imagine

CHILDREN'S HOSPITAL LOS ANGELES

fall 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.

On the cover: Isaac Ramos, right, with his brother, Ivan, is Living Proof that Childrens Hospital Los Angeles is Making a World of Difference. See page 18.
At Childrens Hospital Los Angeles, we routinely treat the sickest, most severely injured kids. Our physician-scientists and investigators conduct research to find the underlying causes of diseases that affect kids and adults, as well as exciting new treatments.

Another equally important aspect of our mission is education. Simply put, this is one of America’s premier teaching hospitals. I’m proud to note that Childrens Hospital trains more future pediatricians than any other facility in Southern California. Two-thirds of graduating medical residents we train remain in Southern California to practice. The remaining third take what they’ve learned here to help improve the health of kids across the United States and the world.

Teaching takes many forms at Childrens Hospital. In this issue of Imagine, you will read about our prestigious graduate medical education program and training programs for nurses, scientists and other health care professionals. You’ll also learn about the ways we educate our patients and their families.

Education isn’t just a building block for the individual. It’s a building block for society. Please join us with your support to continue these vital programs.
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As a teaching hospital, we are advancing medical knowledge as we train tomorrow’s health care professionals.
Childrens Hospital receives approximately 700 applications annually for 31 positions in its highly regarded Pediatric Residency Program.

leadership profile
The George C. Page Residents Hall is named for George C. Page, the philanthropist and Childrens Hospital leader who was founder of Mission Pak, a citrus and dried fruit packaging business. Together with his wife, Juliette, Mr. Page made a generous commitment to Childrens Hospital that began in the 1940s.

As one of Childrens Hospital’s chief residents, Carley Riley, MD, MPP, juggles family and work. Above, Dr. Riley with her husband, Dave, and daughters, Finley, three, left, and Tacey, five, outside the George C. Page Residents Hall. Left, top to bottom: Dr. Riley and her husband make breakfast for the girls before he takes them to school. Opposite page: early morning time together.
Thursday, 6 a.m.: As she does every morning, Carley Riley, MD, MPP, begins her day on the run — literally. After a 30-minute jog around her neighborhood, she heads back to her apartment at the George C. Page Residents Hall, where she and many residents at Childrens Hospital Los Angeles live with their families. At 7:25 a.m., she says her goodbyes to her husband, Dave, and two daughters, Tacey, five, and Finley, three, and makes her short commute to work: a walk across the street to Childrens Hospital.

The first time Dr. Riley walked through the doors of Childrens Hospital four years ago, she knew she’d found a home — and the perfect place to spend her residency in pediatrics. What she didn’t know was that she’d also found the place that would save her own daughter’s life.

During Dr. Riley’s first week as a resident, Finley developed heart failure and was cared for at Childrens Hospital. Then five months old, she had been born with complete heart block, which prevents the heart’s chambers from properly communicating, and had a pacemaker from her first day of life. Throughout Dr. Riley’s first year of residency, Finley was on multiple medications and hospitalized several times. Then, at age 18 months, she received a new pacemaker at Childrens Hospital, and within hours, her heart recovered.

Today, Finley is happy and healthy, but the experience gave Dr. Riley, who now serves as chief resident and plans a career in pediatric critical care medicine, a lesson she’ll never forget.

“I understand better than ever what it’s like to be a parent coming to the hospital worried about your child,” she explains. “Being on the other side helps me tremendously in relating to families and their concerns.”

8:30 a.m.: The 15-year-old girl can’t walk or talk, but her face lights up with a huge smile when Dr. Riley strolls into the exam room. The teen, who has a neurodevelopmental disorder called Rett syndrome, is the first of many patients Dr. Riley will see during this busy outpatient clinic at Childrens Hospital. Also scheduled: a 20-month-old girl here for...
a well-child checkup, a two-week-old boy on his first-ever clinic visit and a three-year-old boy with an inherited, terminal biochemical disorder called Sandhoff disease.

Many of the patients are familiar faces, as Dr. Riley has been treating them since her days as a first-year resident. Today, she shares chief resident duties with TaShawna Stokes, MD, and Philip Malouf, MD.

