

Welcome

to

MPG



MONMOUTH PEDIATRIC GROUP

272 Broad Street
Red Bank, New Jersey 07701
Telephone: 732-741-0456
Fax: 732-219-9477

3350 Highway 138
Suite 116
Wall, New Jersey 07719
Telephone: 732-681-0300
Fax: 732-681-6939

Kenneth A. Chazen, MD, FAAP
Theresa A. Paladino, DO, FAAP

Jo-Ann Jordan, MD, FAAP
Julie Isaacson, MD, FAAP

Poison Control	1-800-222-1222
Child Abuse Hotline	1-800-792-8610
Parents Anonymous	1-800-843-5437
Drug Abuse	1-800-225-0196

CPC MENTAL HEALTH SERVICES

(Children's Psychiatric Center)

Main Number	732-842-2000
24 Hour Emergency Line	732-219-5325
Monmouth Medical Center	732-222-5200
Riverview Medical Center	732-741-2700
Jersey Shore University Medical Center ...	732-775-5570

CPR, First Aid Classes:

Jersey Shore University Medical Center ...	732-775-5570
Red Cross	1-800-435-7669
First Aid Squad	732-530-2700

Names and Telephone Numbers of Pharmacies:

Regular Pharmacy _____

Also _____

for late nights and weekends.

INDEX

Introduction	2
Child and Adolescent Psychologist	2
Office Visits	2
Office Hours	3
Hospital Information	4
Appointments	4
Telephone Calls	5
Telephone Prescriptions	6
Your Child's Records	7
Business Matters	8
Newborn Instructions	9
Appointments	11
General Information	11
Well Checkups and Immunizations	13
School Aged Children	14
Dental Care	14
Special Problems	16
Office Problems	16
Recommended Reading	17

WELCOME TO MONMOUTH PEDIATRIC GROUP

Our goal is to work together with you for your child's care. This booklet will help you learn about many medical and nonmedical aspects of our practice. Reading it carefully now, and again when you need specific information, may help to solve a problem or to answer a question you may have. If you need further information, please ask us.

We are associated in a group practice of Pediatrics, with our offices in Red Bank and Wall. We care for infants, children and adolescents from birth to age 18. Each of us is a Fellow of the American Academy of Pediatrics (F.A.A.P.) We are all Board Certified pediatricians.

CHILD AND ADOLESCENT PSYCHOLOGIST

We are very pleased to offer psychological services for infants, children, adolescents and their families. Dr. Julie Zakreski, a fully licensed, experienced, certified child psychologist, is available for brief telephone discussions of minor problems as well as for extended evaluation and treatment of individual and family problems. Services provided include: behavior modification for children with behavior problems, learning disability and developmental evaluations, and help for those with eating disorders, depression, anxiety, divorced families, child abuse, attention deficit hyperactivity disorder and many other situations.

If you feel you could benefit from a discussion with a child psychologist, please feel free to discuss your situation with your child's doctor. Also, please feel free to call Dr. Zakreski directly if you prefer. We encourage you to utilize these services in order to increase your child's and your family's happiness and fulfillment in life.

OFFICE VISITS

You may schedule appointments with the doctor of your choice according to availability. We think it's a good idea for you and your child to see and get to know all of the doctors. (It's like having several consultants in one office).

OFFICE HOURS

Our office in Red Bank is open every day except Christmas. Usual hours are Monday through Thursday, 8:30 AM to 7:00 PM; Friday 8:30 AM to 5:00 PM. Saturday and Sunday and all Holidays for several hours.

Our Wall office is open Monday 10:00 AM to 6:00 PM and Tuesday through Friday, 9:00 AM to 5:00 PM.

Please note that these days and hours may vary occasionally according to times that a doctor may be out of the office for hospital and community activities, continuing medical education courses, or vacation time.

Please call to verify evening hours as they may vary occasionally according to the doctors' schedules.

Regular checkups are scheduled Monday through Friday. Weekend and night hours must be reserved for newborn and sick children only.

If you need a morning appointment for a sick child, please call at 8:30 AM. Our answering service cannot make appointments.

Because of the shorter hours on weekends and holidays, it is important for you to try to call early in the day and to tell the receptionist if you wish your child to see the doctor that day. If you do not wish to bring your child to the office, the doctor will return your call as early as possible; please note that on a very busy day this may be done after the office has closed.

