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# ANSWERS TO QUESTIONS MOST OFTEN ASKED BY NEW FAMILIES

## TELL ME ABOUT YOUR OFFICE.

I started my own private practice in July 1989 after finishing my residency one month earlier. After sharing space with another pediatrician for two years, I "built-out" a new office space and moved my practice in July, 1991. Doctor Susan Schreiber moved her practice into that office in May, 1994 and in January, 2001 we moved into a new office, maintaining separate pediatric practices while sharing the office facilities. Doctor Lisa Hauselman began working with us in June, 2006 and Doctor Nicole Nourmand in July, 2010. In March, 2011 the four of us formed Premier Pediatrics and moved to our current location. Doctor Lauren Meepos joined our group in August, 2021. Our office manager is Alma Ordaz.

We do our best to separate healthy and sick children in the nine examination rooms and have a back entrance to the office if needed for contagious patients. Regular office hours are 9-5 Monday-Friday and the office is open Saturday mornings for same-day sick patients. I am in the office Tuesdays through Fridays. Doctors Schreiber, Hauselman, Nourmand, and Meepos are available to see patients for me on Mondays.

## TELL ME ABOUT YOURSELF.

I grew up in the San Fernando Valley, received a Bachelor of Arts degree from Pomona College (in Claremont, CA) in 1982, and my Medical Degree from the University of Texas Medical Branch in Galveston (Texas) in 1986. I did my pediatric internship and residency at Cedars-Sinai Medical Center from 1986-1989 and started in private practice in July, 1989. I am married and have two daughters, born in November, 1992 and July, 1994, and a son born in February, 2009.

## WHAT DO ALL THE INITIALS AFTER YOUR NAME REPRESENT?

M.D. stands for "Medical Doctor" and means that I graduated from medical school. F.A.A.P. stands for "Fellow of the American Academy of Pediatrics" and means that I was elected to and am a member of this important organization. "Diplomate of the American Board of Pediatrics" means that I am Board Certified in Pediatrics.

## AT WHICH HOSPITALS DO YOU HAVE ADMITTING PRIVILEGES?

Cedars-Sinai Medical Center. If you will be delivering at another hospital your obstetrician can assign a pediatrician to see the baby in the hospital then I can see the baby in the office after discharge.

## WHEN DO YOU FIRST SEE A BABY IN THE HOSPITAL?

Normally, the morning after the delivery (always within 24 hours). The newborn nursery at Cedars automatically calls the office so you don't have to worry about notifying us after the baby is born.

## WHEN DO YOU NORMALLY SEE A BABY AFTER DISCHARGE?

The baby's overall health will determine when your baby will first be seen in the office. Some variables are: how long the baby was in the hospital, whether he/she is breast or bottle feeding, how well the feeding seems to be progressing, and how often you are seeing pee & poop (once you have a baby you can - and will - use those words in polite conversation). We'll be in phone contact during those first days to decide whether it will be within a few days or can wait a bit longer. Some new parents arrange for a home visit by a certified lactation consultant (many insurance companies will cover this as a reimbursable expense when medically indicated).

## WHAT IS THE SCHEDULE AFTER THAT?

Again it depends on the baby's general health, level of parental concern, and insurance coverage for check-ups. Generally, the schedule will be at age 1, 2, 3, 4, 6, 8, 10, 12, 15, 18, 24, 30, and 36 months, then yearly. This may be modified to more or less frequent visits depending on other factors. Vaccinations and laboratory tests are done in accordance with American Academy of Pediatrics guidelines. The first vaccines given in the office are started at 2 months.

## WHAT IF THE BABY IS SICK?

You can always call to schedule an appointment during office hours and we make every effort to have patients seen the same day in the event of an illness.

## HOW ABOUT NIGHTS AND WEEKENDS?

Doctors Hauselman, Nourmand, Meepos, and I alternate weeknight and weekend phone coverage. Our voicemail system allows you to leave a message; we are then paged immediately and return the call as soon as possible. From 10:00 pm to 7:00 am phone calls are first triaged by a phone advice service staffed by pediatric nurses and we are notified if a call involves an emergency room visit or hospitalization. In addition to handling all the phone calls, the on-call doctor sees all office and hospitalized patients on weekends. The office is open Saturday mornings from 9:00-1:00, but when the office is closed on weekends or weeknights, if an illness cannot wait until regular office hours it may be necessary to have the child seen in an urgent care center or the emergency room of a nearby hospital.

