

# under the Rainbow

Spring 2018

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## A FAMILY AFFAIR

Rainbow specialists give families the resources they need to control Type 1 diabetes

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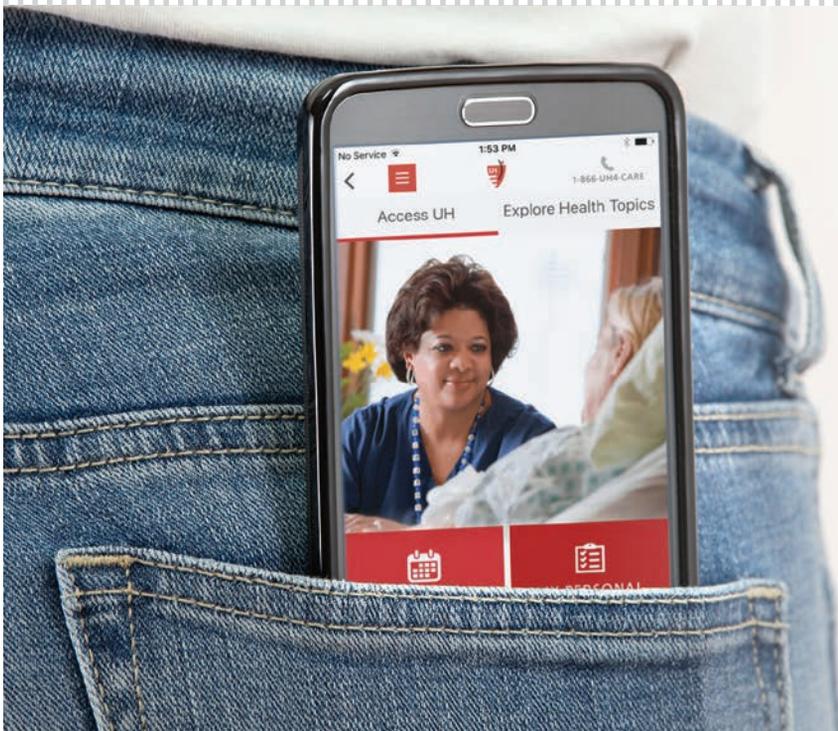
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## High blood sugar in pregnancy could affect baby's heart

Having high blood sugar in early pregnancy could put your baby at higher risk for heart defects, according to a new study published in the Journal of Pediatrics.

Having diabetes during pregnancy is a known risk for heart defects in newborns. But this study looked at the blood sugar levels of more than 19,000 pregnant women without diabetes. The researchers found **women with higher blood glucose readings early in their pregnancies were more likely to have a baby with a heart defect**. For every increase of 10 milligrams per deciliter in blood sugar levels, the risk increased by 8 percent.

Checking blood sugar early in pregnancy may help doctors screen for possible heart problems and lead to earlier treatment.



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# Plant power:

## Plant-based eating for the whole family



**MEET OUR EXPERT**  
**JANET KRAMER,**  
**MPH, RDN, LD**  
*Clinical Dietitian, UH Rainbow  
Babies & Children's Hospital*

There are many reasons to choose a plant-based diet: health, environmental concerns, cost savings. But whether you're thinking about transitioning your family to plant-based cuisine exclusively or just a few days a week, you might be wondering whether you need to have special considerations for your youngest eaters.

### Reaping the rewards

First of all, why would one consider a plant-based diet? Studies have found these benefits:

- Lowered risk for heart disease
- Reduction in need for certain medications
- Possible reversal of Type 2 diabetes
- Easier weight management

Avoiding meat can make sense. By doing so, you'll eliminate your exposure to the chemical compounds that result from cooking animal meat at high temperatures (which, among other things, can cause inflammation and contribute to chronic disease) and reduce the amount of dietary cholesterol you consume, which is associated with heart disease.

### What about kids?

"It's perfectly healthy for infants, toddlers and older children to eat a plant-based, vegetarian or vegan diet," says Janet Kramer, MPH, RDN, LD, a Clinical Dietitian at University Hospitals Rainbow Babies & Children's Hospital.

