!**

We also have a new benefit for those interested in **Psychological Testing** with Emily! We have partnered with Reimbursify, a company who is able to check your insurance plan and give you an idea of if you could receive a reimbursement for services under your out of network coverage. To learn more about this, give us a call!

MOST COMMON QUESTIONS ABOUT ADHD

What is ADHD?

- It is a common neurodevelopmental condition that makes it hard for children (and adults) to manage their attention, impulsivity and activity levels in a manner appropriate for their age (or job).

How do kids get ADHD?

- In almost all cases, kids are born with ADHD as ADHD is highly genetic
- While there does not appear to be an "ADHD gene," 76 genes (so far) have been found to increase a child's risk of having ADHD
- If a child has ADHD, there is a strong chance that one or both parents have diagnosed or undiagnosed ADHD
- Other less common causes of ADHD include birth issues (prematurity, decreased oxygen at birth, etc.)

Can ADHD be caused by too much screen time?

- No
- While pediatricians agree that excess screen time is not good for anyone, it does not cause ADHD
- Kids with ADHD tend to have shorter attention spans and are drawn to screens/electronic devices more than kids without ADHD (and often have a harder time emotionally turning off screens)

Can ADHD be caused by too much sugar, food dye, gluten, vaccines, parenting styles, etc.?

- No
- All of these have been researched and none cause the persistent pattern of ADHD behavior
- Parenting does not cause ADHD! I can't stress this enough!



How do I know if my child has ADHD?

Dr. Steve Johnson

Here are the phrases that I hear parents use that makes me wonder if their child has ADHD...

- Always moving
- Can't sit still
- Can't focus
- Never listens
- Jumps from one thing to another without finishing anything
- Starts the school year great, falls apart in the middle and scrambles to salvage grades at the end
- Lazy
- Unmotivated
- Has great potential
- Underachiever
- Lots of missing or incomplete assignments
- Disorganized
- Backpack/desk/room is a mess
- Lies often
- Hard time keeping friends
- Prefers to play with older or younger kids

Kids with ADHD may meet a few, most or all of these parent descriptions.

ANY HARM IN TAKING A WAIT-AND-SEE APPROACH?

Yes. The longer a child with ADHD goes untreated, the worse things go for the child.

Here are some of the scary statistics about the life of a child with untreated ADHD.

- Life expectancy is 11-13 years shorter
- 30-50% repeat at least one grade
- 4x more likely to develop an anxiety disorder
- 10x more likely to develop depression
- 3x more likely to suffer accidental injuries
- 5x more likely to have oral trauma
- 3x more likely to abuse drugs
- 3-5x more likely to vape/smoke and drink alcohol as teens
- 3x more likely to cause car accidents
- 5x more likely to attempt suicide
- 10x more likely for teenage pregnancy

This is why I am passionate about diagnosing and treating ADHD as soon as possible!



I'm concerned, what's the next step?

Dr. Steve Johnson

- Speak to your pediatrician
 - Many pediatricians are comfortable diagnosing and treating ADHD or they have people they refer kids to for evaluation and treatment.
- There are different levels of evaluation including
 - Evaluations by pediatricians that only look at ADHD
 - More detailed evaluations by pediatricians that look at ADHD and other things like anxiety, depression, sleep issues, etc.
 - Comprehensive evaluations by psychologists that look at all of these issues as well as learning difficulties, high functioning autism, auditory processing concerns, and memory weaknesses.
- At Direct Pediatrics we do all of the above testing depending on the needs of the child and concerns of the parent



“WHAT HAPPENED TO THE VACCINE SCHEDULE?”

Dr. Kyle Stewart

Let’s talk about it (deep breath, find your happy place... mainly talking to myself here). In January, the CDC released an updated childhood vaccine schedule.

What Is ACIP and what does it do?

The Advisory Committee on Immunization Practices (ACIP) is a group of medical and public health experts that meets to review vaccine science and make recommendations on vaccines.

What Changed in the CDC’s 2026 Schedule?

Key updates include:

- Fewer vaccines are designated as “routine” for all children. The new CDC schedule now lists routine vaccines for about 11 diseases.
- Several vaccines, including influenza, rotavirus, hepatitis A and B, RSV, and meningococcal disease vaccines — have been reclassified so that they are not automatically recommended for every child. Instead, these vaccines may be given based on child-specific risk factors or through shared clinical decision-making between you and your clinician.

What does “shared clinical decision-making” actually mean?

Rather than a universal recommendation, the vaccine is recommended when the provider and family discuss your child’s specific needs, risks, and benefits. In practice, it’s much more grey given the lack of clarity.

- Some vaccine dose numbers have also been adjusted — for example, HPV vaccine may now be given as a single dose in certain age groups per the updated recommendations.



WHAT THIS MEANS FOR YOUR FAMILY

Dr. Kyle Stewart

Your child's health and protection from preventable illnesses remains our top priority. You can still access all recommended vaccines, even if a vaccine is now in a shared clinical decision category.

We are here to talk with you. If you have questions about individual vaccines we want to discuss the science and the benefits for your child.

We will continue to follow evidence-based recommendations that help keep your children healthy from infancy through adolescence.

If you have any questions, please call us or ask at your next appointment!

How This Differs from the AAP Schedule (the one we follow)

The American Academy of Pediatrics (AAP) is one of the leading voices in pediatric immunization guidance. The AAP develops its own recommended schedule each year based on review of the medical evidence and the data on disease risk and vaccine benefit.

