GENERAL PEDIATRICIANS:

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Visit us at Pfizer booth #307

Zithromax®
(azithromycin for oral suspension)
For older babies and toddlers,

A nutritionally balanced diet doesn’t always come easily

**ISOMIL® 2 AND SIMILAC® 2** provide nutritional support as your young patients move to a broader diet.

A USDA study reveals that nutrient intakes don’t always meet the recommended levels in children between the ages of 1 and 2.*

- More than 50% are not getting the RDA for iron and calcium
- More than 80% are not getting the RDA for zinc and vitamin E

And since nutritional needs change as babies grow, both Isomil 2 and Similac 2 have been designed to help promote complete, balanced nutrition.

- Isomil 2 contains 29% more calcium than Isomil® Soy Formula With Iron
- Similac 2 contains 50% more calcium than Similac® With Iron Infant Formula
- Both formulas are iron fortified** for growth and development

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**Recommend a cup a day.**
Adding one cup of nutritionally complete Isomil 2 or Similac 2 to their daily diet can help one-year-olds meet the RDA for iron, calcium and other essential nutrients.

*US Department of Agriculture, Agricultural Research Service: Food and Nutrient Intakes by Children, 1994-1996, 1998. Table Set 17. (Numbers have been rounded. Percent based on Recommended Dietary Allowances, ed 10, 1989.) ARS Food Surveys Research Group, 1999.**

**1.5 mg/100 Cal.**
Important **NEW** Pediatric Clinical Data

Now approved in patients as young as 6 years...

- **Proven safe and effective at a new lower dose**…
  Xopenex® 0.31 mg
  - From one of the largest, well-controlled, pediatric trials conducted with a β-agonist
  - Now available in two doses, 0.31 mg and 0.63 mg, for children ages 6-11 years

- **Devoid of the unnecessary left isomer, (S)-albuterol**

In patients aged 6 to 11 years, the adverse events occurring in ≥2% of patients and more frequently than with patients receiving placebo were (0.31 mg Xopenex, 0.63 mg Xopenex, and placebo, respectively): headache (28%; 11.9%; 6.9%), pharyngitis (9%; 10.4%; 6.9%), rhinitis (6.1%; 10.4%; 5.1%), asthma (8.9%; 9%; 5.1%), fever (8.5%; 9%; 5.1%), viral infection (7.6%; 9%; 5.1%), rash (7.5%; NA*), accidental injury (6.1%; 4.5%; 3.4%), diarrhea (1.5%; 6.0%; NA*), pain (3%; 1.5%; 3.4%), asthenia (3%; 3%), lymphadenopathy (30%; NA*; NA*), and urticaria (NA*; 3%).

In patients aged 12 years and older, the adverse events occurring in ≥2% of patients and more frequently than with patients receiving placebo were: (0.63 mg Xopenex, 1.25 mg Xopenex, and placebo, respectively): viral infection (6.9%; 12.9%; 6.9%), rhinitis (11.1%; 2.4%; 2.6%), nervousness (2.3%; 0.9%; NA*), bronchitis (0.9%; 1.3%; NA*), sinusitis (1.5%; 1.3%; 1.3%), insomnia (1.4%; 4.1%; 2.7%), tachycardia (2.9%; 2.7%; NA*), pain (2.9%; 1.4%; 1.3%), turbinate edema (2.8%; 1.4%; NA*), dizziness (1.4%; 2.7%; 1.3%), dyspnea (1.4%; 2.7%; 1.3%), leg cramps (NA*; 2.7%; 1.3%), accidental injury (NA*; 2.7%; NA*), anxiety (NA*; 2.7%; NA*), and migraine (NA*; 2.7%; NA*).

*Less than 2% reported.

Xopenex is contraindicated in patients with a history of hypersensitivity to levalbuterol HCl or racemic albuterol.

See next page for brief summary of Xopenex prescribing information and safety information concerning β-agonists.

THE RIGHT’ HALF FOR THE EFFICACY THEY NEED

FOCALIN™—ONLY THE EFFECTIVE ISOMER OF RITALIN

- A refined form of Ritalin created by isolating the pharmacologically more active d-isomer, or right half.
- Safe and well tolerated in clinical trials.
- Short-acting for flexible dosing.
- Recommended starting dose is 2.5 mg bid.

Please see brief summary of prescribing information, including Contraindications and Boxed Warning, on following page.

Focalin™ is indicated for the treatment of Attention Deficit Hyperactivity Disorder (ADHD).

