



Children's Hospital Los Angeles
International Leader in Pediatrics

imagine

CHILDRENS HOSPITAL LOS ANGELES
summer 2009





our mission

To make a world of difference in the lives of children, adolescents and their families by integrating medical care, education and research to provide the highest quality care and service to our diverse community.

our history

Founded in 1901, Childrens Hospital Los Angeles has been treating the most seriously ill and injured children in Los Angeles for more than a century, and it is acknowledged throughout the United States and around the world for its leadership in pediatric and adolescent health. Childrens Hospital is one of America's premier teaching hospitals, affiliated with the Keck School of Medicine of the University of Southern California since 1932. The Saban Research Institute of Childrens Hospital Los Angeles is among the largest and most productive pediatric research facilities in the United States.

Since 1990, *U.S. News & World Report* and its panel of board-certified pediatricians have named Childrens Hospital Los Angeles one of the top pediatric facilities in the nation. Childrens Hospital Los Angeles is one of only 10 children's hospitals in the nation — and the only children's hospital on the West Coast — ranked in all 10 pediatric specialties in the *U.S. News & World Report* rankings and named to the magazine's "Honor Roll" of children's hospitals.



Look for this symbol throughout this issue for highlights of Childrens Hospital Los Angeles' community involvement.



On the cover: Sarah Kneeland is Living Proof that Childrens Hospital Los Angeles is Making a World of Difference. (See page 8.)



Lynda Boone Fetter

Member, Board of Trustees
Childrens Hospital Los Angeles

Childrens Hospital Los Angeles has had a tradition of community building since our founding more than a century ago. We are a voice for children everywhere. At the same time, we reach out to our neighbors in Southern California with such vital programs as injury prevention, health insurance access, medical education and literacy. We also are expanding our ability to advance pediatric care with construction of our New Hospital Building.

As a Trustee and former co-chair of the \$10 million campaign for the Childrens Brain Center, I am thrilled to introduce this issue of *Imagine*. My family is proud to have named the Boone Fetter Clinic, which is bringing a wide range of care and assessment services to families impacted by developmental-behavioral issues.

In these pages, you will read about some of the ways Childrens Hospital is working to protect the most vulnerable members of our society and to promote positive child development. In doing so, we partner with many community organizations, public agencies and schools, as well as with our generous supporters.

We invite you to join our efforts to create a stronger community and better future for children and families. •

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emily puopolo age 5



*As we work to heal the
bodies of our patients,
we heal their spirits in
an atmosphere of
compassion and respect.*

imagine**discovery**



discovery

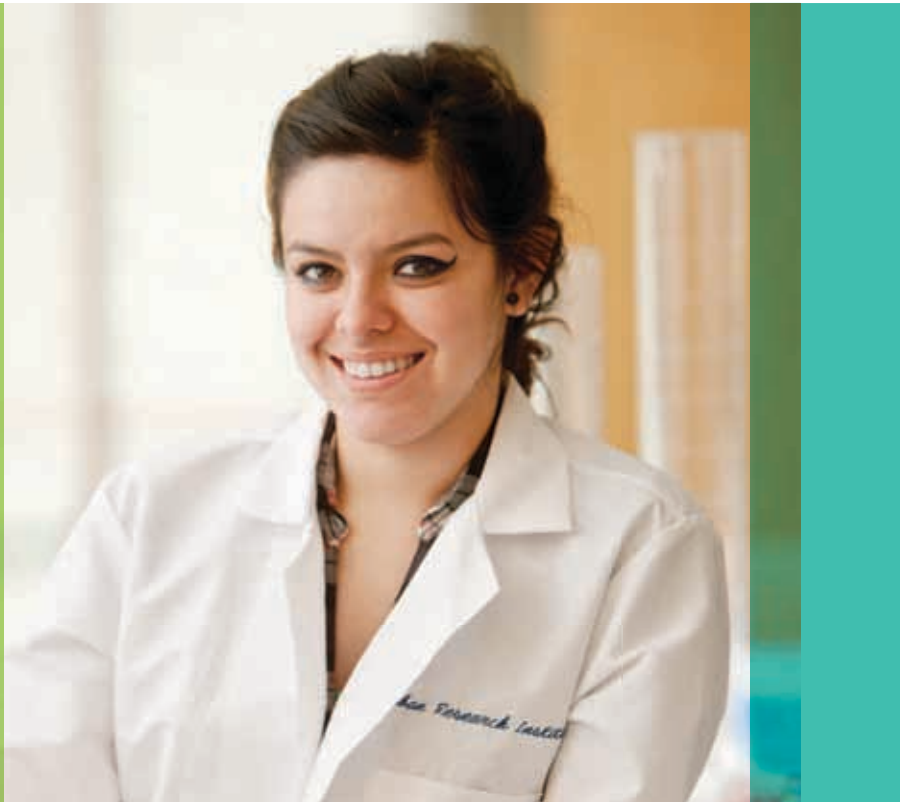


Above left: Eduardo Hernandez did vision-related research during his LA-HIP 2009 internship. Above right: Jovanna Hernandez (no relation), a 2008 LA-HIP graduate, is planning to attend Swarthmore College.

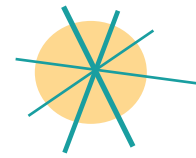
summer. **science.** success.

THE SABAN RESEARCH INSTITUTE OF CHILDRENS HOSPITAL
LOS ANGELES IS GIVING MINORITY HIGH-SCHOOL STUDENTS HANDS-ON
EXPERIENCE AND A DOOR TO THE FUTURE.

To view LA-HIP in action, please visit our official YouTube channel at <http://www.YouTube.com/ChildrensLA>.



The Saban Research Institute also sponsors summer research education for minority undergraduates — the Short-Term Education Program for Underrepresented Persons (STEP-UP), funded by the National Institute of Diabetes and Digestive and Kidney Diseases.



“I’ve always known that education was the way out and the way up,” says Jovanna Hernandez.

The 18-year-old graduate of Los Angeles’ Bravo Medical Magnet High School definitely is on the move.