It’s a prestigious position in a highly prestigious program. One of America’s premier teaching hospitals, Children’s Hospital trains more pediatricians than any other medical facility in Southern California. Its highly selective Pediatric Residency Program annually receives more than 700 applications for just 31 resident slots. In addition, the hospital’s 19 accredited clinical fellowship training programs train nearly 100 fellows a year in virtually all pediatric subspecialty areas, while 330 medical students rotate through the hospital from the Keck School of Medicine of the University of Southern California (USC) and other medical schools throughout the United States.

All of the hospital’s education efforts are united under the leadership of the Children’s Hospital Institute of Medical Education (CHIME), established three years ago with the help of an anonymous grant. CHIME oversees medical education at all levels, working to enhance training programs, develop innovative techniques to educate and motivate trainees and support faculty members in their teaching and research. Through these efforts, Children’s Hospital is becoming the destination of choice for all who seek excellence in pediatric medicine and surgery.

“We’re training the leaders of the future,” explains Robert Adler, MD, MS Ed, senior vice chair of the Department of Pediatrics and director of medical education at Children’s Hospital and vice chair of pediatrics at the Keck School of Medicine. “The future of our hospital’s reputation and the future of child health are in the hands of the individuals we’re training today.”

12 p.m.: Dr. Riley settles back in a hospital auditorium for the day’s noon conference for residents and bites into a grilled chicken sandwich. She and the other chief residents help organize the lecture series, led by attending physicians and fellows. Today’s topic: diabetic ketoacidosis, a life-threatening complication for patients with diabetes. Dr. Riley often encounters children with the condition, and she’s eager to hear the speaker’s perspective.

If there’s one word to describe the hospital’s trainees, it’s dedicated. Residents undergo three years of rigorous training. “Our residents take care of more patients with a greater variety of diagnoses than in most programs,” says Eyal Ben-Isaac, MD, director of the Pediatric Residency
Program at Childrens Hospital and assistant professor of pediatrics at the Keck School of Medicine. “It’s hard work. But we make sure they gain the experience necessary to feel comfortable taking care of any patient.”

That experience is evidenced by the fact that 97 percent of the hospital’s graduating residents over the past decade have passed the American Board of Pediatrics exam on their first try. Half of these graduates go on to become general pediatricians, with the other half entering pediatric subspecialty fellowships. Approximately two-thirds remain in Southern California to practice.

Childrens Hospital also is one of the only centers in Southern California — and the country — that trains clinical fellows in virtually every pediatric subspecialty area. That’s important because there’s a national shortage of specialists in many pediatric fields. It also means that a team of residents, fellows and board-certified specialists are tending to every child and family in the hospital.

“The days when you had one gray-haired person who knew everything are gone,” adds Thomas G. Keens, MD, vice chair of CHIME and professor of pediatrics, physiology and biophysics at the Keck School of Medicine. “Especially in complex diseases, it helps tremendously to have a team of people caring for every child.”

In addition, all residents are involved in community advocacy work, including educating parents in obesity prevention, asthma care and child safety and helping to secure resources for low-income parents, children with special needs and more. Fellows, meanwhile, are required to complete research projects and often team up with researchers in The Saban Research Institute of Childrens Hospital to pursue cutting-edge treatments for children.

3 p.m.: After meeting with her fellow chief residents, Dr. Riley heads to the floors to touch base with each resident team, and then visits a patient recovering from scoliosis surgery in the Pediatric Intensive Care Unit. The rest of the afternoon is filled with handling resident requests and following up on her clinic patients. At 5:30, she heads across the street for a quiet evening with Dave, Tacey and Finley.

It hasn’t been easy juggling a family and a medical residency, and Dr. Riley credits her husband, who works from home, for making it possible.

“When I came here, I told myself that I just needed to have faith that if I went through this program, I would come out with the training and knowledge that the third-year residents had,” she explains. “It’s been great to have the chance to spend another exceptional year here, learning and growing and helping the other residents. This is an extraordinary place.”

—katie sweeney
the science of learning

GRADUATE EDUCATION AT THE SABAN RESEARCH INSTITUTE OF CHILDRENS HOSPITAL LOS ANGELES ATTRACTS STUDENTS WITH A PASSION FOR EXPLORATION.