Focalin™ should be given cautiously to patients with a history of drug dependence or alcoholism. Chronic abusive use can lead to marked tolerance and psychological dependence with varying degrees of abnormal behavior. Frank psychotic episodes can occur, especially with parenteral abuse. (See Boxed Warning.)

No matter how brilliant your medical skills, there may come a time when your ability as a physician is tested to its limits. In today’s harsh healthcare arena, a single misstep can be fatal—the outcome determined by your selection of the right med-mal insurer. As Illinois’ leading medical professional liability insurer, we are dedicated to providing physicians and their practice entities superior protection with unparalleled service at affordable prices. It’s easy to understand why physicians who choose ISMIE, stay with ISMIE. Our outstanding record of proven results makes us the best insurance value in the business. Call us today at 1-800-782-4767 or visit www.ismie.com.
ELIDEL is contraindicated in patients who are hypersensitive to pimecrolimus or any of the components of the cream. It should not be applied to areas of active cutaneous infections. Use should be carefully evaluated if varicella zoster virus, herpes simplex virus, or eczema herpeticum infections are present.

If patients have lymphadenopathy that is unresolved or of unclear etiology, discontinuation should be considered. Patients should minimize or avoid natural or artificial sunlight exposure. **ELIDEL should not be used with occlusive dressings.**

The most common adverse events seen in clinical studies included application-site burning, headache, pharyngitis, nasopharyngitis, cough, influenza, pyrexia, and viral infection. In clinical studies, skin papilloma or warts were observed in 1% of ELIDEL patients. The efficacy and safety of ELIDEL have not been studied beyond 1 year.
When you want or need to avoid corticosteroids for your mild to moderate eczema patients*

ELIDEL® in control.

- Effectively relieves the itch, redness, inflammation, and excoriation of eczema flares
- Significantly improved the pruritus that caused sleep disturbance by first visit (Day 8), and through endpoint of a 6-week study ($P<0.001$)†
- Proven safe and well tolerated in patients aged 2 years through adult
- In a safety study, 57% of pediatric ELIDEL patients had no flares requiring a corticosteroid over 1 year§
- Odor-free, easy-to-use cream that may be used on any skin surface
- Should be used twice daily at the earliest signs or symptoms and for as long as they persist*Ⅱ

*ELIDEL is indicated for short-term and intermittent long-term therapy for mild to moderate atopic dermatitis in non-immunocompromised patients 2 years of age and older, in whom the use of alternative, conventional therapies is deemed inadvisable because of potential risks, inadequate clinical response, or patient intolerance of such therapies.

† Pruritus was assessed on a 4-point scale as 0 (none), 1 (occasional/slight itching), 2 (constant or intermittent itching which does not disturb sleep), and 3 (bothersome itching which disturbs sleep).
§ Data from the 6-week, double-blind phases of two, 26-week, multicenter trials comparing ELIDEL to placebo cream in pediatric patients with mild to moderate eczema aged 2 to 17 years (n=403).
Ⅱ Data from a 1-year, randomized, multicenter, double-blind, placebo-controlled study in patients aged 2 to 17 years. An increased incidence of skin infections, rhinitis, and urticaria was found in patients using ELIDEL sequentially with topical corticosteroids as compared to ELIDEL alone.
Ⅰ Intermittent therapy with ELIDEL has been studied up to 1 year. Treatment should be discontinued upon resolution of disease. Patients should be re-evaluated if symptoms persist beyond 6 weeks.

Please see brief summary of Prescribing Information.

Novartis Pharmaceuticals Corporation, East Hanover, New Jersey 07936
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Steroid-Free ELIDEL (pimecrolimus) Cream 1%

And FLAVORx tastes just like Banana Chocolate Pie. As well as 41 other great flavors, like Watermelon and Peppermint, that can be added to prescription and over-the-counter liquids without compromising their integrity. It makes even the worst tasting medicines go down easy. And, to make it easy, you can recommend FLAVORx right on your prescription form. Call 1-800-884-5771 to find out more or visit us at www.flavorx.com.

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Features: 13 Colors, Stackable, 3 sizes
New

Once-daily
Ritalin® LA
The ADHD original.
Optimized for the school day.

- Rapid onset of Ritalin®
- Mimics bid dosing
- Lasts the school day
- Favorable safety and tolerability in clinical trials¹
- Flexible, once-daily dosing
  - Capsules offer sprinkle option
  - Available in three dosage strengths


Ritalin® LA is indicated for the treatment of Attention Deficit Hyperactivity Disorder (ADHD). Ritalin® LA should be given cautiously to patients with a history of drug dependence or alcoholism. Chronic abusive use can lead to marked tolerance and psychological dependence. Frank psychotic episodes can occur, especially with parenteral abuse. (See Boxed Warning.)