When it comes to milk-based drinks, babies should only drink breast milk or formula in their first year. There are vegan, soy formulas fortified with calcium and vitamins D and B-12 available – consult with your pediatrician about what is best for your baby. Cow's milk and other milk substitutes (such as hemp, almond or rice milk) don't have the nutrients little ones need early in their development like breast milk and formula do. If you're interested in adding a vegan option to your child's diet after the first year, ask your pediatrician at what age he or she recommends introducing a plant-based milk.

After 6 months, parents can begin adding supplementary foods, such as ground grains that are cooked very soft, mashed fruits and pureed vegetables. When introducing solid foods, consider things like tofu and mashed cooked beans.

### Play nice with nutrients

Kramer advises, "There are a handful of nutrients you'll want to pay special attention to when feeding kids primarily with plants."

**B-12:** This is the only nutrient that you can't get from plants. Not getting enough can lead to gastrointestinal issues and neurological disorders, so it's important to make sure your kids have a source of B-12. "Eggs and dairy work for vegetarians," says Kramer. "Vegans should look for B-12 vitamins or fortified foods like cereals and soy drinks."

**Iron:** Nuts, beans, vegetables and fortified grain products all contain iron. Iron is an important nutrient for infants, children and teens. Kramer cautions, "Make sure your selection is age-appropriate, though – nuts and chunky nut butters are a choking hazard for young children."

**Zinc:** Needed for growth and sexual maturation, zinc is another nutrient that's important for adolescents. It also supports the immune system and wound healing. "Zinc is found in legumes, soy foods and oats," says Kramer. "For older children, nuts and seeds are also good sources of zinc."

If you're interested in adopting a vegetarian or vegan diet for your children, get started by talking with a dietitian, nutritionist or pediatrician. •

### >> Kid-friendly, meat-free meals

Visit [Rainbow.org/VegMeals](http://Rainbow.org/VegMeals) for family-friendly vegetarian recipes, from Cheddar-Vegetable Surprise to Tortilla Pizzas to 3-Ingredient Pineapple Smoothies.



# Uproot your couch potatoes:

## Get your kids moving with microbursts of activity

**W**hen it comes to exercise excuses, “lack of time” is at the top of the list. But that’s not only for adults – kids are often juggling busy schedules as well. That means you’ll have to get creative to encourage your children to get and stay active. Sneak fitness into their days with “microbursts” of activity. Shorter sessions make it easier to get active and can help your kids get in the habit of moving all day. Kathryn Tegeder, MD, a UH Rainbow Babies & Children’s Pediatrician at Medina Pediatrics, adds, “Research shows that these kinds of short bursts of exercise add up. That makes for stronger hearts, healthier bodies and all-around happier kids.”

Try these six simple ideas to uproot your couch potatoes:

### 1 Turn TV time into active time.

When your kids watch television, have them turn commercial breaks into activity breaks. They can do jumping jacks, squats, push-ups or sit-ups – whatever gets them moving. Better yet, do the same as a family when you’re watching a show together.

### 2 Rev up the cleanup.

Messy house? No problem. Have your kids pick up and put things away as fast as they can (carefully, of course). Set a timer for five minutes and see how much they can get done during that time.

### 3 Ditch the car.

Instead of driving them, have your kids walk or bike to school at least one day a week. If your kids take the bus, suggest they walk or bike to a friend’s house instead.

### 4 Create a new tradition.

In the evening, take a walk around the block as a family. “You’ll be modeling the behavior you want your kids to embrace – and it’s a great way to catch up with your kids,” adds Dr. Tegeder.

### 5 Use the phone.

Older kids who have phones can stretch or do lunges or squats every time they get a text or phone call.

### 6 Try a Fitbit or other wearable fitness tracker.

“Simply wearing a tracker may encourage kids to accumulate more steps,” says Dr. Tegeder. “Have them shoot for 10,000 steps a day.” •



#### MEET OUR DOC

**KATHRYN  
TEGEDER, MD**

*Pediatrician, Medina Pediatrics  
Clinical Instructor, Case  
Western Reserve University  
School of Medicine*

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# 4 big myths about asthma



**MEET OUR DOC**  
**KRISTIE ROSS, MD**  
*Clinical Director, Pediatric Pulmonology and Allergy and Immunology, UH Rainbow Babies & Children's Hospital Associate Professor, Case Western Reserve University School of Medicine*

**A**sthma affects about 25 million people in the U.S. and it's the leading chronic disease in children. Asthma causes inflammation (swelling) in the airway, which leads to symptoms such as tightness in the chest, wheezing, trouble breathing and coughing.