At age 28, Steven Tsai — an MD, PhD candidate studying human embryonic stem cells (hESC) in The Saban Research Institute of Childrens Hospital Los Angeles — is aware that some of his friends are already buying houses and “getting on with their lives.”

Meanwhile, he’s five years into a post-graduate education that may take him 12 more years before he achieves his first faculty position at an academic hospital. “I have half of two degrees, but nothing whole yet,” he jokes. Yet he sees the road ahead as a kind of “apprenticeship,” and adds, “It’s worth it.”

After all, he gets to do something every day that he’s passionate about: biomedical research. Mr. Tsai, who is attending the Keck School of Medicine of the University of Southern California (USC), works in The Saban Research Institute laboratories of Carolyn Lutzko, PhD, a stem cell expert and assistant professor of pediatrics at the Keck School of Medicine.

“When you’re doing an experiment, there’s always the possibility that the outcome might be previously unknown,” says Mr. Tsai, “and you might be the one knowing it for the first time.”

That commitment to the wonders of science unites the more than 30 graduate students and nearly 70 post-doctoral fellows who conduct investigations at The Saban Research Institute. In addition, the hospital is home to some 86 clinical fellows annually, who must pursue two years of research to earn board certification in their subspecialties.

To support them on their journey, The Saban Research Institute maintains an academic training environment that includes mentorship, along with regular research seminars, symposia and other learning opportunities. An intramural research award for graduate students supports their stipends.

“Our first challenge is to attract outstanding, dedicated young people who want to devote themselves to scientific careers,” says Emil Bogenmann, PhD, EdD, director of research education at The Saban Research Institute and associate professor of pediatrics and molecular microbiology and immunology at the Keck School of Medicine. “Our next task is to do all we can to help them excel scientifically.”

The studies that graduate students conduct are essential to generating the data needed for principal investigators to advance research to the funding stage, notes Dr. Bogenmann.

Mr. Tsai, for example, is investigating a molecule called Oct-4 that promotes stem cells’ ability to develop into almost any cell type in the body. “If we are going to be able to use stem cells as therapies in the future,” he says, “we have to have a better understanding of their

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The Saban Research Institute is a breeding ground for new scientists. Each year, approximately 30 graduate students and 70 post-doctoral fellows conduct investigations in its laboratories.

Opposite page: Graduate student Anna Kamitakahara, far right, with graduate student Chien-Hua Wang, left, and Karine Bouyer, PhD, postdoctoral fellow.

This page, top: Anna Kamitakahara. Bottom: Steven Tsai, MD/PhD candidate. Left, top: Ms. Kamitakahara with mentor Richard Simerly, PhD, director of the Neuroscience Program. Bottom: Mr. Tsai with mentor Carolyn Lutzko, PhD, stem cell investigator.
PhD candidate Anna Kamitakahara is working in the laboratory of Richard Simerly, PhD, head of the Neuroscience Program at The Saban Research Institute and professor of pediatrics at the Keck School of Medicine. She is studying development of brain circuitry involved in eating behaviors and energy expenditure, in particular the role of serotonin, a neurotransmitter involved in body weight regulation.

She grew up around science, with a physicist father, and never imagined any other career. After graduating from the University of Wisconsin, Madison, with an undergraduate degree in biology, she delayed going to graduate school for two years to work at the National Institutes of Health (NIH). “I wanted to see what it was like to work in a lab full time,” she explains. What she found: “It was interesting every day. There was always something new to find out.”

She was drawn to USC and Childrens Hospital by their strong combination of endocrinology and neuroscience. She is in her third year of what may be a six-year journey to a PhD. Like other young researchers, she finds added inspiration being connected to a leading pediatric hospital. “It feels good knowing we’re working on research that can help kids.”

Suvimol Ming Sangkatumvong, a PhD candidate at the USC Viterbi School of Engineering, dreamed of being the first Thai astronaut. She earned her undergraduate degree in electrical engineering, with an interest in communication satellites. Once at USC, she became immersed in the expanding field of biomedical devices.