Come this fall, Jovanna will leave her gang-plagued East Los Angeles neighborhood and start her freshman year at Pennsylvania’s prestigious Swarthmore College. Equally impressive, she will arrive there as a Gates Millennium Scholar, an honor that brings with it an all-expenses-paid education.

The Latina teen credits much of her success to the Latino and African-American High School Internship Program (LA-HIP) at The Saban Research Institute of Childrens Hospital Los Angeles. “Being able to list the internship on my applications really set me apart from other students,” Jovanna explains.

LA-HIP debuted in 2006 with the goal of bringing more minority students into the scientific fold. That fold includes an international staff of nearly 100 scientists and physicians at The Saban Research Institute, which was dedicated under its current name in 2003, in recognition of generous funding from Cheryl Saban, PhD, and Haim Saban, the largest donors in Childrens Hospital’s history.

According to Emil Bogenmann, PhD, EdD, director of research education at The Saban Research Institute,

recent statistics paint a picture of undeniable underrepresentation. “If you look at doctorates earned by African-American and Latino students, these two groups combined represent only about 4.7 percent of the doctorates received across all of the sciences. Clearly,” he adds, “something isn’t working.”

The plain fact is, many minority students simply aren’t exposed to scientific learning opportunities. “So they’re less likely to study in this area or to envision themselves becoming scientists, doctors or researchers,” adds Dr. Bogenmann.

Broadening these students’ vision to include biomedical careers is LA-HIP’s fundamental mission. The inaugural class consisted of eight Latino and African-American students selected from Los Angeles-area public high schools. Each year, the number of applicants and the number of accepted interns has grown. The 2009 LA-HIP class totals 14.

To be considered, students must be entering 12th grade, interested in science and in good academic standing. Applicants are asked to write an essay explaining why they should be selected.

Although academic achievement is scrutinized, grade point average won’t automatically assure or derail admission. “This isn’t a program limited to valedictorians,”



From left to right: Emil Bogenmann, PhD, EdD, in The Saban Research Institute with Jovanna Hernandez and Eduardo Hernandez; Jovanna with her 2008 mentor, Ching-Ling Lien, PhD; Jovanna and Eduardo in the lab.

says Linda Antonioli, former LA-HIP community liaison. “The most important characteristic we look for is potential.”

For six weeks, each intern receives one-on-one mentoring from a member of The Saban Research Institute faculty. After being schooled in laboratory protocols, the interns roll up their sleeves and engage in significant scientific research. Among the topics of these investigations: lung development and repair, gene therapy, heart regeneration, bone marrow transplants, infectious diseases, HIV transmission, stem-cell maintenance and the biology of arenaviruses.

“The experiments these students do here, they normally wouldn’t do until grad school,” notes Dr. Bogenmann, associate professor of pediatrics and molecular microbiology and immunology at the Keck School of Medicine of the University of Southern California (USC).

During her internship, Jovanna was paired with Ching-Ling Lien, PhD, an investigator at The Saban Research Institute and assistant professor of surgery at the Keck School of Medicine. Dr. Lien’s lab-based research focuses on molecular and cellular mechanisms of heart regeneration in zebrafish. With excitement, Jovanna recalls, “You really feel like a scientist and that you’re actually going to discover something important.”

“It was amazing to see how many advanced techniques Jovanna was able to learn in a short amount of time,” notes Dr. Lien. “She helped us get several transgenic lines (in which a genome has been altered), which are essential for our future research.”

As a mentor, Dr. Lien also finds the experience rewarding. “LA-HIP does an outstanding job of reaching out to

our future scientists and doctors, and it gives them the confidence to know that they can accomplish anything they set their minds to.”

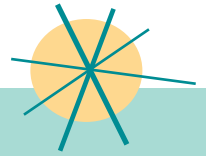
In a culminating challenge, each year’s interns prepare presentations outlining their research findings for an audience of professionals and family members.

LA-HIP has received critical funding from Ted and Lori Samuels; Mr. Samuels is a former chair of The Saban Research Institute committee and vice chair of the Childrens Hospital Board of Trustees. Funding also has come from the Leonetti/O’Connell Family Foundation, which now serves as the program’s primary benefactor, along with additional support from the Kayne Foundation and Union Bank of California.

While science is a central focus, an equally important component involves assisting students and their families through the college admission process. Comprehensive college prep initially wasn’t part of the program, but was added when it became clear that many interns weren’t receiving adequate assistance in this area.

LA-HIP participants receive a Scholastic Aptitude Test (SAT) assessment before their internships start, and SAT-prep sessions are held throughout the summer and into the fall. For Jovanna, that preparation made a marked difference. “I really felt confident,” she says, “and my scores increased a lot.”

Professional college consultants Charlene Liebau and Jean Mandel volunteer to meet individually with interns, mapping out college choices and making sure each application shines. Another volunteer, Samuel Ortiz, senior associate director of clients services in Financial Aid at USC, holds a series of financial aid workshops. The result:



Look where they've landed

An integral component of LA-HIP is helping students gain admission to college. As evidenced by the list below, these LA-HIP interns already are going places.

CLASS OF 2006

Brandon Bell	Princeton University
Lizet Gallardo	US Military Academy at West Point
Vanessa Guzman	Johns Hopkins University
Vanessa Lopez	University of California, Irvine
Alex Marquez	University of California, San Diego
Perla Martinez	University of California, Santa Cruz
Carlos Ramos	University of Southern California
Jessica Sanchez	University of California, Los Angeles

CLASS OF 2007

Karen Amaya	University of California, Berkeley
Andres Artiga	University of California, Irvine
Oscar Calzada	Williams College
Betsy Diaz	Pitzer College
Colleen Gonzales	Pasadena City College
Lauren Kay	Pierce College
Diamond LaBon	Pitzer College
Ana Lopez	University of California, Los Angeles
Chris Ndubuizu	University of California, Berkeley
Deborah Ortiz	Scripps College
Paul Zapata	East Los Angeles College

CLASS OF 2008

Salvador Avila	California State University, Pomona
Mayra Carrillo	University of California, Los Angeles
Martha Cervantes	University of California, San Diego
Kathy Espana	University of California, Berkeley
Alex Gutierrez	Yale University
Jovanna Hernandez	Swarthmore College
Miguel Larios	University of California, Los Angeles
Evelyn Martinez	San Francisco State University
Veronica Martinez	Brown University
Jasmine McCorvey	California State University, Long Beach
Karen Medina	Occidental College
Dianna Soto	University of California, Berkeley
Reginald Wilson	Morehouse College

LA-HIP alumni have been accepted into top-ranked universities coast to coast. (See sidebar at right.)