“Although asthma is fairly common, there are many misconceptions about the disease, how it's treated and how it affects a person's day-to-day life,” says Kristie Ross, MD, Clinical Director of Pediatric Pulmonology and Allergy and Immunology at UH Rainbow Babies & Children's Hospital. Here are four common myths, along with the facts, about living with this condition.

### **Myth #1: Your child shouldn't exercise if he or she has asthma.**

When your child has asthma, it's important to avoid triggers, such as pollen, cigarette smoke and mold. But one thing children shouldn't avoid is exercise. Physical activity is important for a child's overall well-being. “If exercise causes your child's

asthma to flare up, be sure to talk with the pediatrician,” advises Dr. Ross. “He or she may prescribe a short-acting medicine that your child can inhale before exercise to prevent symptoms. Drinking plenty of water and taking some time to warm up and cool down before and after exercise can help, too. There are Olympic and professional athletes with asthma – the key is getting it under control!”

### **Myth #2: Your child only needs to take asthma medicine during an asthma attack.**

There are medications called quick-relief, or “rescue,” medicines that only need to be taken during an asthma attack. However, if your child's doctor prescribes a controller medication, be sure your child takes it as directed. Controller medicines help reduce inflammation in the airway to keep an asthma attack from happening in the first place. Most controller medicines work best if your child takes them every day, even on days he or she isn't having symptoms.

### **Myth #3: Asthma only affects kids, and then they grow out of it.**

Asthma often begins during childhood, but it affects people of all ages. Many people think that kids grow out of asthma, but this isn't exactly true. Many people who have asthma as children get better as they get older, but the symptoms may worsen again in adulthood.

### **Myth #4: Asthma comes and goes.**

Asthma is a chronic condition. Even when your child feels well, it's still there. Dr. Ross says, “The goal with treating asthma is to control the disease so your child can go about his or her daily life with few, if any, symptoms. Work with your child's doctor, stick to a treatment plan and make sure your child avoids triggers that can cause an asthma attack. While we don't have a cure for asthma, working with your doctor to find the right treatment plan can help your child live a normal life with rare symptoms and flares.” •



## Does your child have asthma?

*If so, he or she may qualify for this Vitamin D Research Study*

The Pediatric Pulmonology team at UH Rainbow Babies & Children's Hospital is currently recruiting for a National Institutes of Health-funded research study to see if taking vitamin D can help prevent asthma attacks and improve the effectiveness of certain asthma medications.

If your child is between 6 to 14 years of age with asthma for at least 12 months, he or she may be eligible to participate. The study will provide:

- Compensation for time and travel
- Expert advice and asthma education
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# Are sugary foods

## putting your children at risk for heart disease?

Chocolate lava cake. Apple pie. Oatmeal raisin cookies. Is your mouth watering yet? Most of us love the taste of sugary food and kids are no exception.

Yet, it's no secret that these foods are not the healthiest choices. Sugar adds calories to foods without providing the nutrients your body needs. These are called "empty calories." "Studies show that a diet high in sugar can cause health problems, such as dental cavities, obesity and diabetes," explains Andrew Dodgen, MD, a Pediatric Cardiologist at UH Rainbow Babies & Children's Hospital. "Experts now believe it may also cause heart disease."

### New guidelines on sugar

These concerns have led the American Heart Association (AHA) to release new guidelines on the amounts of sugar children should consume. The AHA now recommends:

- **Children younger than age 2** should avoid any added sugars.
- **Children ages 2 and older** should limit sugar to 25 grams a day or less. That's about 6 teaspoons each day.
- **Children and teens** should limit soda and other sugary drinks to just one 8-ounce serving a week.

This means most kids will need to cut back on sugar intake. On average, U.S. children now consume about 80 grams of sugar a day.

### Watch out for added sugars

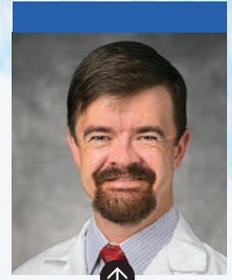
Added sugars are those that don't naturally occur in foods. They are often used to make prepared or processed foods. The AHA found that kids got equal amounts of added sugars from food and drinks. The most common added sugars for kids were in soda, sports drinks, fruit-flavored drinks, cakes and cookies.