Currently, she is bridging the worlds of engineering and biology with two mentors: Michael C. K. Khoo, PhD, professor and chair of the Viterbi School’s Biomedical Engineering Department, and Thomas D. Coates, MD, section head of Hematology in the Childrens Center for Cancer and Blood Diseases at Childrens Hospital and associate professor of pediatrics and pathology at the Keck School of Medicine.

“Each can point out different reasons — mathematical or biological — why an experiment may have achieved a certain result,” explains Ms. Sangkatumvong, who is working to identify biomarkers that may help predict sickle cell crises.

Dr. Coates calls her help equally important. “Her analysis of data we obtained in human physiology experiments was instrumental in getting major NIH funding in sickle cell disease. Equally important, she represents a tangible link between human biology at Childrens Hospital and unique, highly translational methods of studying this biology at the Viterbi School.”

Sheetal Bajaj, MD, came to Los Angeles from her pediatric residency in the United Kingdom to work with Timothy J. Triche, MD, PhD, chair of the Department of Pathology and Laboratory Medicine and pathologist-in-chief at Childrens Hospital, and professor of pathology and pediatrics at the Keck School of Medicine.

She read an article about Dr. Triche’s work with microarray gene chip technology. “He was writing about medicine 20 years into the future,” she says, “and I wanted to be part of this technology from the beginning.”

Today, as a PhD candidate, she is using next-generation genomic platforms to define novel molecular signatures and personalized management tools for children with rhabdomyosarcoma, a common malignant soft tissue tumor. “I am working toward solving questions that have intrigued me as a clinician,” says Dr. Bajaj, “and that is the most rewarding part.”

Though the hours are long, she has found a balance between the personal and professional. Her husband also is a physician-scientist at the Keck School of Medicine. “He works on adult cancers,” she says, “while I’m working on pediatric tumors. We have a lot to talk about at dinnertime.”  

—candace pearson
When Laura MacRae-Serpa decided to make a major career change from marketing to working as a child life specialist, she knew where to get the best on-the-job training — the Chase Child Life Program at Childrens Hospital Los Angeles, supported by The Chase Foundation.

Mrs. MacRae-Serpa joined the Childrens hospital staff in 2005 after completing its 600-hour Child Life Internship Program. Prior to that, she volunteered at the hospital and did her field work in its outpatient clinics while earning her bachelor’s at California State University, Los Angeles.

“i knew that the Chase Child Life Program was particularly comprehensive in the clinical experience it gives you. It stood out above the rest for me,” she says.

The Child Life Internship Program — which links theory to hands-on practice with children, youth and families — is just one of the ways in which Childrens Hospital is instrumental in training affiliated health care professionals.

The hospital also offers clinical pastoral education (CPE), nutrition and pharmacy training and a social work internship. These programs serve to educate new generations of professionals and benefit patients and their families with added layers of pediatric expertise.

As an accredited training center of the Association for Clinical Pastoral Education, the hospital offers three levels of professional education to approximately 18 theological students and clergy annually: Level I and Level II CPE, as well as Supervisory CPE. “With these students, we are able to reach more families than we otherwise would be able to help,” says Rev. Dagmar Greve, manager, Spiritual Care Services, and a certified CPE supervisor.

The training brings theological students and ministers from all faith traditions into supervised encounters with people in crisis. Students visit with patients and family members, perform baptisms and blessings and participate in health care meetings.

To train pharmacists with specialized skills in pediatric pharmacology, the hospital provides a pediatric pharmacy clerkship for fourth-year students at the University of Southern California (USC) School of Pharmacy. “Prescribing medications for a young person is a science in and of itself,” notes Carol Taketomo, PharmD, director, Pharmacy and Nutrition Services at Childrens Hospital and assistant professor of pharmacy practice at the USC School of Pharmacy. During the six-week rotation, students learn about specific medications for children. In addition, a one-year, post-doctorate pediatric fellowship provides exposure and training in medication management of complex pediatric diseases.

For students interested in pediatric nutrition, the hospital has a 20-month Dietetic Internship offered through the USC University Center for Excellence in Developmental Disabilities based at Childrens Hospital.

