When I saw the announcement from the Illinois Chapter of the American Academy of Pediatrics (AAP) about an upcoming conference about Healthcare Disparities Among Children and Youth with Special Healthcare Needs (CYSCHN), which was being coordinated by developmental pediatricians Dr. Kruti Acharya from the University of Illinois and Dr. Michael E. Msall from The University of Chicago, I asked if they would be interested in being co-guest editors for an issue of Pediatric Annals. They graciously agreed as well as their team of contributing experts. Drs. Acharya and Msall put together a clinically relevant issue focusing on CYSCHN for general pediatric providers, especially in this challenging and rapidly changing political climate.

As I read each article, I learned a great deal about the approach to providing access to multidisciplinary team-based care and ongoing management for these patients and their families. The common theme is the medical home and the concept of team-based care as recently outlined by the AAP Task Force on Pediatric Practice Change in their policy statement entitled “Guiding Principles for Team-Based Pediatric Care.”1 Even though I have been involved with the multidisciplinary care of pediatric patients from premature infants in the neonatal intensive care unit (NICU) to medically complex ventilator-dependent children, I had not seen the official term “team-based care” used in the literature until I read this statement.1

I have been studying the concept of the medical home and agree that it makes sense for the ongoing care of all pediatric patients. Katkin et al.1 state that “team-based care is considered a foundational element of the patient-centered medical home.” In another recent article, Rienks et al.2 studied the coordination of complex health concerns and medical care of children in child welfare populations, reinforcing the importance and benefit of the pediatric medical home. As each author in this issue states, health care disparities exist with every complex group of CYSCHN including NICU graduates, ventilator-dependent patients, adolescents and young adults transitioning into the adult health care system, children exposed to toxic stress (including violence in their community), and children and their families living in poverty. In addition to their ongoing medical problems, these pediatric patients and their families frequently have ongoing behavioral health problems and access to mental health care is also challenging because of the disparities outlined in the article “Behavioral Health Disparities Among Children and Youth with Special Health Care Needs” by Drs. Anne Elizabeth Glasgow and Benjamin Van Voorhees in this issue.

PAIN ASSESSMENT

In the context of caring for CYSCHN, general pediatric providers need to have a working knowledge of pain assessment because most of these patients have chronic conditions, frequently with an element of acute and chronic pain. In the Feature article for this issue, Drs. Alexandra...
Beltrami, Kolia Milojevic, and Dominique Pateron present a comprehensive review of pain assessment in children age 8 years and younger. After going through the article several times, I decided it would be useful as a reference because Comer Children’s Hospital at The University of Chicago is currently applying for Child Kind certification for pain assessment and management. The certification process is extensive and requires a truly comprehensive needs analysis of all of the child health care providers in the hospital system.

**DRY DROWNING**

In this issue’s Healthy Baby/Healthy Child column, Dr. Denise Dowd presents an interesting and timely article about “dry drowning,” a clinical topic that is being discussed lately. Dry drowning has resulted in an increase in emergency department (ED) visits after choking episodes, frequently involving water in infants and young children. In clinical practice, I have witnessed cases in the ED of infants with choking episodes and prolonged laryngospasm who presented with postobstructive pulmonary edema. Dr. Dowd’s article clarifies what has been presented in media reports about dry drowning and provides a summary about aspects of it.

**REFERENCES**