Right now, the AAP's immunization schedule:

- Maintains many vaccines as routine for all children, including vaccines that the CDC schedule now places into shared decision categories.
- Reinforces pediatric best practices for conditions like influenza, hepatitis B at birth, and COVID-19 vaccination in children.

Many practitioners continue to follow the AAP schedule because it is based on a large body of evidence and decades of outcomes data.

At our practice, we continue to recommend and administer vaccines according to the AAP's current immunization schedule.

FINDING A RHYTHM AGAIN: EXECUTIVE FUNCTIONING AFTER WINTER BREAK

As kids settle back into school after winter break, many parents notice how their child is handling organization, homework, and classroom expectations. The second half of the year often brings more independent work, which can make executive functioning challenges more noticeable.

Signs Your Child May Be Struggling

After break, school expectations often ramp up, and common signs of executive functioning challenges can emerge, such as:

- Missing materials or homework
- Trouble getting started
- Feeling overwhelmed by multi-step tasks
- Losing focus easily
- A messy backpack or digital workspace

These behaviors are not a matter of motivation or effort—they're signals that a child's brain is still developing skills to manage more complex demands.

Practical Supports to Support Executive Functioning

- Checklists or visual reminders
 - Color-coded folders
- Short work periods with breaks
 - Planners or digital reminders
- A consistent homework routine

These strategies build independence over time and can reduce stress for both children and adults.



What Is Executive Functioning?

Emily Moran, M.Ed., LPA

Executive functioning is a set of skills that helps kids stay organized, manage time, and complete tasks. These skills include planning, working memory, task initiation, flexibility, and impulse control. They develop throughout childhood, and for kids with ADHD or learning differences, development may appear uneven or delayed.

When executive functioning challenges continue or interfere with schoolwork, it may be helpful to explore whether attention or neurodevelopmental factors are involved. In these cases, a psychological evaluation can clarify what's going on and recommend supports that fit your child's needs.

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:

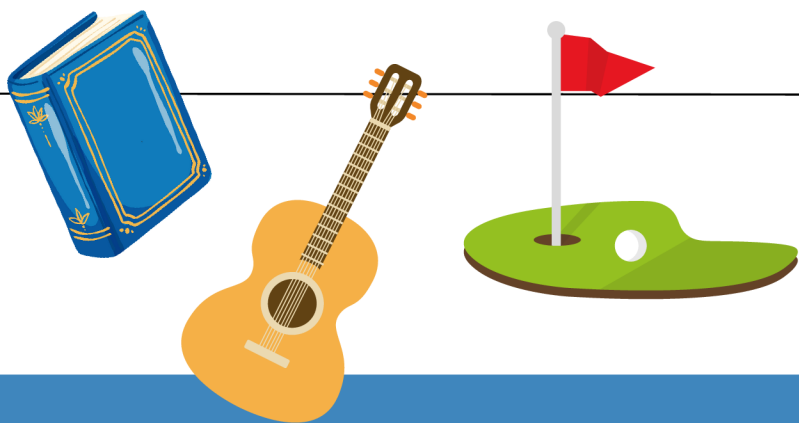
- The value represents the positivity percentage. For example, if 7% of COVID tests came back positive last week, the value for COVID is 7%.
- Viruses/bacteria increasing for two weeks in a row are marked in red.
- Viruses/bacteria decreasing for two weeks in a row are marked in green.
- The table includes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

	Week of 1/26/26	Week of 1/19/26	Week of 1/12/26	Week of 1/5/26
COVID	5%	6%	6%	5%
Influenza A (Flu A)	21%	20%	19%	21%
Influenza B (Flu B)	5%	2%	1%	1%
Respiratory Syncytial Virus (RSV)	8%	8%	8%	10%
Strep	16%	16%	14%	13%
Adenovirus	3%	3%	5%	2%
Coronaviruses (non-Covid)	9%	8%	5%	4%
Human Metapneumovirus	4%	5%	5%	5%
Mycoplasma Pneumoniae	<1%	<1%	<1%	<1%
Parainfluenza (Croup)	2%	2%	1%	2%
Pertussis (Whooping Cough)	<1%	<1%	<1%	<1%
Parapertussis	<1%	<1%	<1%	<1%
Rhinovirus / Enterovirus	8%	11%	10%	11%



Dr. Johnson and his staff provide a health care experience that is unlike any you've had before.

You have access to the best pediatrician and child psychologist you can imagine. You are treated with time, care, and compassion. You will feel heard and understood. You will have access to Dr. Johnson 24/7 when necessary. Joining this practice could very well change your life and change everything you know about getting care for your children. I can't recommend Direct Pediatrics enough. It has dramatically improved our lives.



IN THE JOHNSON HOUSE

We had a great holiday break with Matthew and Michael back in town. Alexis has been heading to the YMCA daily. Lori continues to work out new songs on the guitar. I just finished my first fiction book in the past year- The Secret of Secrets by Dan Brown It was an excellent book, although 23 hours long via audio book

Office Logistics:

IN THE EVENT OF WINTER WEATHER, THE OFFICE MAY NOT BE OPEN, BUT YOU CAN STILL TEXT OR CALL YOUR DOCTOR! DR. JOHNSON CAN USUALLY STILL GET TO THE OFFICE IN SNOWY CONDITIONS.

REMINDER

You can save 10% when you pay your membership annually! Call the office to update your membership!

In the Stewart House

The Stewarts had a great Christmas celebrating locally with family in the area. Dr. Stewart recently launched a social media account with content from his backyard golf course @TPC_Stewgrass



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