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Device Dangers

Using devices like smartphones and laptops has left many of us with poor posture and chronic neck or back pain. It’s even spurred new names for these ailments, such as “the smartphone slump” and “text neck.” While abandoning electronic devices isn’t realistic for most people (we’re looking at them two to four hours a day on average), there are ways we can use them better.

1. Find out how much your devices affect your posture and neck position. Ask a friend or family member to take a picture of you using the devices as you normally do.

2. Make ergonomic adjustments. Set up your desk with a separate keyboard and monitor so you can find the most comfortable placement of each. Hold your smartphone at eye level, or use it while lying on your back. Your arms will tire, and you’ll be more aware of how long you’re spending with the phone.

3. Get what you need without looking at the device. Our electronics have so many capabilities these days. Can you accomplish things in a different way? Perhaps call someone instead of having a text exchange, dictate your texts or searches rather than typing, or listen to a podcast of daily news instead of reading stories online.

IS IT URGENT? 
OR AN EMERGENCY?

There’s no doubt about it—experiencing a medical issue is stressful. There’s the pain or discomfort of the problem itself, but also the confusion over where to go for treatment. You probably know to call 911 for major incidents (head injury, chest pain) and see your doctor for routine concerns, but what about everything in between? Here are some guidelines.

Head to the emergency department for: Problems that can’t wait. You or someone else could die or suffer permanent disability. Examples include bleeding that won’t stop, fainting or dizziness that doesn’t go away, trouble breathing, pain in the arm or jaw, broken bones (especially if pushing through the skin), deep wounds, serious burns, inhaled smoke or poisonous fumes, overdose of drugs or alcohol, coughing up blood, suicidal thoughts, seizures, sudden weakness on one side of the body, or sudden inability to speak, see, walk or move.

Use an urgent care center for: Problems that need help soon but are not life-threatening and don’t risk permanent disability. Examples include colds and flu, sore throats, earaches, rashes, sprains, back pain, minor cuts and burns, and minor eye injuries.

To find a hospital or an urgent care center, go to metroplus.org. In the blue bar that says “Find a Doctor or Provider,” select “Hospital And Other Services” from the drop-down menu and click “Search.”
Help Your PCP Help You

When you think about the most important relationships in your life, the one with your primary care physician probably isn’t high on the list. But perhaps it should be. After all, patients who have quality relationships with their doctors tend to have better health outcomes.

Fortunately, it’s never too late to strengthen this partnership. Here are a few tips:

- Before your next visit, write down any questions and concerns you have, and take the list with you.
- While you are with the doctor, ask for explanations when you don’t understand, and share all your symptoms, even if you think they are embarrassing or irrelevant.
- Most important, take any medicine your doctor prescribes. If you think that will be hard to do for any reason, ask your doctor to help brainstorm solutions.

Finding a Provider

Need to find a network provider near you? Our provider directory is available in print or online. Visit metroplus.org to search our most up-to-date listings. Or call Member Services for help locating a provider near you.

Need to Check a Claim?

There are two ways to check the status of a claim. You can log in to your account at metroplus.org or call Member Services and we’ll help.
Beyond Blue: Treatments for Depression

It’s natural to have a bad day here and there. For some people, though, the bad days keep coming one after another. People may feel sad, hopeless, anxious, irritable or worthless. Previously cherished hobbies and activities don’t feel the same. It may be difficult to concentrate or make decisions. And they can experience physical pain or digestive problems, as well as changes in sleep, appetite or weight.

If any of these symptoms sound familiar and you’ve experienced it for two weeks or more, you might be suffering from depression. And you wouldn’t be alone. The National Alliance on Mental Illness estimates that nearly 7 percent of the population—16 million Americans—had at least one depressive episode last year.

The first step is to contact your doctor. There may be a medical reason for how you’re feeling. If that is ruled out, he or she can refer you to a mental health specialist.

One of the most important things to know about depression is that it is treatable. There are two main treatment options, and both are effective. You and your doctor can decide which one (or a combination of the two) is best.

Psychotherapy. Also called talk therapy or counseling, it involves meeting with a specialist to discuss your problems and find ways to cope with them. There are a few approaches, such as cognitive behavioral therapy, interpersonal therapy and problem-solving therapy.

Medications. Antidepressants change the way your brain controls moods and stress. They can work well to reduce symptoms, but they do require patience. Often a drug can take two to four weeks to start working, and 12 weeks can pass before you feel the full benefit. Some drugs come with side effects that are hard to live with, such as nausea, weight gain, sexual changes or sleep issues. Your doctor may need to adjust the type of medication or the dosage to find what works for you.

Never stop taking antidepressants or adjust your dosage without a doctor’s guidance, even if you start to feel better. Your dose needs to be decreased slowly to avoid withdrawal symptoms or a relapse of depression. While you are taking antidepressants, you’ll need to avoid drugs and alcohol, which may interact with the medication.

Remember: If you’ve been hospitalized for mental health care, getting the right follow-up care is important. You want to continue the progress made during the hospitalization and let your mental health provider detect any post-hospitalization reactions or medication problems. Make an appointment with a mental health provider and visit within seven days of your discharge.