## CAN I EMAIL THE OFFICE?

Absolutely. We have a patient portal that provides secure email communication and the ability to send and receive documents.

## WHO RETURNS PORTAL MESSAGES AND TELEPHONE CALLS DURING THE DAY?

Portal messages regarding urgent medical matters receive a response during office hours. Routine phone questions which do not require detailed answers are first fielded by the back office staff. Questions regarding significant illnesses or problems are, of course, answered by the physician. Non-emergency calls are returned throughout the day when there is time between patients, over the lunch hour, or at the end of the day. Emergency calls are put through to a doctor immediately.

HOW DOES THE OFFICE HANDLE INSURANCE CLAIMS?

We are happy to file your insurance claim for you; we request that you pay any deductible or co-payment which we know at the time of the visit will not be paid by insurance; the insurance company will then pay the remainder. Fees are determined by the length and complexity of the visit and therefore may not always be known in advance. Generally, a "check-up" runs approximately $100.00 to $250.00 and a "sick visit" approximately $75.00 to $200.00. These numbers may rise or fall depending upon the type of visit and insurance allowance. Immunizations, lab work, and other ancillary services are not included in the office visit charge. We have found that our fees generally fall within most insurance companies' "reasonable and customary" range.

WHICH PREFERRED PROVIDER ORGANIZATIONS ARE YOU A MEMBER OF?

Our office is part of just about every major PPO plan, but some insurance companies have added "narrow networks" within their choice of plans and include a limited number of participating providers. If you are covered under an "unusual" insurance plan or are uncertain whether we are contracted please let us know. The services that are covered depend upon your plan and policy benefits (your insurance carrier can provide more details if needed). We are not affiliated with any HMO panels.

WHAT IS YOUR FEELING ABOUT BREAST FEEDING?

I'm definitely an advocate but not an extremist. Nursing is best when possible but formula is an acceptable alternative when nursing is not an option. I encourage consultation with a certified lactation consultant early on when a nursing mother is having difficulties.

WHAT ABOUT CIRCUMCISION?

This is a personal choice to be made by the parents. There is some evidence that there are potential medical benefits, but not enough to say that it should be done purely for medical reasons. There are enough uncircumcised boys that it also should not be done purely for social reasons. The best reasons are for religious purposes or to look like dad. Circumcisions are done by an obstetrician, mohel, or urologist.

HOW WOULD YOU DESCRIBE YOUR GENERAL MEDICAL APPROACH, ESPECIALLY REGARDING ANTIBIOTICS?

Middle of the road. Mild illnesses (such as headcolds) will get better on their own and the goal is purely to make your child comfortable. Some illnesses, such as ear or sinus infections, are often due to a bacterial infection and therefore often (but not always) require an antibiotic. It's been shown that minor bacterial infections may often resolve without an antibiotic. I think it is important to discuss the different treatment options available and the risks and benefits of treating versus observing an illness. All children and all families are different and an approach which might be correct for one child might not be for another.

DOSE YOUR OFFICE HAVE AN ADMINISTRATIVE FEE?

Yes, as does almost every other pediatric practices in the area. This fee helps to cover the cost of providing the many administrative services not paid for by insurance and has enabled us to continue participating as contracted doctors with most major PPO insurance plans. Our office staff will provide you with additional information.

WHAT ARE YOUR VIEWS ON VACCINATION?

I believe that all children should be protected against all preventable infectious diseases. Administering needed immunizations according to the American Academy of Pediatrics/Center for Disease Control recommended schedule is the best way to achieve this.

There are several myths and many misconceptions regarding vaccines. Numerous studies have demonstrated the safety of all currently recommended vaccines as well as debunked the myth that there's an association with autism (the journal article that originally stated this was retracted when it was discovered that it was based on a fraudulent study and the lead author had his medical license revoked).

Delaying recommended vaccines leaves young infants and children susceptible to potentially life-threatening diseases at ages when they're most vulnerable. "Splitting", which some mistakenly believe reduces side effects, has actually been shown to increase the minor side effects that sometimes occur in the day or two following vaccine administration.

Receiving several vaccines in one visit does not "overwhelm the immune system" (a newborn's immune system could easily respond to tens of thousands of vaccines at a time). But there's no doubt that it can be difficult for a parent to watch as their child receives multiple injections. So part of my job is to provide reassurance that it's the best way to provide optimal protection – and it's exactly what I did for all of my children.

Please feel free to ask any questions you may have on this important or any other topic.



Michael Sachs, M.D.