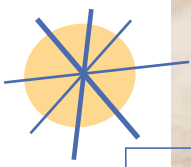
Eduardo Hernandez, who starts his senior year at Fremont High School this fall, hopes his LA-HIP internship this summer will help him land a spot at either the University of California, Berkeley, or the University of California, Los Angeles.

Growing up in South Los Angeles literally doors away from a crack house, Eduardo is a veteran at overcoming adversity. In fact, the 17-year-old was born with a congenital retina malformation in both eyes and was expected to lose his sight before graduating grade school.

Thanks to a skilled ophthalmologist and a succession of surgeries, today Eduardo has excellent vision. He's grateful to have spent his summer conducting vision-related research. In his LA-HIP essay, Eduardo wrote that he wants to become an ophthalmologist "because I would like to return the favor to another person."

Eduardo's desire to "pay it forward" is a tenet shared by LA-HIP. "I want our interns to serve as role models in their communities and to show — by doing — that a career in the sciences is achievable," explains Dr. Bogenmann. He hopes LA-HIP can do some paying forward of its own. "I have seen the tremendous difference this program makes in young people's lives, so my goal is to encourage and help other research institutions to offer similar programs. If this program were available nationwide, we could change the face of science for the better." •

— *carrie st. michel*



Childrens Hospital Los Angeles' critical care expertise has been recognized with a pediatric disaster preparedness grant from the U.S. Department of Health and Human Services. See page 19.

THE LAURA P. AND LELAND K. WHITTIER VIRTUAL PEDIATRIC INTENSIVE CARE UNIT IS PROVIDING REAL-TIME CRITICAL CARE TO CHILDREN — OFTEN MILES AWAY.

keeping watch

All through the night, the teen-aged girl who had just received a bone marrow transplant lay in the intensive care unit, battling severe infection. At her bedside were her worried parents, nurses, a pediatrician — and a 5-foot, 3-inch-tall robot.

On the robot's computer screen "head" was the face of David Epstein, MD, a pediatric intensivist at Childrens Hospital Los Angeles. Working remotely from his home 30 miles away, Dr. Epstein managed the girl's care at City of Hope in Duarte, Calif., via the robot for five hours. He ordered medications, changed ventilator settings, reviewed X-rays, conferred with staff and talked with her parents.

The teenager recovered, and Dr. Epstein later saw her during a clinic appointment. "Her parents told me how grateful they were that I was

'there' on the robot that night," he says. "It gave them peace of mind."

The InTouch Health RP-7[®] robot has been in place for two years in the City of Hope intensive care unit (ICU), where critical care physicians from Childrens Hospital provide care for pediatric patients under a cooperative agreement between the two hospitals.

By day, one of the Childrens Hospital physicians is in the City of Hope ICU in person. At night, the robot allows that physician to work from a distance, whether to check on patients, talk with families or manage a critical situation. He or she simply logs on to the Internet via a special laptop and uses a gaming joystick to maneuver the robot around the unit.

"With the robot, I can instantly beam into the unit without delay,"

explains Dr. Epstein, who typically works in Childrens Hospital's Cardiothoracic Intensive Care Unit and is assistant professor of pediatrics at the Keck School of Medicine of the University of Southern California.

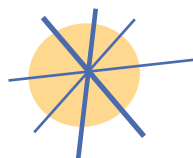
The RP-7 robots are just one part of the Laura P. and Leland K. Whittier Virtual Pediatric Intensive Care Unit (VPICU) at Childrens Hospital. Founded in 1998, along with a pioneering telemedicine program, the Whittier VPICU features the largest database of pediatric critical care patients in the world.

This database facilitates research and provides doctors nationwide with the most up-to-date methods available.

This is important because appropriate intervention in that first "golden hour" after an injury or illness strikes can determine how

David Epstein, MD, examines a patient in the Pediatric Intensive Care Unit at Childrens Hospital while Ashraf Abou-Zamzam, MD, looks on via the InTouch Health RP-7[®] robot.

Childrens Hospital has established a telemedicine robot connection with three Southern California hospitals: Antelope Valley Hospital, Huntington Hospital and City of Hope.





Sarah Kneeland's a healthy 12-year-old now, thanks to a telemedicine intervention.

fast and fully a child recovers — or if he or she recovers at all, says Randall Wetzel, MB, BS, FCCM, FAAP, MBA, chief of the Department of Anesthesiology Critical Care Medicine at Childrens Hospital and director of the Whittier VPICU.

Many children from outlying areas are transferred to Childrens Hospital. “Some get here too late, and some who arrive don’t need to be here,” explains Dr. Wetzel, professor of pediatrics and anesthesiology at

the Keck School of Medicine. “Using telemedicine, we can accurately evaluate a child and get appropriate treatment started. Just being able to see the patient ourselves gives us much more information than a telephone call,” he adds.

Immediate treatment was critical for Sarah Kneeland, who came to Childrens Hospital in 2004. Then seven, Sarah was camping in the Mojave Desert with her family when she had a seizure and briefly stopped breathing. She was taken by ambulance to Antelope Valley Hospital.

At the time, Antelope Valley Hospital’s telemedicine connection with Childrens Hospital involved a hard-wired pushcart with a television monitor, camera and speakers. Using that connection, a critical care fellow from Childrens Hospital was able to see Sarah, watch her breathe and examine the X-ray. The diagnosis: heart failure, probably caused by a virus. The Whittier VPICU team coordinated a treatment plan that could be started right away — even before the Emergency Transport Team arrived.