If your child needs to be seen outside of normal office hours, the doctor on call will make arrangements for you to go to the hospital emergency room. The doctor in the emergency room will evaluate your child and will call us if necessary. Please call if possible to discuss the problem before you bring your child to the emergency room; perhaps the situation can be handled without a visit to the hospital. If the visit is necessary, we may ask you to go to a specific hospital or to meet a particular doctor who can best help your child. Of course, in the case of a true emergency where time is critical you should take your child directly to the hospital by car or ambulance and request that we be called immediately.

HOSPITAL INFORMATION

We care for newborns at Riverview Medical Center in Red Bank, Monmouth Medical Center in Long Branch and Jersey Shore University Medical Center in Neptune. We admit children to Riverview Medical Center and Monmouth Medical Center. Intensive care for newborns and children is at Monmouth Medical Center and Jersey Shore University Medical Center.

If your child is in the hospital, you may speak with the doctors in your child's hospital room, as they make rounds, usually between 7:00 and 9:00 am. If you wish to speak to the doctor at other times, please call the Red Bank office. You are welcome to stay with your child 24 hours a day at the hospital; occasionally exceptions may be necessary when a child requires intensive care. You are welcome to call the hospital at any time, day or night, for information about how your child is progressing.

APPOINTMENTS

Please call for an appointment before bringing your child to the office. Patients who "walk in" without an appointment cause unfair disruption of the office schedule for others; they cannot be seen until all patients with appointments have been cared for, unless a true emergency is present. An additional charge will apply for patients seen on a walk-in basis.

We adhere to our appointment schedule as closely as possible. By the end of the morning, the end of the afternoon, and at times during night or weekend hours when only one doctor is in the office, delays are sometimes unavoidable. Unexpected emergencies, urgent cases who must be worked into a full schedule, children with complicated physical and psychological problems, families who bring two or more sick children when an appointment was reserved for only one child, and a host of other events may occur and unfortunately increase waiting time. We regret that these occasions occur and ask your patience when necessary. Please inform us if your waiting time has been excessive so that we may try to prevent future occurrences.

If you will be late for an appointment, or if you cannot keep an appointment, please call to inform us so that another patient can be seen. A charge for missed appointments not previously cancelled may be made. If appointments are missed repeatedly (three or more times) we will ask you to transfer your child's health records to another physician.

If you suspect an ear infection, strep throat, dehydration, asthma, pneumonia, or any other condition for which antibiotics or other special therapy may be necessary, please arrange an appointment for your child as soon as possible. Timely treatment will enable your child to recover more quickly.

When the doctor asks you to bring your child back for a recheck of your child's condition, please make the recheck appointment as you leave the office. It is generally best to see the same doctor for the recheck so that a more accurate assessment of your child's progress can be made.

TELEPHONE CALLS

One of the doctors is always available at night and on weekends and holidays to help if your child has an emergency. You may reach the doctor on call at any time by calling the office.

We do not expect calls about routine matters when the office is closed. These calls delay response to emergencies and may not be returned. Charges for non-emergency professional services will be billed to your account.

If you use Caller ID Block, it must be turned off to enable the doctor on call to return your message. Caller ID Block will create a needless delay in our ability to contact you when you need us most. Please contact your telephone company for instructions.

We have no formal "calling hour". Instead, for problems and questions of a non-urgent nature, please try to call during office hours. Please be prepared to give your child's name, age, and a brief statement of the problem, including symptoms, duration, and medication used. If a child is ill, please take the child's temperature before calling.

If you wish the doctor to see your child, simply ask for an appointment. Time is wasted if we must call you back to "discuss" an obviously sick child who needs to be examined.

We will return emergency calls immediately. We usually return other, less urgent, calls in late morning or late afternoon hours after patients in the office have been cared for, when we have more time to discuss your child's problem with you. Please have a pencil and paper near your telephone for use when the doctor returns your call so that you may note medication doses and special instructions.

Please try to use your phone only briefly while awaiting the doctor's return call. If you need to go out while awaiting the doctor's return call, we would appreciate your letting us know when you'll be back home so that the doctor can call you.

Our phone lines are often very busy early in the morning and again in the afternoon hours. If you are calling about a routine appointment, billing matter, or other problem of nonurgent nature, you will be able to reach us most easily by making your call in the late morning or mid to late afternoon hours. We appreciate your helping us to keep our phone lines open at busy times so that sick children can be treated as soon as possible.

