REACHING THE ADOLESCENT PATIENT. How can the physician "communicate" with the adolescent patient whose physical problems so often are linked to his emotional state? Using groups of youngsters at different age levels, Steven R. Homel, M.D., Department of Pediatrics, Jefferson Medical College and Hospital of Philadelphia, demonstrates techniques and methods that can be applied to general practice. (18 minutes). **1807905**

RECOGNIZING ROLES IN JUVENILE DIABETES, with Donnell D. Etzwiler, M.D., Director, Diabetes Education Center, and Pediatrician, St. Louis Park Medical Center, Minneapolis. A pediatrician gives guidelines for early diagnosis and management of juvenile diabetes and shows which responsibilities of good control should be assigned to physician, health professional, and patient. This presentation was produced with the cooperation of the Council on Scientific Assembly of the American Medical Association.
(16 minutes) (In color) **1822934**

RECURRENT URINARY TRACT INFECTIONS IN CHILDREN, with A. Barry Belman, M.D., Attending Pediatric Urologist, Children's Memorial Hospital, and Assistant Professor of Urology, Northwestern University Medical School, Chicago. How should you evaluate a child with recurrent U.T.I.? Compare your routine with that of a pediatric urologist. (14 minutes) (In color) **1821632**

RENAL BIOPSY: WHEN WILL IT HELP THE CHILD? with Shane Roy, III, M.D., pediatric nephrologist and Associate Professor of Pediatrics, University of Tennessee College of Medicine, Memphis. Using four detailed patient cases, Doctor Roy illustrates the use of renal biopsy. The program includes an actual biopsy procedure. (15 minutes) (In color) **1820830**

RESPIRATORY DISTRESS IN THE NEWBORN: INDICATIONS FOR SURGERY, with Alexander J. Schaffer, M.D., Associate Professor Emeritus of Pediatrics Johns Hopkins University School of Medicine, and Assistant Commissioner of Health of the City of Baltimore, Maryland. The clinical signs of respiratory distress are shown, along with examples of anomalies. Special attention is given to the approach of arriving at a specific diagnosis. (25 minutes) (In color) **1810314**

RESPIRATORY DISTRESS IN THE NEWBORN: MEDICAL CONDITIONS, with Alexander J. Schaffer, M.D., Associate Professor Emeritus of Pediatrics, Johns Hopkins University School of Medicine, and Assistant Commissioner of Health of the City of Baltimore, Md. Indications of respiratory distress in the newborn can be detected prior to labor, in labor and in delivery. The alerting signs are clearly illustrated. Dr. Schaffer also summarizes the general principles of treatment. (22 minutes) (In color) **1810415**

SCREENING PRE-SCHOOLERS FOR NEUROLOGICAL DEFICITS, with N. Paul Rosman, M.D., Professor of Pediatrics and Neurology, and Director of Pediatric Neurology at Boston University School of Medicine, and Boston City Hospital. A 15-minute exam can head off possible learning difficulties. Dr. Rosman tests an apparently normal five-year-old for neurological problems and analyzes his results.
(20 minutes) (In color) **1918443**

SICKLE-CELL ANEMIA: MANAGEMENT, with Roland B. Scott, M.D., Professor and Head of the Department of Pediatrics, Howard University, and Chief Pediatrician at Freedmen's Hospital in Washington, D.C.

There is no curative treatment for sickle-cell anemia, according to Dr. Scott. However, early diagnosis of the disease, which afflicts more than 50,000 black Americans, can ameliorate the most disturbing symptoms. Dr. Scott describes the therapeutic program he follows to enhance survival until the patient reaches puberty — when the natural course of the disease process appears to become attenuated.
(14 minutes) (In color) **1911506**

SICKLE-CELL ANEMIA: SUSPICION AND DIAGNOSIS IN INFANTS AND CHILDREN, with Roland B. Scott, M.D., Professor and Head of the Department of Pediatrics, Howard University, and Chief Pediatrician at Freedmen's Hospital in Washington, D.C. Also V. Bushan Bhardwaj, M.D., Assistant Professor of Pediatrics, Howard University, and Pediatric Hematologist, Freedmen's Hospital.

Sickle-cell anemia afflicts more than 50,000 Americans of African descent. Perhaps another two million black Americans carry the trait.

Until recently, it was believed that little could be done for the disease. Now relief from the symptoms and a prolonging of life are possible.

This telecast features the characteristics of the disease, and the laboratory procedure followed to establish a conclusive diagnosis.
(20 minutes) (In color) **1911407**

SHORT STATURE IN CHILDREN, with Maurice D. Kogut, M.D., Director, Clinical Research Center, Children's Hospital of Los Angeles, Los Angeles, California.

Three standard growth deviations are defined, and those conditions which are responsible for growth retardation — where no obvious disease is present — are described by Dr. Kogut.
(17 minutes) (In color) **1911705**

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