



City Health Information

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The New York City Department of Health and Mental Hygiene

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CITY HEALTH INFORMATION: 2015 IN REVIEW

- In 2015, *City Health Information* (CHI) brought you up-to-date information on topics central to the health of our community.
- Issues planned for 2016 will address an even greater number of health issues with a continued focus on reducing health inequities.
- We look forward to providing practical guidance and we thank you for your continuing efforts to improve the health of all New Yorkers.

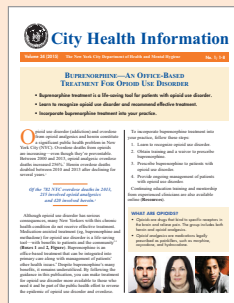
In 2015, *City Health Information* (CHI) published clinical guidance on important health issues that we face as a community. Here, we provide a summary of the key messages from 2015 and a look ahead to CHI in 2016.

SUMMARY OF GUIDANCE FROM 2015

MARCH

Buprenorphine—An Office-Based Treatment for Opioid Use Disorder

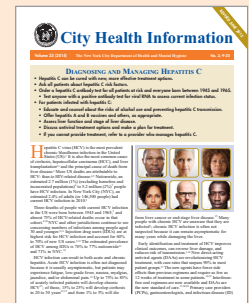
- Buprenorphine treatment is a life-saving tool for patients with opioid use disorder.
- Learn to recognize opioid use disorder and recommend effective treatment.
- Incorporate buprenorphine treatment into your practice.



JUNE

Diagnosing and Managing Hepatitis C

- Hepatitis C can be cured with new, more effective treatment options.
- Ask all patients about hepatitis C risk factors.
- Order a hepatitis C antibody test for all patients at risk and everyone born between 1945 and 1965.
- Test anyone with a positive antibody test for viral RNA to assess current infection status.
- For patients infected with hepatitis C:
 - Educate and counsel about the risks of alcohol use and preventing hepatitis C transmission.
 - Offer hepatitis A and B vaccines and others, as appropriate.
 - Assess liver function and stage of liver disease.
 - Discuss antiviral treatment options and make a plan for treatment.
 - If you cannot provide treatment, refer to a provider who manages hepatitis C.

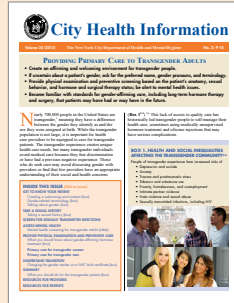


Have feedback or suggestions for CHI?
E-mail
AskCHI@health.nyc.gov

AUGUST

Providing Primary Care to Transgender Adults

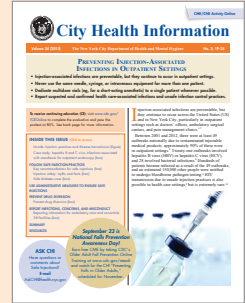
- Create an affirming and welcoming environment for transgender people.
- If uncertain about a patient's gender, ask for the preferred name, gender pronouns, and terminology.
- Provide physical examination and preventive screening based on the patient's anatomy, sexual behavior, and hormone and surgical therapy status; be alert to mental health issues.
- Become familiar with standards for gender-affirming care, including long-term hormone therapy and surgery, that patients may have had or may have in the future.



SEPTEMBER

Preventing Injection-Associated Infections in Outpatient Settings

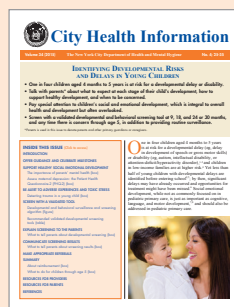
- Injection-associated infections are preventable, but they continue to occur in outpatient settings.
- Never use the same needle, syringe, or intravenous equipment for more than one patient.
- Dedicate multidose vials (eg, for a short-acting anesthetic) to a single patient whenever possible.
- Report suspected and confirmed health care-associated infections and unsafe infection control practices.



OCTOBER

Identifying Developmental Risks and Delays in Young Children

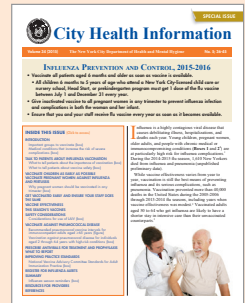
- One in four children aged 4 months to 5 years is at risk for a developmental delay or disability.
- Talk with parents/caregivers about what to expect at each stage of their child's development, how to support healthy development, and when to be concerned.
- Pay special attention to children's social and emotional development, which is integral to overall health and development but often overlooked.
- Screen with a validated developmental and behavioral screening tool at 9, 18, and 24 or 30 months, and any time there is concern through age 5, in addition to providing routine surveillance.



NOVEMBER (SPECIAL ISSUE)

Influenza Prevention and Control, 2015-2016

- Vaccinate all patients aged 6 months and older as soon as vaccine is available.
 - All children 6 months to 5 years of age who attend a New York City-licensed child care or nursery school, Head Start, or prekindergarten program must get 1 dose of the flu vaccine between July 1 and December 31 every year.
- Give inactivated vaccine to all pregnant women in any trimester to prevent influenza infection and complications in both the woman and her infant.
- Ensure that you and your staff receive flu vaccine every year as soon as it becomes available.



NOVEMBER

Preventing Falls in Older Adults

- A fall can mean the end to independent living, or even death, for adults aged 65 years and older.
- Make annual screening for risk of falls a priority with all older patients and perform a multifactorial evaluation of those at risk.
- Use CDC’s **STEADI** toolkit to integrate fall prevention into routine clinical care.
- Recommend regular physical activity, correction of home hazards, and medication adjustments to reduce fall risk.



DECEMBER

Helping Patients Make Healthy Eating Choices

- Talk to every patient about healthy eating—everyone can benefit.
- Explain the healthy eating basics: preference, portions, and proportion.
- Use a simple educational tool such as the **Healthy Eating Plate** to focus the conversation.
- Work with your patient to set realistic goals.
- Document goals and follow up at each visit.



LOOK AHEAD TO 2016

CHI issues planned for 2016 include

- Detecting and managing depression in adults
- Incorporating the IUD and implant into the contraception conversation
- Talking to parents about childhood immunization
- Preventing benzodiazepine-related overdose
- Summer health and safety
- Judicious use of antibiotics
- Integrating substance use treatment into primary care
- Early intervention for children with developmental delay or disability
- Best practices for end-of-life care

THANK YOU FOR WORKING TO IMPROVE THE HEALTH OF ALL NEW YORKERS IN 2015.

Best wishes for 2016!





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