

Amy Smith, NP
1440 E. Chapman Avenue
Orange, CA 92866
Phone: 714-782-0042 Fax: 650-241-1129

IMPORTANT INFORMATION FOR YOUR UPCOMING APPOINTMENT WITH AMY SMITH, NP

1. Please complete the New Patient packet in full and email, mail or fax it back at least 2 business days prior to your appointment so that Amy has time to review it. Additionally, a timeline of the development of your child's symptoms and illness course would be very helpful if you have one.
2. If your child has been to a doctor or other health care provider, related to diagnosing or treating PANDAS, please send the records and especially any prior lab tests your child has had, at least 2 business days prior to your appointment so that they can be reviewed.
3. If the above is not received at least 2 days before the appointment, Amy may not be able to review them in advance, but of course will be able to review them during the appointment.
4. If the paperwork is not received at least one business day prior to your appointment, the appointment will be rescheduled. Please understand that helping your child is all in the details, and providing as *many* as possible prior to the appointment it's critical to making the best use of time during the appointment.

If you end up needing to reschedule an appointment for any reason, Amy request's 2 business days' notice. Appointments cancelled less than 2 days before the scheduled appointment are subject to a same day cancellation fee of 50% the scheduled appointment cost.

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***During the initial hour new patient phone appointment, Amy will be going over a year-by-year detailed medical history for your child. For this reason, we recommend making some general timeline notes prior to the appointment in an effort to make sure the information you relay to Amy is as thorough and accurate as possible.

***Amy's hourly rate is \$445.00 an hour

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Amy Joy Fishman Smith, RN, NP Informed Consent for Treatment of PANS/PANDAS

PANS (Pediatric Acute-onset Neuropsychiatric Syndrome) Is when an infectious trigger, environmental factors, and other possible triggers create a misdirected Immune response results in inflammation on a child's brain. In turn, the child quickly begins to exhibit life changing symptoms such as OCD, severe restrictive eating, anxiety, tics, personality changes, and decline in math and handwriting abilities, sensory sensitivities, and more.

PANDAS (Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections) occurs when strep triggers a misdirected immune response results in inflammation on a child's brain. In turn, the child quickly begins to exhibit life changing symptoms such as OCD, anxiety, tics, personality changes, and decline in math and handwriting abilities, sensory sensitivities, restrictive eating, and more.

THE DIFFERENCE BETWEEN PANDAS AND PANS

PANDAS is when specifically strep is connected to the sudden onset of OCD and/or tics along with other listed clinical symptoms. PANS removes the emphasis of the etiologic factor and concentrates on the clinical symptoms. PANS can be triggered by any infectious agent (NOT only strep) in addition to non-infectious triggers which are yet to fully determined, but may include metabolic disorders and environmental factors. Symptoms cannot be explained by any other neurological or medical disorder.

PANDAS and PANS have slightly different diagnosing criteria. PANS is a clinical diagnosis which means your practitioner will base the diagnosis on clinical symptoms. PANDAS is when specifically strep is connected to the sudden onset of OCD and/or tics along with other listed clinical symptoms. PANS removes the emphasis of the etiologic factor and concentrates on the clinical symptoms. PANS can be triggered by any infectious agent (NOT only strep) in addition to non-infectious triggers which are yet to fully determined, but may include metabolic disorders and environmental factors. Symptoms cannot be explained by any other neurological or medical disorder.

YOUR TREATMENT CHOICES:

Treatment of PANDAS and PANS depends on the type of infection that triggers the symptoms. Your practitioner will discuss the pros and cons of each treatment with you. Some of the treatments used include but are not limited to antibiotics, IVIG, and other treatments such as probiotics, ibuprofen and nutritional supplements.

If a child receives antibiotics early after the onset of symptoms, an exacerbation typically lasts 5 to 6 weeks and then it gradually dies out. Not many children will experience a cessation of symptoms as quickly as the onset occurred. It takes time for the brain and the body to heal. One may see "blips" along the way when recovering. But a full, unremitting backslide should not occur. If it does, it could be the infection was not fully eradicated, a new infection is present, or further medical Interventions are needed. It Is Important to try your best to keep the immune system calm while the body the child is recovering.

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Low level anxiety and OCD/TIC issues may remain permanently or fade away after several weeks or months. There are times where the exacerbation can take 4 to 6 months to remit.

However, in many of the acute cases, the typical course of antibiotics is not helpful and the child continues to suffer for months and symptoms often increase in severity. The acute cases have clearly having an encephalitic reaction to strep and aggressive treatment needs to be considered.

RISKS OF TREATMENT:

There are potential risks involved in using any treatment. Some of the problems with antibiotics can include allergic reactions, which may manifest as rashes, swelling, and difficulty breathing. These problems may require medications to reverse the allergic reaction and may require emergency treatment. Other potential complications include stomach and bowel upset, abdominal pain, diarrhea or bowel irritation which may require interruption of the antibiotics and prescribing other medications to manage the digestive upset. It is also possible that secondary infections such as yeast infections of the mouth, skin, intestines and genital tracts may occur in some people, causing discomfort and the need for corrective therapies. Although unlikely it is possible that other problems such as adverse effects on liver, kidneys or other organs may occur. For oral antibiotics, it is estimated that the major side effect is 1 in 10,000 (very small) and the risk of minor side effects is 4 in 100 (slightly greater).

LEGAL ISSUES:

If you and your spouse / child's second parent disagree with each other about treatment, or if there is a legal battle over custody issues that involve a parental dispute over your child's treatment, or child protective services become involved in your child's case, please understand that I cannot be involved or asked to be involved in any way. As a nurse practitioner, I am not at the level of authority that an MD would have and particularly, with such a controversial diagnosis as PANDAS/PANS. So not only would my involvement not necessarily help you, it could be put me at risk should the disenfranchised party attempt to discredit me as part of their need to protect their child or get back at their spouse. Signing this consent, you agree that you will not attempt to involve me in such disputes.

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To my knowledge, I am not allergic to any antibiotics except: (please list)

Print Patient Name _____

Print Parent #1 Name _____ Signature _____

Date: _____

Print Parent #2 Name _____ Signature _____

Date: _____

If you would like to subscribe to Amy's Newsletter please provide email _____