Once at Childrens Hospital, Sarah was put on a waiting list for a heart transplant, which she received in February 2004. Today, she’s a healthy and outgoing 12-year-old who runs track, plays volleyball and participates in student council. The family — parents Dawn and Matt Kneeland, Sarah, her twin sister, Emily, and older brother, Alex — live in Visalia, Calif., and make the three-hour drive to Childrens Hospital four times a year for Sarah’s checkups.

“I’d love for my local hospital to have this technology,” says Mrs.

Kneeland. “Fortunately, Sarah has been healthy, but if something happened I’d feel much better knowing that the physicians at Childrens Hospital could assess her from afar.”

The Whittier VPICU also has an international reach, hosting educational conferences with hospitals in such faraway lands as India and England. Using videoconferencing technology, pediatric intensivists at both hospitals can make case presentations, discuss patients and conduct joint teaching sessions.

Currently, Childrens Hospital has a telemedicine robot connection with three Southern California hospitals: Antelope Valley Hospital, Huntington Hospital and City of Hope. Antelope Valley Hospital recently installed an RP-7 robot in its emergency room as part of a \$5 million disaster preparedness grant Childrens Hospital received from the U.S. Department of Health and Human Services.

The goal is to install robots in emergency rooms at several Southern California hospitals. In the event of an earthquake or other disaster, critically injured children brought to those hospitals could be managed remotely by physicians at Childrens Hospital. The robots also could be used for everyday telemedicine.

“These robots aren’t about replacing people,” says Ashraf Abou-Zamzam, MD, medical director of telemedicine for the Whittier VPICU and instructor of clinical pediatrics at the Keck School of Medicine. “They’re about bringing people together. We’re connecting our physicians at Childrens Hospital with the children who need them.” •

– katie sweeney

the audrey hepburn CARES team

child advocates

The challenges of caring for children in distress from illness or injury are only magnified when the issue is child abuse. Each year, the Audrey Hepburn Child Advocacy Response and Evaluation Services (CARES) Team at Childrens Hospital Los Angeles evaluates and/or consults on more than 400 cases of physical and sexual abuse, neglect and emotional abuse.

In Los Angeles County, there are 27,000 substantiated cases of child abuse annually and 35 to 40 deaths; Childrens Hospital sees from three to eight such deaths every year.

Grim news, but it isn't all negative. The Audrey Hepburn CARES team is able to rule out another 200 to 250 cases of suspected abuse yearly. Recently, these included the case of a mother who was under-feeding her baby. Upon closer examination, team members determined that the mother wasn't purposefully neglectful — she didn't fully understand the written feeding instructions. Once the mother was given illustrated procedures, her baby began gaining weight.

The Audrey Hepburn CARES Team is one of the few child abuse teams in Southern California whose members are formally trained in developmental and behavioral pediatrics, as well as in identifying child abuse.

“Our expertise enables us to address each family’s issues as a whole,” says Karen Kay Imagawa, MD, director of the Audrey Hepburn CARES Team and of the Developmental-Behavioral Pediatrics Program at Childrens Hospital. Other core team members are Sandy Himmelrich, LCSW, coordinator; Elizabeth Wilson, MSW, case manager; Dawn Canada, LCSW; Lisa Hornak, MSW; and Bryce Imbler, LCSW.

Founded in 1994, the Audrey Hepburn CARES Team took on the name of the legendary actress and humanitarian in 2002, in recognition of generous funding from the Audrey Hepburn Children’s Fund, chaired by her son, Sean Hepburn Ferrer. Longines Watch Company also was a founding sponsor of the program.

Now, actress Jennifer Love Hewitt, star of TV’s “Ghost Whisperer,” serves as the team’s “honorary godmother.” Ms. Hewitt, who portrayed Audrey Hepburn on television, has hosted fund raisers, initiated toy drives and visited children at the hospital.

To assure that children receive the services they need, the Audrey Hepburn CARES Team coordinates closely with other professionals within Childrens Hospital, including the

Emergency Department and Trauma Program. The team routinely partners with law enforcement, the courts and community-based organizations, and provides training inside and outside the hospital on child abuse topics.

Childrens Hospital collaborates with the Los Angeles County Department of Children and Family Services as one of six Foster Care Hubs in the county. “We want to give foster children some stability and break the cycle of moving from home to home,” notes Dr. Imagawa, assistant professor of pediatrics at the Keck School of Medicine of the University of Southern California.

Within the CARES clinic, each child receives a forensic examination in a room decorated with glow-in-the-dark fish. Dr. Imagawa allows each child to choose who will be present (except for the alleged abuser), as well as a toy, game or story. Each procedure and piece of equipment are carefully explained. Children can say “Stop” at any time during the exam.

“We try to give them back a sense of control,” she says, “when they didn’t have control at a very important moment in their lives.” •

– candace pearson



SOURCE: THE AUDREY HEPBURN CARES TEAM

Child's drawing depicting violence in the home



unlocking autism



autism spectrum disorder

Children with the following developmental concerns should have an immediate evaluation:

- Not smiling by six months of age
- No facial expressions or back-and-forth sharing of sounds by nine months
- No babbling by 12 months
- No gesturing by 12 months
- No single words by 16 months
- No two-word phrases by 24 months
- Loss of language or social skills at any age

SOURCE: THE COUNCIL ON CHILDREN WITH DISABILITIES

THE CHLA-USC INSTITUTE FOR THE DEVELOPING MIND IS BUILDING A CLINICAL ARSENAL AGAINST AUTISM SPECTRUM DISORDERS BASED ON INNOVATIVE RESEARCH.

Mary didn't walk until she was 15 months old. By age two-and-a-half, she had a 20-word vocabulary, including "milk," "apple," "no" and "ball." However, she couldn't combine two words to say, for example, "more milk." When she played with a toy, she focused on the task and wouldn't make eye contact or interact with others playing with her.