TELEPHONE PRESCRIPTIONS

If you are calling to obtain a prescription (new or refill), please be prepared to give us the telephone number of your pharmacy. If a prescription is needed on Sunday or a holiday, please be able to give us the number of a pharmacy which is open **at the time of your call**. Please allow several hours for the prescription to be phoned to your pharmacy, as the nurse may be able to do this only after checking with the doctor regarding your child's condition and after the patients in the office have been cared for. Please call during office hours for prescriptions.

Please do not ask us to prescribe antibiotics over the telephone for a child who has not been examined or whose condition has changed since examination. An examination is necessary for proper evaluation and treatment of your child. It is important to be aware that antibiotics will not help a child with viral illness such as a cold or "flu" and may even worsen the child's condition if a side effect should occur. Please understand, also, that it is very difficult to evaluate or treat a rash "over the phone". If you wish your child with a rash or other possible contagious condition to see the doctor, please tell the receptionist at the time of the call. You will be asked to come in through a separate entrance directly to an examining room so that others are not exposed to your child's illness.

YOUR CHILD'S RECORDS

Please maintain and update your own copy of your child's immunization record during well child visits. If you need a copy of your child's immunization record, please call during office hours. We will be happy to fill out health forms for camp, school, and sports activities if your child has had a well checkup within the last year. Your child's doctor will sign them after reviewing your child's health record. Alternatively, you may bring the forms at the time of your child's checkup and they will be filled out and signed at the time of the visit. If you are requesting the forms other than at the time of a checkup, please enclose a self-addressed stamped envelope or arrange to pick up the forms at our office.

If you wish copies of your child's records sent to another physician for purposes of consultation or transfer of care, please inform us in writing. We will send records as quickly as possible; ordinarily this requires up to four weeks since the doctor must review your child's health records before they are sent. Of course, if immediate transfer of information is medically necessary this will be done. There is a charge for this service.

We do not accept patients who wish to return to our care after having transferred to another local physician because of dissatisfaction with our care. However, if a patient wishes to return after having transferred to a physician in another location because, for example, the family moved away and later returned to this area, we will be happy to care for the child again.

Please see "Office Problems", page 16, if you are considering a transfer to another physician's care because of a problem with the office or practice.

BILLING AND REFERRALS

You may call our billing office directly at 732-741-0456 Option 2. Please note that this line cannot be used to make appointments or to speak with the doctors; it is a line for billing and referrals only.

If you have a managed care insurance plan, in which we participate, your copay (if applicable) is due at the time services are rendered. You will be given a receipt for the copayment only. Failure to pay this may result in termination of service. If you have an insurance in which we do not participate, payment in full is expected at the time of service. Bills for doctors' care during hospitalization will be sent to you after your child has been discharged from the hospital. You can submit this to your insurance carrier and request payment directly to our office. We will then bill you for any remaining balance.

Please note that payment of professional fees is ultimately the direct responsibility of the patient's family, regardless of the amount covered by insurance.

If you are experiencing temporary financial difficulties, please let us know. We do not want you to feel that your child cannot receive needed health care because you are temporarily unable to pay. Please discuss your situation with our billing department so that your child can be cared for while perhaps a slower but regular payment arrangement can be worked out.

Please notify us promptly whenever you change your address or telephone number. This is especially important if you obtain an unlisted telephone number! If there is more than one telephone line at your home, please give us both numbers. Please inform us of the work telephone numbers of both parents. If a relative, neighbor, friend or sister has responsibility for your child at times, please inform us of those telephone numbers also.

MANAGED CARE REFERRALS

Referral forms may be obtained with physician approval by calling between 9 AM and 4 PM. Please allow 3-4 working days to prepare a non-emergency referral. You should always have your referral in hand when seeing a specialist. If not, you may be responsible for the cost of the visit. We cannot backdate referrals for any reason. Please do not call the referral department for a referral unless it has been approved by your physician.

NEWBORNS

FEEDING

If you are bottlefeeding, you will receive a package of iron-fortified formula at the time of discharge. Formula is available as powder, concentrated, or ready to feed. Please read the label instructions carefully. Most bottlefed babies will want to be fed every 3 to 4 hours.