If You Need Help

If you are having thoughts of suicide, there is someone to talk to right now. NYC Well is a 24/7 service with counselors available by phone, text or chat—whichever you’re most comfortable with. It’s free and confidential, and specifically for New York City residents. Call 1.888.NYC.WELL (1.888.692.9355), text “WELL” to 65173 or chat at nyc.gov/nycwell.
Kids don't come with an instruction manual. However, a good doctor can be almost like one, addressing many common questions and concerns.

At every visit, your child's doctor will perform a physical exam and check that your child is tracking with his or her peers in several areas of development. The doctor also offers advice about health and safety issues appropriate to your child's age.

Here are some specifics you can expect to discuss at your kids' checkups as they grow, according to the American Academy of Pediatrics:

**Age: First month**  
**How often?** Three visits—newborn, 1 week and 1 month  
**What's covered:** Routine baby care (sleep, feeding), infant behaviors, infant safety (including car seats), how to handle unwanted advice, protecting baby from sunburn

**Age: 2 to 6 months**  
**How often?** Every two months  
**What's covered:** Crib safety, strategies for a fussy baby, feeding strategies, self-calming, planning for child care, home safety checks

**Age: 9 to 18 months**  
**How often?** Every three months  
**What's covered:** Changing sleep patterns, separation anxiety, appropriate learning toys, incorporating table foods, consistent discipline, playgroups, naps, establishing a bedtime routine, healthy snacks, dentist visit by 12 months, childproofing the home, language development

**Age: 2 to 3 years**  
**How often?** Every six months  
**What's covered:** Toilet training, taking turns, shared family exercise, reading together, limiting TV, booster seats, preventing falls from windows, smoke detectors, using bike helmets

**Age: 4 to 21**  
**How often?** Every year  
**What's covered:**  
**Age 4:** Preparations for structured learning (preschool, Head Start), importance of reading, daily play  
**Ages 5 to 6:** Preparing for school, temper problems, how to handle anger, healthy eating, physical activity, pedestrian safety, seat-belt and helmet use, swimming safety, child sexual abuse prevention  
**Ages 7 to 8:** Adapting to school, bullying, managing conflicts, eating fruits and vegetables, limiting screen time, internet safety

**Age 9 to 10:** Importance of breakfast, doing chores at home, school performance, puberty, personal hygiene, body image  
**Ages 11 to 14:** Limiting junk food and soda, following family rules, coping with stress, avoiding smoking, alcohol, drugs and risky situations  
**Ages 15 to 17:** Interpersonal relationships, protection against pregnancy and sexually transmitted infections, driving responsibly, resisting peer pressure  
**Ages 18 to 21:** Changing friendships, sexual identity and orientation, responsibility for attending school or work

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**POP QUIZ: CARING FOR KIDS**

How much do you know about the care your growing kids need? Answer these questions to find out!

1. Call the doctor if your child has a temperature higher than 102.2°F.  
   _True_  _False_

2. It’s not important for teenagers to see the doctor.  
   _True_  _False_

3. A sports physical is different from a regular checkup.  
   _True_  _False_

**Answers**

1. **True.** For an infant younger than 3 months, call the doctor if he or she has a rectal temperature of 100.4°F or higher.  
2. **False.** It’s very important. Vaccines and booster shots need to happen at specific ages. Hearing and vision are checked. The doctor will also talk about drinking and drugs and the consequences of sex.  
3. **True.** The sports physical looks only for athletic issues pertaining to a specific sport. The regular checkup encompasses a child’s overall well-being.
Fitness Trends to Try

The results are in! The American College of Sports Medicine recently surveyed more than 1,800 fitness professionals to identify the hottest fitness trends for 2017. Get the inside scoop on the top vote-getters and whether you should incorporate them into your routine:

**Wearable Technology**
*Ranking: #1*

**What is it?** Wearable technology involves devices such as activity trackers, smart watches, heart-rate monitors, GPS tracking devices and smart eyeglasses. Depending on the device, it can track your fitness activities, sleep and location using GPS. Brands on the market include Garmin, Jawbone, Fitbit and the Apple Watch.

**Should I try it?** Maybe. The offerings are quite new and expensive at this point. (See sidebar for low-tech alternatives.)

**Body-Weight Training/Strength Training**
*Ranking: #2 and #5, respectively*

**What is it?** Strength training uses weights to improve or maintain strength. Body-weight training is a type of strength training that uses a person’s own body weight exclusively. Common examples are push-ups, pull-ups, abdominal crunches and leg squats. It requires no special equipment (or minimal equipment, such as a chair), so it can be done almost anywhere.

**Should I try it?** Yes, absolutely. Strength training is essential for bone health and maintaining muscle mass as you age.

**Low-Tech Options for Tracking Your Exercise**

You don’t really need high-tech gear—or its high price tag—to stay on top of exercise goals. You just need a way to record your accomplishments and track them over time.

A simple pedometer counts your steps and is a great way to get motivated to move. Work up to taking 10,000 steps a day. Pencil and paper work just fine to record your progress, or you can download one of the many printable exercise trackers available for free online.

