

## DEVELOPMENTAL PROGRAM

### LSU Faculty:

Developmental Pediatricians:	Susan Berry, MD, MPH Andrea Starrett, MD
Psychiatry:	Joy Osofsky, MD Humberto Quintana, MD
Genetics	Yves Lacassie, MD Michael Marble, MD
Psychology	George Hebert, PhD (school psychologist)
Speech	Gina Easterly Taylor, PhD, CC-SLP
Special Instruction	Karen Pasch, Med

### Community Preceptors:

Developmental Pediatricians	Gerry Ballanco, MD, Valerie Burton, MD
Nursing	MaryCatherine Porch, FNP, Care Coordinator, LSU Tigercare Clinic Angela Shockley, RN, LA Office for Citizens with Disabilities
OT	Debra LeBlanc, Children's Hospital
PT	Laurie Boyer, Children's Hospital
Teacher of the Deaf	Rosanne Hirsch, Bright Preschool
Early Interventionist	Miriam Maxwell, Ochsner Early Intervention Program

**Goal 1:** Provide a 1 month rotation in the internship year that provides the groundwork for identifying and managing developmental problems throughout residency training.

### Specific Objectives:

1. Understand normal and atypical development. Be able to recognize atypical development.
  - a. Describe principals that determine the behavior and developmental progress in young children.
  - b. Know the rate and sequence of normal developmental milestones.
  - c. Perform an age appropriate developmental history and physical examination.
2. Be familiar with common tools used for developmental screening and assessment.
  - a. Know the difference between a screening and an assessment tool.
  - b. Demonstrate the use of an appropriate screening tool such as Ages and Stages in the clinic setting.
  - c. Describe common screening tools used by pediatricians.
  - d. Know how to interpret results of common assessment tools., including use of standard scores, means, standard deviations, percentiles, and grade equivalents.
3. Know the diagnostic criteria, and the co-morbidities for the following conditions, and be able to develop appropriate treatment plans for children with:
  - a. Learning disabilities
  - b. Mental retardation
  - c. Autistic spectrum disorders

- d. Visual impairment
  - e. Hearing impairment
  - f. School failure
  - g. Attention deficit disorder
  - h. Oppositional defiant disorder
  - i. Conduct disorder
  - j. Depression
  - k. Cerebral palsy
4. Understand the concept of a medical home for the child with special health care needs.
  5. Understand the pediatrician's role in the multi-disciplinary and interdisciplinary approaches used in developmental assessment and intervention, and how to access appropriate evaluation and intervention services in the community.
    - a. Know when and how to refer to the following:  
physical therapist, occupational therapist, speech therapist, nutritionist, special educator, psychologist, social worker, early interventionist, parent support groups
    - b. Participate in interdisciplinary evaluations
    - c. Describe IDEA and its implications for children with developmental problems.
    - d. Describe steps in obtaining services under IDEA including Early Steps and Child Search for children from birth to age 22, for children enrolled in public school and for children not enrolled in a public school. Define IFSP and IEP. Describe the role of the intake coordinator and the family service coordinator. Understand the role of the pediatrician in obtaining services under IDEA.
    - e. Observe early intervention sites in the community (Bright Preschool, McMains Developmental Center, Ochsner Early Intervention Center and home visits, Hammond Developmental Center) and know how to refer to them appropriately.
  6. Understand the role of psychopharmacology in the treatment of behavioral disorders.
    - a. Know how to assess and treat patients with ADD/ADHD.
    - b. Know the indications and side effects of common psychotropic medications used in children.
    - c. Refer appropriately for psychopharmacologic management.

**Goal 2: To further develop the ability to recognize and manage developmental problems through experience gained with continuity clinic patients.**

- a. Recognize atypical development and develop appropriate management plans for children with developmental problems, making appropriate subspecialty and community referrals.
- b. Manage children with a wide range of etiologic diagnoses that impact on development.
- c. Gain skills necessary for the provision of a medical home for children with special health care needs.

**Skills Acquisition:**

1. Be able to take a comprehensive developmental history.
2. Be able to use the Ages and Stages Questionnaire to assess a child's developmental status.
3. Gain proficiency in the Vanderbilt screening tool for ADHD.
4. Observe the administration of a developmental assessment tool such as the Bayley Scales of Infant Development or the Batelle Developmental Inventory and be able to interpret the standard score results.
5. Identify common tests of intelligence, achievement, adaptive behavior, and internalizing and externalizing behaviors.
6. Develop a comprehensive care coordination plan for a medical home for a child seen during the month and present the case at the wrap up session for the rotation.

**Reading Materials:**

**Residents are referred to specific chapters of Mark Wolraich's textbook, "Disorders of Development and Learning: a practical guide to assessment and management".**

**Internship Rotation Requirements:**

1. One month rotation completed during the internship year for pediatric residents and when permissible for med-peds residents.
2. Residents will attend didactic sessions and various activities at multiple sites as coordinated by Dr. Berry.
3. Residents are expected to master the skills described as well as be able to obtain a developmental history, detect developmental delays and make appropriate evaluation and treatment plans including appropriate subspecialty and community referrals.
4. Residents are expected to integrate the information and skills learned during this rotation into their practice of pediatrics, especially during their continuity clinic experience. They should understand their role in the provision of a medical home for children with special health care needs.