If you are nursing, supplementary bottles are not usually necessary. Plan to nurse your baby every two to three hours during the daytime (you may wake the baby if necessary) and again when baby wakes at night. Babies who are allowed to sleep all day are often wakeful at night. Most babies have a fussy, hungry, wakeful period in the evening, before they settle down for the night. Frequent or even almost constant nursing in the evening is normal and does not indicate an insufficient milk supply, but actually acts to stimulate more milk production on the following day. Try to nurse on both sides at every feeding. Your baby will receive the most milk if you switch sides every 10 to 15 minutes of nursing. The more frequently you nurse your baby, the more milk you will produce. It is best to delay the use of a bottle of formula until after your milk supply is well established, when your baby is a few weeks of age. Babies rarely need extra water, as breastmilk and formula contain sufficient amounts for baby's needs. Please do not use honey until your baby is over one year old.

Most "gassiness" in newborn babies is due to swallowed air and usually does not result from the mother's diet or the particular formula used. It can often be helpful by frequent burping and by using an infant seat to position your baby semi-upright for a few minutes after feedings, so that air gulped during the feeding may come up. If your baby seems extremely "colicky", please call us.

Your baby may need a supplement or vitamins or fluoride drops. Please ask about this at the time of your baby's first office visit.

Please do not give your baby "solid food" without discussing it with us first. Breastmilk and baby formula are nutritionally adequate for at least the first several months of life, and are far better for the young baby than cereal, fruit and other foods. Most babies will "sleep through the night" by about three months of age, when they are developmentally mature enough to do so, and usually do not need other foods to accomplish this.

BATHING

You may use any non-perfumed soap or baby bath with water. Sponge bathe until the cord and circumcision are healed; after that, a submersion bath may be done if you prefer. Lotions, vaselines, or baby oil may be used sparingly in creases and areas of dry skin.

CORD CARE

If "blue dye" was used to protect your baby's cord in the hospital, the cord will take approximately two to three weeks to fall off. The base of the cord may be cleaned with alcohol on a cotton ball or Q Tip at each diaper change. Please keep the cord area dry by folding down the front of the diaper until the umbilical area is well healed. Occasionally a few drops of blood will appear as the cord is about to fall off. This is not dangerous. Please notify us if the umbilical area or cord develops a foul odor, a discharge, redness, or other signs of infection.

CARE OF THE DIAPER AREA

The diaper area should be cleaned with soap and water, lotion or oil and dried thoroughly with each diaper change. Powder is unnecessary and even dangerous if a baby should inhale it. If you use disposable diapers, avoid the kind with tightly fitted leg opening as these may prevent air circulation and cause diaper rash. Similarly, rubber or plastic pants keep the area too moist and should not be used except for "social occasions".

Most diaper rashes are the result of simple irritation and respond well to cleansing with plain water, periods of air drying (putting baby **on** a diaper but not in one), and use a healing ointment such as Desitin. **A blistering or peeling diaper rash**, particularly in a newborn, may indicate infection. Please notify us promptly if your baby should develop such a rash, or if your baby's diaper rash does not respond to the treatment outlined above.

CARE OF THE CIRCUMCISION

If you wish your baby boy to be circumcised, this can be done by your obstetrician. Keep the circumcision site covered with vaseline on a gauze pad and reapply freshly with each diaper change.

APPOINTMENTS

Please call the office upon discharge to make an appointment for your baby's first office visit. The first appointment should be about two days after discharge. If you are concerned about your baby's health or progress in any way, please let us know so that we may discuss the problem with you by telephone or perhaps schedule an earlier office visit.

You may request an appointment with any of the doctors in the group.

GENERAL INFORMATION

All babies will occasionally cough, sneeze, hiccup and spit up. A cool mist vaporizer, particularly the cleaner and more effective "ultrasonic" humidifier type, will often lessen the cough, sneeze, and runny nose during the winter months. The humidifier should be cleaned at least every other day with soap and water, and should be rinsed with a solution of one tablespoon of vinegar in one quart of water to prevent mineral buildup or as directed on the unit's instruction sheet. Diluted bleach will clean off molds. (Do not mix bleach and vinegar.)

Spitting up is normal for many babies and can be minimized by thorough burping. If forceful or repeated vomiting occurs, please call us.

Each baby has a bowel pattern of its own. Many newborns have a stool with each feeding, particularly if breastfed. Later this pattern may change to a daily stool, or even a soft stool once or twice a week. Your baby's stool should not be watery or explosive; neither should they be hard and difficult to pass. Please call us if your baby seems to be having difficulty with bowel movements.