Please see brief summary of full prescribing information, including Contraindications and Boxed Warning, provided on the following page.

In the treatment of the nasal symptoms of allergic rhinitis with nasal inhaled steroids

ONE POWERFUL CHOICE COVERS THEM ALL

APOWERFULCHOICE FOR ALL AGES

- The only nasal steroid indicated in patients as young as 2 years of age
- Studied in geriatrics up to age 85
- Proven efficacy and safety profile for all ages in between

WARNING: The replacement of a systemic corticosteroid with a topical corticosteroid can be accompanied by signs of adrenal insufficiency.

In clinical trials, using the recommended dose, the overall incidence of adverse events was comparable to vehicle placebo. The most commonly reported adverse events, not necessarily drug related, were, for NASONEX® and vehicle placebo, respectively: headache (17-26% vs 18-22%), viral infection (8-14% vs 9-11%), pharyngitis (10-12% vs 10%), epistaxis/blood-tinged mucus (8-11% vs 6-9%), and coughing (7-13% vs 6-15%).

WWW.NASONEX.COM

For more information, please see your Schering representative.

Please see accompanying brief summary of Prescribing Information on adjacent page.
Nasonex® (mometasone furoate monohydrate)
Nasal Spray, 50 mcg
For Intranasal Use Only

**PRODUCT INFORMATION**

**BRIEF SUMMARY** (For full Prescribing Information, see package insert.)

**INDICATIONS AND USAGE**

Nasonex® Spray, 50 mcg per dose, is indicated for the treatment of the nasal symptoms of seasonal allergic rhinitis. In adults and pediatric patients 2 years of age and older, Nasonex® Spray, 50 mcg per dose, is indicated for the treatment of the nasal symptoms of perennial allergic rhinitis. The effectiveness and safety of Nasonex® Spray, 50 mcg per dose has also been demonstrated in patients 2 to 11 years of age. Nasonex® Spray, 50 mcg in pediatric patients less than 2 years of age have not been established.

**CONTRAINDICATIONS**

Hypersensitivity to any of the ingredients of this preparation contraindicates its use.

**WARNINGS**

The effectiveness of a systemic corticosteroid can be supported by a patient's natural resistance (e.g., viral, bacterial, parasitic, fungal) and avoid deleterious effects on normal tissues. Long-term treatment with intranasal corticosteroids is associated with a significant increase in the risk of developing secondary infection. However, long-term treatment with Nasonex® Spray, 50 mcg, is associated with a low incidence of infection in healthy and patients with nasal polyps. For example, for a less severe or even a mild infection, the risk of developing secondary infection is less than 0.1% in healthy patients and less than 1% in patients with nasal polyps.

**ADVERSE REACTIONS**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were nasal symptoms such as burning, irritation, sneezing, and rhinorrhea. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were nasal symptoms such as burning, irritation, sneezing, and rhinorrhea.

**Nasal Symptoms**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were nasal symptoms such as burning, irritation, sneezing, and rhinorrhea. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were nasal symptoms such as burning, irritation, sneezing, and rhinorrhea.

**Gastrointestinal Symptoms**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were gastrointestinal symptoms such as nausea, vomiting, and abdominal pain. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were gastrointestinal symptoms such as nausea, vomiting, and abdominal pain.

**Injection Site Reactions**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were injection site reactions such as pain, swelling, and redness. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were injection site reactions such as pain, swelling, and redness.

**Other Adverse Reactions**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were other adverse reactions such as headache, rhinorrhea, and allergic reactions. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were other adverse reactions such as headache, rhinorrhea, and allergic reactions.

**Nasal Cavity**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were nasal cavity reactions such as nasal polyps. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were nasal cavity reactions such as nasal polyps.

**Respiratory System**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were respiratory system reactions such as asthma. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were respiratory system reactions such as asthma.

**Cutaneous System**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were cutaneous system reactions such as skin rashes. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were cutaneous system reactions such as skin rashes.

**Other Adverse Reactions**

The most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were other adverse reactions such as headache, rhinorrhea, and allergic reactions. In adults and pediatric patients 2 years of age and older, the most common adverse reactions associated with Nasonex® Spray, 50 mcg per dose in clinical trials were other adverse reactions such as headache, rhinorrhea, and allergic reactions.

**OVERDOSAGE**

In case of toxic symptomatology, discontinue therapy and provide supportive and symptomatic treatment as required.