In addition, a Social Work Internship offers second-year Masters of Social Work students the opportunity to participate in all aspects of social work at the hospital, following patients and families from diagnosis of a medical condition through discharge, home care and end-of-life interventions.

Mrs. MacRae-Serpa, who works in the Pediatric Intensive Care Unit, is thrilled with her career change. As a child life specialist, she works at hospital bedsides and in Chase Place playrooms, helping young patients and their siblings understand and cope with illness and hospitalization.

“I was so well supported throughout my internship, it gave me a lot of confidence,” she says. “i felt prepared to walk into a job that I love.”

—candace pearson
the teaching hospital

Teaching is one of Children's Hospital Los Angeles' primary missions. The hospital has been affiliated since 1932 with the Keck School of Medicine of the University of Southern California. Its faculty educates future physicians, scientists, nurses and other health care professionals from schools around the country and the world.

People who go into academic medicine, who live on the leading edge of scientific discoveries and their applications, are the same kind of people who want to be surrounded by young, inquisitive minds. By asking probing, insightful questions, residents and medical students continually challenge us to stay current on the literature and inspire us to come up with more innovations to quench their insatiable thirst for a deeper understanding of the pathophysiology and treatment of diseases.

HENRI R. FORD, MD*
Vice President and Chief of Surgery, Children's Hospital Los Angeles
Vice Dean of Medical Education, Keck School of Medicine

Being in a teaching hospital requires that you keep up with the latest treatments and technologies, because you're educating residents every day. What's more, for the patients and their families, you always have multiple people caring for the child, ensuring that they truly receive the best and most up-to-date care.

ROBERT M. KAY, MD*
Chief of Staff, Children's Hospital Los Angeles
Vice Chair of the Division of Orthopaedic Surgery

Physicians who've done their pediatric training here at Children's Hospital walk a little taller; they are comfortable and proud of their knowledge of pediatrics. We expose them to a broad spectrum of patients and conditions, which enables them to go out into practice with that as a foundation.

ROBERTA G. WILLIAMS, MD*
Vice President of Pediatrics and Academic Affairs

Through our clinical and research programs, we train international fellows from around the world to become leaders in our field.

ROBERT M. KAY, MD*
Chief of Staff, Children's Hospital Los Angeles
Vice Chair of the Division of Orthopaedic Surgery

EYAL BEN-ISAAC, MD*
Director of the Pediatric Residency Program
Every one of us comes into this place every day with a passion to learn, as well as a fear that we might not know enough. That tension keeps us on the cutting edge of children’s care. We are a learning organization.

**MARY DEE HACKER, RN, MBA**
*Chief Nursing Officer & Vice President of Patient Care Services*

One of my favorite quotes is, ‘When one teaches, two learn.’ Having residents, fellows and other trainees here constantly stimulates us to learn more. That’s why the care is so much better, because as we get asked questions, we constantly have to re-examine our knowledge and expand on it. The learning goes both ways.

**ROBERT ADLER, MD, MS ED***
*Senior Vice Chair, Department of Pediatrics*
*Director of Medical Education*

Mentorship is the foundation for successful teaching and career development. This is particularly true for all the trainees performing the difficult task of research.

**EMIL BOGENMANN, PHD, EDD***
*Director, Research Education*
*The Saban Research Institute of Children's Hospital Los Angeles*
Since the Versant RN Residency in Pediatrics debuted in 1999, 649 nurses have graduated. More than 70 other hospitals nationwide have adopted the standard-setting program.

**leadership profile**


Above: Kristen Owen, RN, visits with her former patient, Devin Hatfield, 13, in the Rehabilitation Unit at Childrens Hospital Los Angeles.
Participants spend 22 weeks in the clinical immersion education program. On the agenda: a combination of patient care, classroom time and skills labs, along with plenty of mentorship.

As a nurse in the Rehabilitation Unit at Childrens Hospital Los Angeles, Kristen Owen, RN, would often check in on 13-year-old Devin Hatfield during his two-and-a-half-month stay.

For Devin, who was suffering from a rare autoimmune disorder that caused life-threatening inflammation of his brain, his favorite nurse became a calming and nurturing influence on him. She also helped comfort his mother, Jenifer Avalos, who spent most days and nights by her son's bedside.