Your baby's sleeping pattern will change as your baby grows and matures. Babies' sleep requirements vary a great deal with the individual needs of each baby. Some babies seem to become tense after a day's activity and seem to need to cry for a few minutes before they go to sleep; a brief period of such crying will not harm your baby. However, we do not feel that your baby should be left to cry for prolonged periods.

Babies' temperatures will frequently be elevated when they are over dressed. Dress the baby as you would feel comfortable yourself. If the newborn's temperature goes over 100.4° F rectally, or if the baby shows a change in feeding pattern, alertness, irritability, or other behavior which worries you, please call, as this could indicate the presence of infection. If a young baby has fever or other signs of illness, we would like you to call us **immediately** — do not wait for office hours!

It is sometimes necessary to take a baby's temperature with a rectal thermometer. This is the only accurate method. You can learn to do this while you are still in the hospital with your new baby. Bring your own rectal thermometer, and ask the nurse to show you how to take your baby's temperature. You should then do it while the nurse watches in order to give yourself the confidence that you are doing it correctly and safely for the baby. If you feel unsure of yourself, please ask any of our nurses to teach you while you are in the office for your baby's checkup.

VISITING

Please keep your baby at home for the first few weeks. Your baby can catch a "cold" or other infection very easily and visitors should be kept to a minimum. Please try to keep your baby away from crowded places (stores, religious services, large gatherings) for the first several months of life, particularly during the winter "flu season".

HELPFUL ITEMS TO HAVE AT HOME

Cool mist humidifier — portable — for congestion and coughs
Rectal thermometer
Nasal aspirator
Normal saline (salt water) nose drops
Baby bath or mild soap
Baby shampoo
Q Tips (for umbilical cord, not the ears)
Cotton balls
Vaseline
Fingernail clippers, small fingernail scissors or emery board
Acetaminophen drops (for fever or pain — call before using for a young baby).

TRAVELING

Whenever your baby travels by car, he or she should be securely restrained in an approved carseat. It is not safe to travel by car while holding an infant or child in your arms.

WELL CHECKUPS AND IMMUNIZATIONS

We should see your baby for a well checkup in the first few days of life and then every six to eight weeks for the remainder of the first year. At each well visit, we will measure your baby's height and weight, examine your baby, evaluate your baby's developmental progress, and discuss any questions and concerns you may have.

During the first year, your baby will be immunized against polio, pneumococcus, diphtheria, whooping cough, tetanus, hepatitis B, and Hemophilus Influenza Type B (HIB). During your baby's second year, a well checkup will be done every three months; during this time your baby will be immunized against the mumps, measles, and rubella viruses, (MMR), chickenpox and will also receive boosters for pneumococcus, diphtheria, whooping cough, tetanus and HIB. Your child may then visit once yearly for health checkups after that time. MMR, DPT and polio boosters are given again at the "kindergarten" checkup. Each child will receive boosters for Tetanus and Diphtheria in adolescence. If you have any questions about your child's checkups or immunizations we will be happy to discuss them with you at the time of the visit.

Please plan to be present for your child's office visits. We understand that another person such as a sitter may occasionally be needed to bring a child for a sick visit, but we feel it is important to interact with you, the parent, during your child's well visits — even if your "child" is an independent high school or near-college student. Also, a responsible adult must be present for procedures such as blood tests, and a parent must sign consent before any child receives an immunization.

We closely adhere to the immunization schedule as suggested by the American Academy of Pediatrics. While some flexibility exists, patients who refuse immunization without acceptable medical reasons will be asked to seek medical care elsewhere.

Information about the most common pediatric immunizations will be given to you in the office at the time of your visit.

If your child has certain conditions such as those affecting the heart, lungs (asthma, cystic fibrosis), diabetes, or an immune deficiency, additional immunizations may be recommended. If your child has been exposed to hepatitis, specific vaccines may be indicated. Please ask us if you have questions about any immunizations.

SCHOOL-AGED CHILDREN

Many schools, camps, sports, and other activities require a medical form to be completed before participation begins. If your child has had a health maintenance examination within the past year, we will be glad to fill out any forms needed. If your child's well checkup occurred more than a year ago, please schedule a health maintenance visit and we will fill out the form at that time.