» To learn more about this topic, visit [Heart.org](http://Heart.org) for tips from the American Heart Association.

### How to cut back

Studies show that kids eat the most sugary foods at home, not while they're out. You can help your children cut back on sugar by following a few tips from Dr. Dodgen:

- **Read labels and buy products with the lowest amounts of added sugars.** Check labels on foods you buy to see if they contain sugar. You might be surprised at what you find. Sugar is added to many foods you might not expect, such as pasta sauce, ketchup, crackers and pizza. Keep in mind, ingredients are listed in order by quantity, so the higher sugar appears on the list, the more that product contains.
- **Be aware of sugar's other names.** These include high-fructose corn syrup, sucrose, dextrose, maltose, molasses, cane sugar, corn sweetener, raw sugar, syrup, honey or fruit juice concentrates.
- **Skip the soda.** Try serving water or low-fat milk instead of soda or other sugary drinks.
- **Choose fruit for dessert.** Most kids love the taste of fresh fruit. You can also buy canned or frozen – just check the labels to make sure there's no sugar added.
- **Skip sugary cereals.** Opt for unsweetened cereals instead, and add fruit to sweeten it. •



### MEET OUR DOC

**ANDREW DODGEN, MD**

Pediatric Cardiologist,  
UH Rainbow Babies &  
Children's Hospital  
Assistant Professor, Case  
Western Reserve University  
School of Medicine

**HEALTHY KIDS ARE SWEET ENOUGH**

Kids age 2-18 should have **LESS THAN 25 GRAMS** or **SIX TEASPOONS** of **ADDED SUGARS DAILY** for a healthy heart.

less than six...

Source: American Heart Association statement  
Added Sugars and Cardiovascular Disease Risk in Children

American Heart Association  
Life is why™

Braydan Knarr, 6,  
with his grandmother,  
Mendy, at Black River  
Elementary School



# A family affair

Rainbow specialists offer the full gamut of resources to empower families to control Type 1 diabetes

**A**t first, the signs were subtle. Two years ago, Braydan Knarr, now 6, seemed like he was always thirsty and going to the bathroom often. “It was the summertime and he was playing outside and running around a lot, so it didn’t seem that strange that he was drinking more and peeing more,” says his grandmother, Mendy McIntyre. But it started getting progressively worse.

Braydan’s mother, Allisan, took him to his pediatrician. Since frequent urination can be a sign of Type 1 diabetes, his doctor checked his blood sugar (also known as glucose) levels and found

they were sky-high. His doctor sent them to the emergency room at UH Rainbow Babies & Children’s Hospital.

### **Comprehensive education and support**

Braydan was diagnosed with Type 1 diabetes and admitted to the hospital right away. He stayed for four days. “I’m still in awe of the staff and the doctors there,” Mendy says. “The support, training and education about Type 1 diabetes and caring for Braydan was incredible. They put Braydan in the hospital to get his blood sugar under control, but we were also there to learn how to take care of him.” During his stay, they met with doctors, nurses, dietitians, certified diabetes educators,

social workers, psychologists and others who equipped them with everything they needed to know about managing Type 1 diabetes.

With Type 1 diabetes, the body doesn't produce insulin, the hormone needed to move glucose from the bloodstream into the body's cells. As a result, patients have to check their blood sugar throughout the day and take insulin to keep glucose levels within a healthy range.

"When we learned that Braydan had Type 1 diabetes, our world flipped upside down," Mendy says. "We were completely overwhelmed. But by the time we left the hospital, we felt like we had the information and skills needed to take care of our little guy."

### Constant monitoring for peace of mind

After Braydan was discharged from the hospital, he started seeing pediatric endocrinologists at UH Medina Health Center Rainbow Specialty Clinic. They told his family about an opportunity to enroll in a clinical trial designed to test the effectiveness of continuous glucose monitoring (CGM) in young children. The trial would offer additional education, support and guidance for families to help them use CGM to its full capabilities.

"With CGM, a little wire is placed under the skin that continuously measures glucose levels. It also transmits the reading to a receiver that the patient carries or sends to a parent's phone that sets off an alarm when the patient's blood sugar is too high or too

low," says Sarah MacLeish, DO, a Pediatric Endocrinologist and lead study investigator of the clinical trial. UH Rainbow Babies & Children's Hospital was one of only a few centers nationwide selected to conduct the study. Braydan's family decided to participate.