While their pediatrician assured her parents that their first-born was simply a late bloomer, the young couple had a sense something was not right. "We felt like we were holding our breath that whole time," recalls her mother.

Desperate for answers, the family brought Mary to the Boone Fetter Clinic, part of the new CHLA-USC Institute for the Developing Mind (IDM) at Childrens Hospital Los Angeles. There she was seen by a team of experts, including a developmental pediatrician, child psychologist, pediatric occupational therapist and a speech and language pathologist. After a full evaluation, Mary was diagnosed with Autism Spectrum Disorder (ASD).

Health care providers think of autism as a "spectrum" disorder, a group of disorders with similar features. In the United States, one in 150 children is diagnosed with ASD each year, with a range in severity. This complex developmental disability typically features rigid routines, repetitive behaviors, limited social interaction and delayed language skills.

The brain's intricate circuits are the key to understanding autism. Scientists increasingly agree that this neurodevelopmental disorder, which robs many children of the ability to communicate and relate to others, has its origins in the development of the brain.

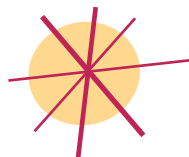
Within the medical community, however, there are many unanswered questions: What causes autism? Why are its effects so varied? Are environmental factors contributing to the growing number of cases? At The Saban Research Institute of Childrens Hospital Los Angeles, investigators are searching for clues.

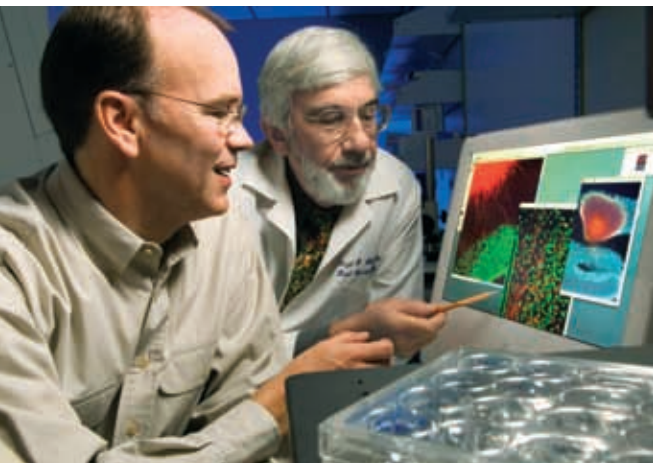
The hope: that this interdisciplinary, bench-to-bedside research effort to identify the biology behind autism eventually could lead to a cure. "The



Above and opposite page: Mary was seen by a team of experts in the Boone Fetter Clinic.

To see video footage on autism care and other hospital programs, please visit our official YouTube channel at <http://www.YouTube.com/ChildrensLA>.





Richard Simerly, PhD, left, head of the Neuroscience Program at The Saban Research Institute, with Floyd Gilles, MD, head of the Childrens Brain Center and vice chair of the Department of Pathology and Laboratory Medicine at Childrens Hospital

numbers of reported cases of ASD are staggering,” says Richard Simerly, PhD, head of the Neuroscience Program at The Saban Research Institute and professor of pediatrics and biology at the Keck School of Medicine of the University of Southern California. “The complexity lies in the fact that no one understands the process that leads to autism. Research is a vital part of the equation. We are building on recent progress in developmental psychology, neuroimaging, neurobiology and neurogenetics to find the answers.”

To translate novel findings from basic research into much-needed therapies, the IDM is bringing together scientists and physicians with complementary backgrounds

to generate improved methods of clinical assessment and treatment.

In 2008, the IDM launched expanded clinical diagnostic and treatment services at Childrens Hospital with the Boone Fetter Clinic, funded by a gift from the Boone Family Foundation.

In addition, the Las Madras Endowment for Autism Research, Interventions and Outcomes, awarded in 2007, is funding the IDM’s Research Diagnostic and Intervention Lab, which will develop tools and technologies for early diagnosis and intervention effectiveness. It also will develop tools for use in community settings, such as schools and pediatricians’ offices, to build capacity to screen for, diagnose and treat ASD and related disorders.

Under the leadership of Michele Kipke, PhD, director of the Community, Health Outcomes and Intervention Research Program and associate director of The Saban Research Institute, the IDM is bringing the latest knowledge directly to children like Mary.

There is no cure for autism, but early diagnosis and treatment are critical for optimal development. “Every case is so unique; some children need extensive speech therapy, whereas others might benefit from social skills training and other supportive services, particularly teenagers with Aspergers Syndrome (a high-functioning form of ASD),” explains Dr. Kipke, professor of pediatrics and preventive medicine at the Keck School of Medicine. “The brain has enormous plasticity during the first few years of life, and early intervention gives us the potential to change its formation.”

At the Boone Fetter Clinic, each family receives a detailed, written report that summarizes their child’s verbal, social, behavioral, physical and development history and current assessment. The report provides recommendations for case planning and needed therapies.

“Having a child diagnosed with autism can be paralyzing for some parents,” explains Larry Yin, MD, medical director of the Boone Fetter Clinic and assistant professor of clinical pediatrics at the Keck School of Medicine. “But parents need to act fast and seek intervention. We have seen that children who receive proper therapy before age five show tremendous improvements.”

Based on the Boone Fetter Clinic’s diagnosis, the Inland Regional Center increased Mary’s therapy from nine hours to 39 hours a week. “She clearly is responding to the various forms of therapy,” says her father. “While she still has a long way to go, it is as though a light has been switched on; she is more aware of others around her and is more engaged and connected.”

Currently, an accurate diagnosis for ASD can be made between two-and-a-half and three years of age. As neurobiologists gain a greater understanding of the brain’s pathways, their findings could lead to new solutions.

“We need to understand the development of brain circuitry and behavior,” says Dr. Simerly. “By having multiple disciplines collaborate closely on research that impacts early diagnosis and treatment, we’ll be able to offer a brighter future for children who have ASD.” •

– elena epstein



james cantor age 4

1

*No one can succeed alone
in tackling children's
issues. We join with others
determined to strengthen
our community.*

imaginecommunity



a stronger community



Top: Narine Petrossian assists Darrell Watson with a new bicycle helmet at a hospital event. Bottom: Dawn Goldfarb straps her youngest daughter, Isla, into a car seat at Childrens Hospital, under the watchful eyes of Olga Taylor, a certified child passenger safety technician.

