

Special Note on *Contemporary Pediatrics* Articles:

Information in the 2010 Primary Care SAE Reference Manual on accessing *Contemporary Pediatrics* articles has changed since the printing.

Visit <http://contemporarypediatrics.modernmedicine.com>, click on **Issue Archive**, and now search by **Month and Year** of the article, which is referenced as the Issue in the SAE bibliography, e.g. Issue number = month (6=June).

Direct links are included in this PDF for your convenience. Free registration to the Modern Medicine website will be required to view certain articles. Registration is simple, and you will be prompted to do so when you try to open an article which requires logging in.

2010 PRIMARY CARE (PC) SAE: CONTEMPORARY PEDIATRICS ARTICLES

QUESTIONS 4-5 | November 2007

The late preterm infant: A little baby with big needs. Surprisingly, practically no guidelines exist for the in and outpatient care of late preterm infants. This lack of guidance has forced hospitals to develop their own suite of care practices.

<http://contemporarypediatrics.modernmedicine.com/contpeds/Features/The-late-preterm-infant-A-little-baby-with-big-nee/ArticleStandard/Article/detail/483620>

QUESTIONS 6-7 | March 2007

Children and television: A primer for pediatricians

<http://www.modernmedicine.com/modernmedicine/Cover+Article/Children-and-television-A-primer-for-pediatricians/ArticleStandard/Article/detail/412515>

QUESTIONS 8-10 | April 2008

Sexually transmitted infections in adolescents (CME). Scenarios from primary care

<http://www.modernmedicine.com/modernmedicine/Pediatrics/Sexually-transmitted-infections-in-adolescents-CME/ArticleStandard/Article/detail/508337>

QUESTION 16 | June 2008

Lyme Disease: prevention, diagnosis, and management (CME). Although much has been learned about Lyme disease, misinformation still abounds. It's time to sift the wheat from the chaff.

<http://www.modernmedicine.com/modernmedicine/Pediatrics/Lyme-Disease-prevention-diagnosis-and-management-C/ArticleStandard/Article/detail/522760>

QUESTION 19 | November 2008

Acute UTI: diagnosis and management (CME)

<http://www.modernmedicine.com/modernmedicine/Pediatrics/Acute-UTI-diagnosis-and-management-CME/ArticleStandard/Article/detail/558925>

QUESTIONS 60-61 | May 2008

Child ADHD: Going beyond the medications. Complimentary therapies for the treatment of ADHD.

<http://www.modernmedicine.com/modernmedicine/ADHD/Child-ADHD-Going-beyond-the-medications/ArticleStandard/Article/detail/515815>

QUESTION 62 | May 2008

Talking with the child and adolescent psychiatrist. Handling the medical aspects of psychiatric evaluation and treatment: A summary for primary care pediatricians.

<http://www.modernmedicine.com/modernmedicine/Pediatrics/Talking-with-the-child-and-adolescent-psychiatrist/ArticleStandard/Article/detail/515817>

QUESTION 63 | May 2008

Vaginal complaints in the pre-pubertal girl (CME). Overtones of possible sexual abuse and limited training compound the evaluation and treatment of vaginal complaints.

<http://www.modernmedicine.com/modernmedicine/Pediatrics/Vaginal-complaints-in-the-pre-pubertal-girl-CME/ArticleStandard/Article/detail/515459>

QUESTION 64 | April 2008

An obesity action plan for children. Implementing the new expert recommendations on the stubborn problem of overweight/obesity in children.

<http://www.modernmedicine.com/modernmedicine/Pediatrics/An-obesity-action-plan-for-children/ArticleStandard/Article/detail/507633>

QUESTION 65 | November 2008

Pediatric hypertension (CME). A review of proper screening, diagnosis, evaluation, and treatment

<http://www.modernmedicine.com/modernmedicine/Modern+Medicine+Now/Pediatric-hypertension-CME/ArticleStandard/Article/detail/563862>

QUESTION 67 | May 2008 (Supplement)

Blistering in the Newborn

This Contemporary Pediatrics article will not be offered in an online format, according to the Modern Medicine website.

Due to this unanticipated issue, the answer and critique to this question are below:

Answer: C

Critique: Most neonatal blistering is temporary and harmless. Miliaria crystallina occurs after sweat ducts are blocked in an overheated child or swaddled infant. It resolves with removal of the clothing or moving the child to a cooler room. Erythema toxicum is very common in newborns, appearing when the child is a few days old and resolves in a few days. Transient neonatal pustular melanosis occurs frequently in more dark pigmented infants and is seen at birth. No treatment is needed. Bullous impetigo represents a localized growth of Staphylococcus scalded skin syndrome (SSS) and should be treated with antibiotics and monitored in the hospital.