"At only 6 years old, he doesn't really feel when his blood sugar starts to get high or low," Mendy says. "The CGM gives us peace of mind because it tells us so we can treat it right away."

Braydan also receives ongoing care from the UH Rainbow team of pediatric endocrinologists, certified diabetes educators, nurses, dietitians and others.

"We spend a lot of time with families during appointments and also do a lot of managing over the phone, answering their questions," says Jamie Wood, MD, Medical Director of the Pediatric Diabetes Program at UH Rainbow Babies & Children's.

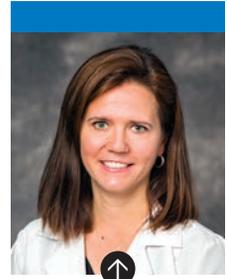
### Making it work

Braydan currently checks his own blood sugar levels and needs insulin about five times per day, along with a long-acting dose before bed. His diabetes is well-controlled. The kindergartner loves playing basketball, football and baseball.

"That's our goal for every patient," Dr. MacLeish says. "It isn't about making their lives fit into diabetes. We strive to adjust their care and treatment regimen so it fits into their lifestyle and they can do whatever they want to do." •

**"By the time we left the hospital, we felt like we had the information and skills needed to take care of our little guy."**

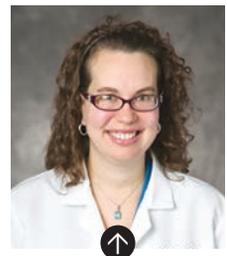
*– Mendy McIntyre, Braydan's grandmother*



### MEET OUR DOCS

#### JAMIE WOOD, MD

Medical Director, Pediatric Diabetes Program, UH Rainbow Babies & Children's Hospital  
Associate Professor, Case Western Reserve University School of Medicine



#### SARAH MACLEISH, DO

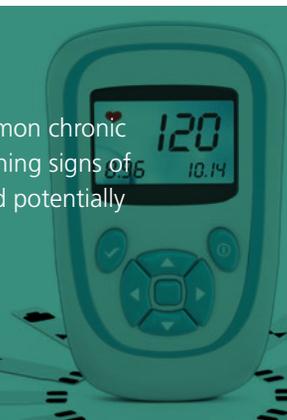
Pediatric Endocrinologist, UH Rainbow Babies & Children's Hospital  
Assistant Professor, Case Western Reserve University School of Medicine



## Know the signs

Second only to asthma, Type 1 diabetes is the most common chronic childhood disease. "It's important to know the early warning signs of Type 1 diabetes so a child can get treated right away, and potentially avoid hospitalization," says Dr. Wood. The signs include:

- Increased thirst
- Increased urination
- Increased hunger
- Weight loss
- Bed-wetting
- Yeast infections



### » Leading the way in pediatric diabetes

UH Rainbow Babies & Children's Hospital is a nationally-ranked leader in the research, prevention, diagnosis and treatment of diabetes, obesity, growth disorders and other children's endocrine problems. Visit [Rainbow.org/Diabetes](http://Rainbow.org/Diabetes) to learn more.

# 3 things you need to know *about HPV*



**MEET OUR DOC**  
**KIMBERLY GECSI, MD**  
*Obstetrician/Gynecologist,*  
*University Hospitals*  
*Associate Professor,*  
*Case Western Reserve*  
*University School of Medicine*

The Centers for Disease Control and Prevention estimates that 75 percent of Americans of reproductive age have been exposed to human papillomavirus (HPV), the most commonly sexually transmitted disease. But despite its prevalence, there remains a lot of misconceptions and myths surrounding what HPV is, how it affects your body and what a diagnosis means, says University Hospitals obstetrician/gynecologist Kimberly Gecsi, MD.

HPV is actually an umbrella term for more than 150 strains of related viruses, most of which are benign.

“The vast majority of people exposed to HPV will have no harmful effects at all,” says Dr. Gecsi. “Our immune system takes care of it just like every other virus.”

But in some cases, HPV infections can persist and lead to genital warts and cancers of the cervix, vulva, vagina and anus in women. Indeed, HPV is the leading cause of cervical cancer, which affects more than 12,000 women in the U.S. a year and is the third most common cancer among women worldwide.