Like any young, growing family, Dawn and Jim Goldfarb are concerned with keeping their children safe — including on the busy, Southern California roadways.

That’s why, when it came time to install proper car seats for their daughters, Siena, two-and-a-half years old, and Isla, five months old, the Los Angeles couple turned to Childrens Hospital Los Angeles for its expert advice. In fact, the Goldfarbs have relied on the hospital’s car seat installation experience not once but three times as their daughters begin to grow from infant to toddler seats.

“Knowing the installation is being checked by certified installers at Childrens Hospital gives us that extra feeling of confidence,” says Mrs. Goldfarb.

Keeping children safe — on the road, at home, in swimming pools, on playgrounds or just about anywhere — is just one of the priorities of Childrens Hospital’s comprehensive community programs.

The hospital offers twice-monthly child passenger safety

classes to community members, in collaboration with such partners as SafetyBeltSafe U.S.A. and the California Highway Patrol. “We find that close to 98 percent of car seats brought to us for inspection have been recalled, broken or installed incorrectly,” says Olga Taylor, community outreach coordinator in Community Affairs at Childrens Hospital.

“Having a partner like Childrens Hospital extends our resources and enables us to reach more people,” notes Alex Delgadillo, public information officer with the California Highway Patrol.

One of the state’s first fatalities in 2009 was a five-year-old boy ejected from a car because his car seat was not appropriately installed, he adds. “Incidents like this are an ongoing reminder of the importance of the work Childrens Hospital is doing daily on behalf of kids.”

“The health and social issues in our communities are significant — no one organization can address them alone,” explains Ellen Zaman,

childrens hospital community health 2008

400+

FAMILIES RECEIVED
CAR SEATS

200+

CAR SEATS CHECKED
AND INSTALLED

98%

OF CAR SEATS CHECKED
HAD A PROBLEM



FACHE, director of Community Affairs. To improve community health, the hospital regularly collaborates with dozens of community organizations, civic offices, schools, faith-based groups, nonprofit advocacy groups and others. “Working in partnership with other organizations helps the hospital address health and social issues affecting underserved populations,” says Ms. Zaman.

Most important, these outreach efforts are based on a community needs assessment conducted every three years with other hospitals in the urban Los Angeles center. The next assessment will begin in 2010.

In 2008, Childrens Hospital provided more than \$97.1 million in Community Benefit, including care for low-income patients, unfunded support for research, graduate medical education and community outreach programs for children and families.

The hospital’s varied efforts to improve community health encompass expanding access to health services for families; providing

commitment in action

Throughout Childrens Hospital Los Angeles, Centers of Excellence, divisions and departments are facilitating a wide range of services that benefit the community — represented by these examples. “Our commitment to helping children and families lead healthier lives extends far beyond our walls,” explains Richard D. Cordova, FACHE, Childrens Hospital’s president and chief executive officer. “We define ‘community’ in both a local and a global way.”

- » Children are building literacy skills through Childrens Hospital’s Reach Out and Read, the Saban Story Corner Volunteer Reading Program and Literally Healing™ therapeutic library service.
- » The Johnny Mercer-Mark Taper Artists Program at Childrens Hospital gives young patients a chance to express their feelings with art, music and poetry.
- » The Childrens Orthopaedic Center offers free screenings in the Los Angeles Unified School District for scoliosis or abnormal curvature of the spine, which appears most often in young adolescents.
- » The Division of Adolescent Medicine will oversee implementation of gang prevention services for youth ages 10-15 and families in the Cypress Park/Northeast Zone of the City of Los Angeles’ Gang Reduction and Youth Development (GRYD) Project.
- » The University of Southern California’s University Center for Excellence in Developmental Disabilities at Childrens Hospital provides education and assistance to professionals and consumers, in addition to its active research agenda.
- » The Childrens Center for Cancer and Blood Diseases sponsors an online search engine for childhood cancer and blood disorders.
www.searchhope.org
- » The Center for Endocrinology, Diabetes and Metabolism offers an interactive, online weight loss program for teens everywhere.
www.ChildrensHospitalLA.org/CEDMWeightLoss
- » The New Hospital Building, now under construction, will include the Bill and Helen Close Family Resource Center, with 24-hour, multilingual information on treatments and services.

480

BICYCLE HELMETS
GIVEN OUT

90+

COMMUNITY HEALTH & SAFETY
EDUCATION EVENTS

33,000

FAMILIES ATTENDED HEALTH &
SAFETY EDUCATION EVENTS



special services for underserved populations, such as children and youth with disabilities, chronic illnesses and other needs; and conducting research that cures disease and saves lives.

Safety lessons

For the past six years, Childrens Hospital has partnered with Kohl's Department Stores and its Kohl's Cares for Kids® Program to educate local families on 10 topics: home, toy, bicycle, fire, water, sports, passenger, poison, school and earthquake safety.

In 2008, thanks to the Kohl's Safety and Injury Prevention Program, 480 bicycle helmets and more than 2,000 home safety kits were provided at community venues. The hospital also joins with Radio Disney, the leading radio network for kids, to produce safety-related public service announcements.

Childrens Hospital takes its health and safety messages to a wide variety of community health and safety fairs throughout Los Angeles County. These include such diverse neighborhoods as Hollywood, Central City, South Los Angeles, Pico-Union, East Los Angeles, Highland Park and the cities of Glendale, Pasadena, San Fernando, Whittier and others.

Many safety lessons are directed at children. Narine Petrossian, project assistant, focuses on home safety presentations for families with children under three years. Rolando Gomez, health education associate, says, "Children get excited learning about safety and are eager to put what they learned into practice."

Healthier futures

Increasing access to health care also is a top priority. The hospital makes families aware of available health care resources and programs in conjunction with local community coalitions. "This, along with other hospital programs, helps improve access to care for many more children in our surrounding community," says Ms. Zaman.