“Kristen’s kindness touched us in so many ways,” says Mrs. Avalos. In order to save Devin’s life, the damaged part of his brain had to be surgically removed, which affected his ability to speak and walk. “She would tell Devin how great he was doing and how proud she was of him,” adds his mother. “Devin would be so excited to see Kristen, but he couldn’t express himself in words, so he would draw a picture of her.”

Watching Devin learn to walk again and slowly get his life back are the incredible rewards that attracted Ms. Owen to a career at Childrens Hospital Los Angeles after her graduation from Glendale Community College in December 2008.

To ease her transition from nursing school and learn the intricacies of working in a complex, acute care pediatric environment, she applied to the hospital’s acclaimed Versant RN Residency in Pediatrics. The 22-week program, launched in 1999, is a unique clinical immersion education program unlike any other in the United States. Residents work closely with their bedside preceptors, spending 75 percent of their time doing direct patient care. The remaining time is spent with their mentors and debriefers and in the classroom and skills labs.

“Being a part of the residency program really helped me not feel lost
imagine fall 09

education

Ashley Morris, RN, second from left, and Danielle Attanasio, RN, focus in a skills lab, along with other participants in the Versant RN Residency in Pediatrics.

in a big hospital,” says Ms. Owen, who graduated from the program in August 2009. As part of her training, she not only honed skills specific to her unit, but also spent time in other relevant units, such as Emergency, Surgery and the Pediatric and Cardiothoracic Intensive Care Units to broaden her scope of practice.

The Versant RN Residency program is the epitome of Childrens Hospital’s commitment to nurse education. With the conviction that nurses are the backbone of a solid health care team, the hospital has been a national leader in advancing education.

“Research has demonstrated that nursing actions, such as ongoing monitoring and patient/family education, are directly related to better patient outcomes,” says Mary Dee Hacker, RN, MBA, chief nursing officer and vice president of Patient Care Services. “We are driven by a commitment to quality and safety and our frontline workers must be on the cutting edge of knowledge.”

Since the inception of the program, 649 nurses have graduated and more than 69 percent are still employed at Childrens Hospital. The program has since been adopted at more than 70 other hospitals throughout the country. Nurses, including 17 nurse managers and nine bedside nurses, teach most of the classes. Another 45 bedside nurses teach the skills labs, which consist of small learning stations.

“Working in a hospital where patients have multiple, complex health issues can be overwhelming for a young nurse,” explains Liz Daley, RN, BSN, CCRN, a program instructor who works in the Cardiothoracic Intensive Care Unit. “I love seeing the RN residents grow and gain more confidence in their ability to handle different situations.”

Support for the program has come from the Confidence Foundation, the Fletcher Jones Foundation, the Milo W. Bekins Foundation and the William Randolph Hearst Foundation. (For more on the Hearst Foundation, see page 24.)

Whether teaching at the bedside, behind a podium at a conference or in a college lecture hall, Childrens Hospital nurses have a distinct passion for learning and teaching, explains Suzanne Taylor, RN, MSN, EMT, director, Clinical Education and Professional Development.

Each year, more than 900 nursing students from various colleges in Southern California come to the hospital for their pediatric rotation. Since 2006, 240 high school students interested in health care careers, including nursing, have participated in Camp CHLA, a weeklong summer program. Throughout the year, nurses participate in various community education programs covering such diverse topics as allergies, nutrition, scoliosis, diabetes and teen suicide. In addition, nurses from Childrens Hospital teach on the faculty of colleges and universities throughout the Southland.

“Teaching really is the essence of nursing,” explains Susan Santner, RN, MSN, operations manager on 5 East, who teaches the clinical rotation for students from California State University, Los Angeles. “We learn from each other — there is a lot of mentorship among our staff.”

While taking on the teaching role, many nurses continue to remain active learners, pursuing master’s degrees and advanced certifications. The hospital offers support through financial aid, scholarships and flexible work schedules to allow nurses to pursue continued education. “We have a very dynamic, fluid learning environment,” says Ms. Taylor, “all of which is vital to our success.”