The State of New Jersey requires each student who participates in a school sport to have a physical examination prior to beginning the sport. In some districts, the school physician performs a brief examination to fulfill this requirement. If you wish your child's personal doctor to perform this examination, you may schedule a well checkup within 60 days of the time the sport begins. Please remember that most insurance companies pay for one yearly physical examination.

If you mail us forms for school, camp, sports, etc. please allow about two weeks for completion. The doctor must review your child's medical history before signing the form. We appreciate your including a self-addressed, stamped envelope so that we may return your form as quickly as possible.

DENTAL CARE

Regular preventative dental care should be started by the time your child reaches three years of age, when most children are old enough to cooperate. Regular toothbrushing by the parents should begin when your baby's first teeth appear. A soft toothbrush, washcloth, or gauze pad can be used to wipe your baby's teeth several times a day to prevent plaque formation and to accustom your baby to having his or her teeth cleaned. Please do not allow your baby to take a bottle of milk or juice (even diluted) to bed, as this will cause even young babies' teeth to decay.

If you would like us to recommend a dentist in your area who is experienced in children's dental care, please discuss this with us at your child's checkup.

An intake of fluoride adequate to protect your child's developing teeth against excessive decay is recommended by both the American Dental Association and the American Academy of Pediatrics. Your child's fluoride intake should begin in the early months of life and should continue until the teenage years. Please discuss with us at your child's well checkup visit if a fluoride supplement is needed. Well water in Monmouth and Ocean Counties has little, if any, naturally occurring fluoride. Similarly, bottled water and mineral water usually have negligible fluoride content.

The American Water Company, which provides fluoridated water, serves the following communities:

Allenhurst	Holmdel (part)	Ocean Twsp.
Allentown	Interlaken	Oceanport
Asbury Park	Little Silver	Red Bank (part)
Bradley Beach	Loch Arbour	River Plaza
Deal	Long Branch	Rumson
Eatontown	Middletown	Sea Bright
Fair Haven	Monmouth Beach	Shrewsbury
Freehold Twsp.	Neptune City	Tinton Falls
Highlands	Neptune Twsp.	West Long Branch
	Ocean Grove	

If your community is not noted on the list above then your water may not be fluoridated and your child may require a daily fluoride supplement. (Please ask us for a prescription at your child's checkup).

If you're not sure if your water has fluoride, call your water company or your town's health department.

Parents of infants, please note; since very little fluoride passes through breastmilk to the baby, nursing babies do require a fluoride supplement beginning at six months of age. If you are using "ready-to-feed" milk-based formula, or if your water does not contain fluoride, please ask us for a fluoride prescription at you baby's well checkup. Formula fed infants will not need extra fluoride if they are fed powdered or concentrated formula which is reconstituted with fluoridated water.

CHILDREN WITH SPECIAL PROBLEMS

If your child has a special problem, chronic illness, or drug allergy, you may want to obtain a Medic Alert tag for your child to wear. Information available from:

Medic Alert Foundation
P.O. Box 1009
Turlock, California 95381
(209) 668-3333

There are many organizations which maintain parental support and information services; some have local chapters and meet regularly; some offer medication discounts to members. If your child has a condition such as arthritis, a seizure disorder, diabetes, etc., please ask us for information and support groups which could be helpful to you and your child.

OFFICE PROBLEMS

At times in an active pediatric practice there may be a problem with a particular aspect of the office workings — such things as appointments, the telephone, insurance, fees, or difficulty with a particular staff member.

If you encounter such a problem, please let us know. It is only through your input that we are able to correct problems and improve our service to you. Over the years, your suggestions have resulted in a great deal of corrective change, and we would like to continue.

If you would like to bring a particular problem to our attention, please discuss it with one of the doctors, or you may call and ask to speak with our office manager. We welcome your suggestions and appreciate your help in improving our services.

We are looking forward to a long, happy and productive association with you to ensure your child's optimum health care.

Thank you for your help.

RECOMMENDED READING

American Academy of Pediatrics - *Caring For Your Baby and Child*
American Academy of Pediatrics - *Caring For Your School Age Child*
American Academy of Pediatrics - *Caring For Your Adolescent*

Barton Schmitt, MD - *Your Child's Health* - Excellent on both health and on development and behavior.