**High-Intensity Interval Training**
*Ranking: #3*

**What is it?** Short periods of intense anaerobic exercise interspersed with quick recovery periods (for example, 30 seconds of hard sprinting alternated with 15 seconds of jogging). It’s an attractive option for those with limited time, because sessions typically take less than 30 minutes to perform.

**Should I try it?** Maybe, with caution. Some health and fitness professionals have concerns about high injury rates. Consider replacing high-intensity intervals with moderate-intensity ones.

**Certified Fitness Professionals**
*Ranking: #4*

**What is it?** Working with a qualified expert never goes out of style. While there are no laws regulating the certification of fitness professionals, various groups have developed standards. Search the United States Registry of Exercise Professionals at usreps.org.

**Should I try it?** Training sessions aren’t cheap, but working with someone who has demonstrated expertise may make you feel more comfortable.
I’ve never heard of COPD. What is it?
COPD stands for chronic obstructive pulmonary disease. However, it’s not just one disease—it’s a group of them, which includes emphysema and chronic bronchitis. Common symptoms are shortness of breath, chronic cough, producing a lot of mucus and wheezing. Most cases are caused by smoking.

How do I know if I have it?
To confirm a diagnosis of COPD, your doctor will ask about your health history and perform a number of tests, including a breathing test called spirometry. During the test, you'll blow into a mouthpiece connected to a machine that measures how well your lungs work. You may also have a chest X-ray and bloodwork.

Is it treatable?
COPD cannot be cured, but medicines can help you live a full life. Taking them at the right time is critical. Find a system that works for you, whether it’s a medicine chart, pillbox, calendar or phone alarm. Timing your medicines with habits, such as before or after eating certain meals or brushing your teeth, may make it easier to remember to take them.

Other than medicines, does anything else help?
People with COPD can feel better by quitting smoking, keeping a clean house, avoiding dust, fumes and smoke, and visiting a doctor regularly. Always tell your doctor how you feel in detail so he or she knows how well your treatment plan is working.

Finding Support
Your doctor’s office isn’t the only place to find support for dealing with COPD. Talking with others who share your condition helps a lot, too. Try out Better Breathers Club, an in-person support group for people with COPD and other lung conditions, as well as their caregivers. (Find locations near you at lung.org/support-and-community/better-breathers-club.) If you prefer connecting online, the American Lung Association runs a group at inspire.com called “Living with COPD.”

WHAT IS UTILIZATION MANAGEMENT?
Health insurers like MetroPlus use medical guidelines to make sure you are getting the right care in the right setting. We also consider what's covered under your plan. We never reward reviewers for denying coverage for care. You can call the UM department at 1.877.475.3795 (TTY users: 711) from 8 a.m. to 5 p.m. Monday through Friday. After hours, on weekends or on holidays, call 1.800.442.2560.
BBQ Chicken Salad
Serves 5

INGREDIENTS
Cooking spray
1 pound boneless, skinless chicken breasts
¼ cup barbecue sauce
4 pieces turkey bacon, cooked crisp and chopped
2 carrots, shredded
1 bag (16 ounces) chopped romaine lettuce
½ medium red onion (or 1 small), diced small
1 large cucumber, diced small
1 large tomato, seeded and diced small
½ teaspoon salt (optional)
½ teaspoon ground black pepper
½ cup fat-free poppy seed dressing

INSTRUCTIONS
1. Preheat oven to 375°F.
2. Coat a baking sheet with cooking spray. Line the sheet with chicken breasts and brush each generously with barbecue sauce. Bake for 30 minutes or until internal temperature of chicken is 165°F. Set aside to cool.
3. In a large salad bowl, toss together bacon, carrots, lettuce, onion, cucumber, tomato, salt (optional) and pepper.
4. Once chicken is cool, chop into small pieces and toss with salad ingredients.
5. Pour dressing over salad and toss gently to coat.

NUTRITION FACTS
Serving size: 2 cups; calories, 210; carbohydrates, 22 g; protein, 21 g; fat, 4.5 g; saturated fat, 1.2 g; sugars, 13 g; dietary fiber, 4 g; cholesterol, 55 mg; sodium, 360 mg; potassium, 715 mg

Source: American Diabetes Association

Try for 10
Summer doesn’t have to mean hot dogs and hamburgers—with gardens in season, there are plenty of fresh alternatives. The traditional advice has been to eat at least five servings of fruits and vegetables each day. However, recent research published in the International Journal of Epidemiology suggests that 10 may be an even better target. That amount, British researchers found, most lowered the risk of heart attack, stroke, cancer and early death in various studies involving nearly 2 million people.

Increase your servings of produce with these tricks:
- Toss a handful of chopped fruit on your morning cereal or yogurt.
- Add sliced or shredded veggies to sandwiches.
- Opt for bagged salad greens with veggies already added.
- Choose snacks like applesauce, carrots or oranges.
- Make salads a main course instead of a side. To make them filling, top greens with lean meats and plentiful veggies. To start, try this BBQ chicken salad recipe.

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