Dr. Gecsi offers these three things you need to know about HPV in order to stay healthy:

## 1 The HPV vaccine is recommended for women through age 26.

The CDC recommends that all boys and girls get the HPV vaccine at age 11 or 12. But it is also approved for children as young as 9, and young adults through age 26. The vaccine is highly effective and estimated to prevent about 70 percent of cervical cancers and 90 percent of genital warts.

“If you didn’t get the shot in your teen or preteen years, it’s not too late,” Dr. Gecsi says.

While it can’t protect against the strains you’ve already been exposed to, it can help prevent future infections. And the vaccine is still recommended even if you’ve had an abnormal pap smear or been exposed to HPV in the past, Dr. Gecsi says.

## 2 If you have HPV, you might never know it.

Though an estimated 79 million Americans are currently infected with HPV, most people never develop symptoms. An exception to that is the appearance of genital warts, which can show up several weeks or months after the initial exposure. HPV can also cause cervical cell changes, which can lead to cancer. Doctors test for the presence of these precancerous or cancerous cells on the cervix during your pap smear, Dr. Gecsi says.

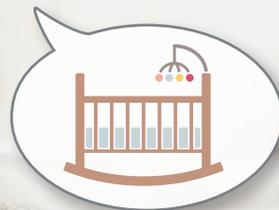
## 3 There is an HPV test.

“In screenings for cervical cancer, doctors utilize HPV tests to help determine which people are at high risk for cancer,” she says.

But it’s not something you need to be checking for all the time. Doctors tend to recommend the test if you had an abnormal pap or as part of a cervical exam, if you are over age 30. The American Cancer Society recommends women get a pap test every three years, starting at age 21. Women ages 30 to 65 have the option of getting a pap test combined with a HPV test every five years, or simply continue getting a pap test every three years. •



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# How to deal when others tell you how to raise your baby

**W**hen you become a parent, it often feels like everyone around you has an opinion about all things baby-related – and they’re not afraid to share it with you. At times, their comments can make you feel overwhelmed and confused. You may question whether you’re making the best choices for your child.

Above all, trust that you know your child best. “No matter how good others’ intentions may be, their opinions shouldn’t make you second-guess your decisions,” says Jason Tatka, DO, a Pediatrician at UH Rainbow Portage Pediatrics. “Follow your gut – it’ll often lead you in the right direction.”

With the right support, it becomes easier to drown out all the unsolicited advice other people like to share with you. Here’s some helpful information on parenting hot topics to keep in mind.

### Rock to sleep or cry it out?

It’s OK to rock your baby to sleep if that’s what you choose.

You can also try sleep training, in which you allow your child to cry for increasing amounts of time to help him or her learn to fall asleep. This method is safe and effective, and doesn’t increase a child’s stress levels or impact their bond with you, according to a study in the journal *Pediatrics*. “If you decide to sleep-train, talk with your child’s pediatrician to determine at which age to start,” says Dr. Tatka.

### Breast or bottle?

You already know that “breast is best.” But if you’re unable to breastfeed or choose not to, that’s OK, too. Infant formula that’s iron-fortified provides all the nutrients your baby needs.

### To vaccinate or not?

Vaccinate. Immunizations are safe and protect your baby against diseases that can be deadly. There’s a lot of incorrect information out there about vaccines. For example, people may try to tell you that vaccines cause autism. This is false. “Research shows there’s no link

between vaccines and autism,” says Dr. Tatka.

“In fact,” Dr. Tatka adds, “the science that originally made that connection, which remained public for decades, was disproven.”

### Store-bought or homemade baby food?

The American Academy of Pediatrics recommends introducing solid foods to babies around 6 months of age. As long as you’re feeding your baby age-appropriate foods, such as pureed vegetables and infant cereal to start, it doesn’t matter whether you make it or buy it.

Dr. Tatka adds, “Whenever you have questions, consult your child’s pediatrician. Beyond your child’s health and development, your pediatrician can guide you on a wide range of topics, including sleep, feeding, behavior and more.” •

### »»Have a question?

Call our pediatric nurse line 24/7 at **216-815-0059** to get an answer from one of our pediatric experts.



**MEET OUR DOC**  
**JASON TATKA, DO**  
Pediatrician, UH Rainbow  
Portage Pediatrics



University Hospitals of Cleveland  
Rainbow Babies & Children's Hospital  
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**KIDS KICKING  
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