The hospital's involvement with local schools and various community initiatives gives young people the chance to explore health careers. Each year, Camp CHLA, sponsored by the Patient Care Services Department, introduces high school students to health careers in a five-day on-site job shadowing experience. The Saban Research Institute gives talented teens from urban high schools the chance to learn research skills in the Latino and African-

American High School Internship Program. (See page 4.)

In another type of community-building, Childrens Hospital worked with its neighbors to spearhead the East Hollywood Business Improvement District in 2008. With the construction of its New Hospital Building now under way, Childrens Hospital already has brought new energy to the community's revitalization.

For the Goldfarb family, the hospital has made them feel safer in more ways than one. This June, when Siena fell from a slide and broke her arm, the family's pediatrician referred them to their car seat adviser: Childrens Hospital and its Childrens Orthopaedic Center. "It's been an incredible experience," says Mrs. Goldfarb. "We're very happy Childrens Hospital is part of our neighborhood." •

— candace pearson

community health 2008

2,000+

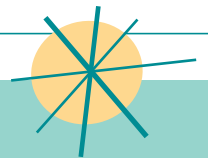
HOME SAFETY KITS DISTRIBUTED

300

CHILDREN & FAMILIES ASSISTED WITH HEALTH COVERAGE APPLICATIONS

\$97.1 MILLION

TOTAL COMMUNITY BENEFIT



disaster preparedness

protecting the children

Try to visualize the immediate aftermath of a major disaster in Los Angeles County. Whether an earthquake, terrorist attack or deadly pandemic, any large-scale event could overwhelm the roughly 100 hospitals that serve about 10 million residents, more than 25 percent of whom are children.

Fortunately, Los Angeles County also is home to a world-class pediatric facility and designated Level I Pediatric Trauma Center, with verification by the American College of Surgeons — Childrens Hospital Los Angeles.

In 2007, Childrens Hospital became one of only five institutions nationwide funded by the U. S. Department of Health and Human Services to improve community and hospital preparedness for public health emergencies.

“We’ve accepted a challenge to lead pediatric disaster preparedness in this county,” says Jeffrey S. Upperman, MD, FACS, FAAP, director of the Trauma Program and the Pediatric Disaster Preparedness Program at Childrens Hospital Los Angeles.

In May, Dr. Upperman’s team tackled that mission by hosting the second annual Disaster Olympix. Designed to help frontline responders hone their disaster care skills, the event was a fast-paced obstacle course of pediatric

emergency challenges. This year, Surge World debuted — a triage simulation game available on the hospital’s web site.

For the past two decades, the institution has staged emergency drills that teach hospital staff best practices in prioritizing ill or injured patients. Medicines and equipment have been stockpiled, including a decontamination van, masks and gowns, cots and cribs, antibiotics and child-size ventilators and intravenous catheters that can be transported to facilities that need them most.

Now, armed with the \$5 million federal preparedness grant, the hospital is taking on added responsibilities. Kathleen Stevenson, RN, BSN, Pediatric Disaster Resource Center core leader, works with emergency providers throughout the county, fine-tuning their plans for coordinated disaster care. One top priority is education. “Providers need to know how to care for children impacted by trauma, correctly and quickly,” she says.

Face-to-face training is unrealistic, given the 4,000-square-mile sweep of Los Angeles County. Dr. Upperman’s team concentrates on technologies that overcome geographic distance. Among these techno-tools are the InTouch Health RP-7® robots that link



Edson Colmenares, Engineering Department, at the 2009 Childrens Hospital Disaster Olympix preparedness training

specialists at Childrens Hospital to outlying facilities. (See page 8.)

Similarly, the team is creating computer software to help with family reunification. In a real disaster, when children may arrive for emergency care without parents, this online system could help hospitals and other first responders locate adult family members.

The Pediatric Disaster Resource Center will move to expanded space next to the Emergency Department in the New Hospital Building, currently under construction. More room and resources will mean the ability to assist more local facilities in developing improved preparedness strategies relevant to their particular communities.

That’s as it should be, because disaster planning is not only about computer software and robotic medicine, says Dr. Upperman, associate professor of pediatric surgery at the Keck School of Medicine of the University of Southern California. “It’s also about building community. If the worst ever happens, we’ll all need family and friends to help us. That’s not technology — that’s loving, tender care.” •

– kate vozoff

For more on this program, visit www.chladisastercenter.org.

 profile



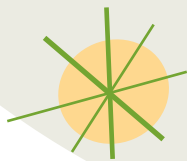
ayana bahar [performer extraordinaire]

Ayana Bahar just loves to dance — whether tap, ballet, Bollywood or hip-hop. This 12-year-old doesn't let the fact that she has sickle cell anemia slow her down, whether she's playing keyboard, double-dutch jump roping or taking part in a show at her performing arts middle school. "Being able to perform makes me happy," she says.

Another thing she enjoys is visiting the Chase Place playroom at Childrens Hospital Los Angeles, where she can create "crafty" presents for her mother, including greeting cards, magnets and jewelry. "Every time I come, there's something new to do."

Ayana's been coming to the Division of Hematology/Oncology in the Childrens Center for Cancer and Blood Diseases since birth, when her parents, LaShun and Hassan Bahar, learned their daughter has the inherited blood disease. The first years were sometimes difficult, with Ayana suffering occasional fevers or the pain of a sickle cell crisis. Now, the honor roll student is mostly symptom-free. Every three weeks, Ayana returns to the hospital for a blood transfusion, which helps reduce the chances of potentially life-threatening complications.

Those transfusions are so important to Ayana that she overcame any shyness to speak at a luncheon on behalf of the hospital's Blood Donor Center, part of the Division's ongoing drive to encourage community blood donations. "The people at Childrens Hospital are so nice," Ayana says of her medical team. "I'm glad I have them, because without them, I wouldn't get the treatments I need." •



To sponsor a blood drive or make an appointment to give blood, please visit www.ChildrensHospitalLA.org/DonateBlood or call 323-361-2441.

one-stop **service**

IN THE AMBULATORY SURGERY CENTER AT CHILDRENS HOSPITAL LOS ANGELES, “ORDINARY” CONDITIONS GET EXTRAORDINARY CARE.