Benjamin Spock, MD - *Baby and Child Care*

T. Berry Brazelton, MD - *Infants and Mothers: Differences in Development*

La Lech League - *The Womanly Art of Breastfeeding*

Karen Pryor, PH.D. - *Nursing Your Baby*

Elger, MD and Olds - *The Complete Book of Breastfeeding*

Eisenberg, et. al - *What to Expect the First Year*

Selma Fraiberg - *The Magic Years*

(If you loan this one out, you'll never get it back - a delightfully humorous and empathetic guide to the inner workings of the infant and preschooler.)

Haim Ginnett, Ph.D. - *Between Parent and Child, Between Parent and Teenager*
(Easily readable classics on "active listening" to make family communication more fun and productive.)

Thomas Gordon, Ed.D. - *Parent Effectiveness Training*

(What's worth fighting about and what's not. Ways to resolve family problems so all can win.)

Parents Magazine - (An informative, practical, and effective monthly publication with something to offer parents of infants, children, and adolescents. Very strong on child development and behavior.)

Rudolph Dreikurs, MD - *Children The Challenge*

John Brooks, MD - *No More Diapers*

(A sensible approach to toilet training.)

Ferber, MD - *Solve Your Child's Sleep Problem*

(Very helpful for infants, toddlers, and older children, too.)

Cuthbertson & Schevil - *Helping Your Child Sleep Through the Night*

Frances L. Ilig, MD - *Child Behavior*

Lawrence Balter, Ph.D. - *Dr. Balter's Child Sense*

(Understanding and handling common behavior problems.)

Stephen Garber, Ph.D., Marianne Garber, Ph.D., Robyn Spizman - *Good Behavior*

(Practical solutions to common behavior and development issues.)

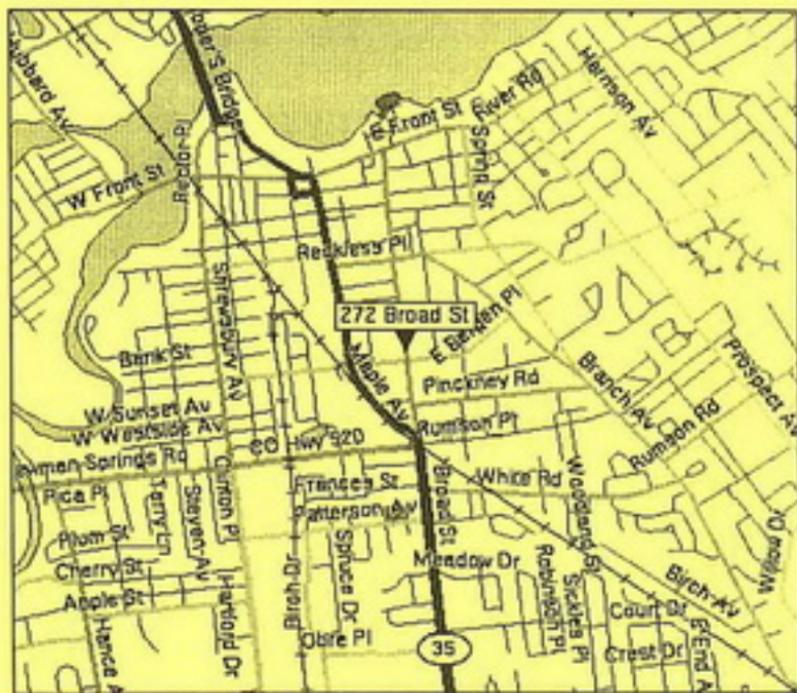
VOICE MAIL OPTIONS

- 8 EMERGENCY**
- 1 APPOINTMENT**
- 2 REFERRAL & BILLING**
- 3 PHYSICIAN, PHARMACY &
HOSPITAL**
- 4 MEDICAL RECORDS &
TRANSFERS**
- 5 DR. ZAKRESKI**
- 6 MEDICAL QUESTIONS &
REFILLS**
- 7 OFFICE MANAGER**

DIRECTIONS

To Red Bank Office:

Our office is located on Broad Street in Red Bank, between the shopping district and the area where Newman Springs Road and the railroad crossing intersect Route 35. The parking area and the entrance are located in the rear of the building.



To Wall Office:

FROM

Route 18: Exit 6B, 1/2 Mile on Hwy 138 West.

We are right before the Allenwood Road light.

FROM

Garden State Parkway: Exit 98. 1/4 Mile on Hwy 138 East.

Take the Allenwood Road jug-handle. (We are across the road).