For as long as he can remember, 11-year-old Jesus Cervantez has wanted to play soccer. He couldn't, though. So he's just sat on the sidelines, watching.

Jesus was born with a tarsal coalition — abnormal connection of his foot bones. The congenital defect wasn't apparent at birth, but as Jesus learned to walk, his left foot started to angle outward. Then, as he got older, he began to limp — a little more each year — and it hurt to join his friends on the sports field after school. “No matter how hard I tried,” he says, “I was the worst one.”

Not anymore, thanks to two recent surgeries at Childrens Hospital Los Angeles. In the first, Jennifer M. Weiss, MD, director of the Sports Medicine Program in the Childrens Orthopaedic Center, separated the boy's fused bones. Jesus stayed overnight in the hospital. The operation eliminated his pain, but even after six months of follow-up physical therapy, his foot still turned outward.

So in April, Dr. Weiss, assistant professor of orthopaedic surgery at the Keck School of Medicine of the University of Southern California, performed a second surgery. This time, she could offer Jesus and his family the convenience of the hospital's Ambulatory Surgery Center (ASC). “For healthy kids like Jesus, it's ideal,” she says. “Patients having relatively simple operations can arrive in the morning and be back home before dinner.”

Childrens Hospital's Department of Surgery performs more than

14,000 surgical procedures annually. Its Burtie Green Bettingen Surgery Center includes 15 state-of-the-art operating rooms, each equipped for the most complex procedures. Meanwhile, the ASC, now in its second year, handles roughly 60 percent of the hospital's overall surgical load.

A one-stop service for procedures such as tonsillectomies, placement of ear tubes, hernia repair, cataract removal, scar revision and various orthopaedic surgeries, the ASC combines efficiency with unparalleled pediatric skill. “Parents get a relaxed experience, along with the assurance that a top-flight pediatric team is caring for their child,” says Nancy Bridges, RN, MBA, CNOR, operating room operations manager.

“Although other local ambulatory centers can operate on youngsters, only this one cares exclusively for children,” notes Kenneth A. Geller, MD, MEd, FACS, FAAO-HNS, FAAP, vice chair of the hospital's

Department of Surgery, head of its Division of Otolaryngology and chair of the Surgery Center Operations Committee, which manages the ASC.

In essence, the ASC functions as a compact hospital nestled inside a much bigger, more complex pediatric facility. Within such a setting, board-certified pediatric surgical subspecialists can safely serve patients who might not be good candidates for other centers — such as children and teens with congenital heart disease or asthma. “Every imaginable specialist is just an elevator ride away, should these skills ever be needed,” adds Dr. Geller, associate professor of clinical otolaryngology at the Keck School of Medicine.

Shortly after checking in, each patient visits the ASC Chase Place playroom, where a child life specialist uses dolls and sample surgical equipment to explain what will happen. Then the family’s off to pre-op for medication to help the child feel drowsy. The ASC offers four operating suites and general anesthesia for every procedure. When surgery is over, youngsters move to recovery for observation. Before families leave, nurses review home care instructions with them. All told, many families are in and out within two hours.

It’s a remarkable model, and one that Childrens Hospital has started to replicate in the community. Recently, the hospital and a number of its physicians partnered with the



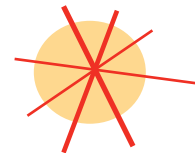
Above: Jesus Cervantez, 11, has had two surgeries to correct a problem with the bones of his foot. Opposite page: Jesus with his brother, Bryan, and his sister, Elizabeth.

Specialty Surgical Center in Arcadia and Symbion, Inc., a national operator of ambulatory surgical facilities. Through collaborations like this, the hospital is bringing extraordinary care to “ordinary” conditions even closer to home.

For Jesus and his family, coming to the ASC meant a relaxed and convenient hospital experience. “Plus my foot’s finally going to work right,” he says. “So I can try out for my school soccer team!” David Beckham, look out. •

– kate vozoff

Childrens Hospital Los Angeles is taking the Amulatory Surgery Center model to the community, in partnership with hospital physicians and other organizations. First stop: Arcadia.





Children's Miracle Network

honor roll of friends

Children's Miracle Network (CMN) is the alliance of premier children's hospitals dedicated to saving and improving the lives of children. Sponsors of CMN, their employees and customers help raise millions of dollars each year for more than 170 CMN-affiliated children's hospitals throughout North America, including Childrens Hospital Los Angeles.

Childrens Hospital Los Angeles has been a member of the alliance of premier pediatric hospitals since CMN's founding in 1983. Over the past 26 years, generous sponsors have contributed nearly \$3.4 billion to CMN, enabling its hospitals to treat 17 million children annually for every disease and injury imaginable. In calendar year 2008, these donations totaled

\$5 million to care for children treated at Childrens Hospital Los Angeles.

We offer our heartfelt appreciation to these sponsor organizations for their dedication, support and tireless work on behalf of children. Each sponsor, employee or volunteer who participates is a true hero. We would especially like to thank 104.3 MYfm for giving its passion and talents in hosting the MYfm Radiothon each

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Childrens Hospital Trustee Peggy Tsiang Cherng, PhD, left, co-chair of Panda Restaurant Group, and her husband, Andrew, founder and chairman of Panda, brought their successful company into the Children's Miracle Network family.

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Candace Pearson

WRITERS
Elena Epstein
Candace Pearson
Carrie St. Michel
Katie Sweeney
Kate Vozoff

PHOTOGRAPHY
Keats Elliott
Mimi Haddon
Walter Urie

Imagine is published by:
Childrens Hospital Los Angeles
4650 Sunset Boulevard, Mail Stop #29
Los Angeles, California 90027
323-361-2308
www.ChildrensHospitalLA.org



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For more information please visit us at
www.childrenshospitalLA.org