The emphasis on education helped Kristen Owen make the shift to full-time pediatric nurse. “When you start working, you have so many questions, but there is always someone here to answer them,” she says. “I’m learning every day, and there are times that my heart still races, but I have so many resources available here to continue my education.”

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

matt weiner age 8
hope on the horizon

CHILDREN AND THEIR FAMILIES LEARN HOW TO COPE WITH CANCER OR BLOOD DISEASES FROM DAY ONE THROUGH LONG-TERM SURVIVAL.

“After they came to my class, then all of my friends took good care of me,” says Isaac Ramos.

Seven-year-old Isaac is referring to a visit made earlier this year to his kindergarten class by members of the Hematology-Oncology Psychosocial and Education (HOPE) Program in the Childrens Center for Cancer and Blood Diseases (CCCBD) at Childrens Hospital Los Angeles.

Isaac — who was diagnosed in March of 2007 with medulloblastoma, the most common malignant childhood brain tumor — missed almost an entire year of school because of his treatment. When he was ready to return, the HOPE Program paved the way. Staffers in its School Transition and Re-entry (STAR) program prepared a PowerPoint presentation for his classmates, teacher and principal.

Kid-friendly slides focused on Isaac’s illness, his treatment and how his fellow students could help him at school — such as being careful not to bump his head and understanding why he’s sometimes tired.

STAR is just one of seven programs in the HOPE Program, which stands as the national model for combining clinical care with services designed to meet the emotional, psychological, educational and neurocognitive needs of children and teens diagnosed with cancer or blood disease.

Childrens Hospital was among the first facilities nationwide to recognize that these diseases carry emotional/psychological components that call for specific support services, especially as survival rates climb.

“You can’t put children’s developmental needs on hold, and cancer and blood diseases are family illnesses,” explains Kathleen Ruccione, MPH, RN, CPON, FAAN, co-director of HOPE and director of Center Communication for the CCCBD.

“We knew we needed to pay attention to all the issues that affect quality of life, in addition to treating the illness,” adds Ms. Ruccione, professor of clinical pediatrics at the Keck School of Medicine of the University of Southern California (USC).

Fellow HOPE Co-director Ernest R. Katz, PhD, adds, “Historically, psychosocial-support services had been an afterthought, and we felt that these services should be delivered part and parcel with the whole clinical care program.”

In 1999, Childrens Hospital’s longstanding psychosocial services were consolidated under the HOPE
banner. Today, HOPE touches nearly 1,000 youngsters and teens annually.

The STAR program is inspired by a fundamental need: “helping children continue in their most normal activity of childhood, which is going to school,” says Dr. Katz, professor of clinical pediatrics and psychology at the Keck School of Medicine and the College of Letters, Arts, & Sciences at USC.

“The HOPE Program is one way our hospital cares for the whole child — not just the child’s body, but the child’s mind and spirit,” notes Cheryl Saban, PhD, a member of the Childrens Hospital Board of Trustees who spent her internship in the STAR program when she was a psychology doctoral student. “For these children to thrive and have fulfilled lives, they need to feel good about who they are, they need to go to school, they need to feel normal.”

Through HOPE’s Neurocognitive Service, Isaac — who is now a cancer-free first-grader — received a neuropsychological exam. And, through its Psychology Service, Isaac meets regularly with a therapist who helps him navigate challenges, from feeling shy at school to fearing that his cancer will return.

The therapist also works with Isaac’s mother, Sara Alvarado. “When Isaac was first diagnosed,” she explains, “he could be very aggressive. The therapist gave me really good advice about how to best interact with him.”

Mrs. Alvarado also applauds the HOPE Resource Center, noting, “Our family learned a lot more about Isaac’s disease, and that made us feel more comfortable.” Two full-time health educators help families get the information they need at any point along the treatment continuum, from newly diagnosed to long-term survivors.

For those survivors, there is HOPE’s Long-term Information Follow-up and Evaluation program — LIFE for short. It provides a broad range of services for managing health into adulthood. Teen Impact offers group therapy, adventure therapy and special events for adolescents and young adults and their family members.

HOPE’s Health Outcomes and Cancer Control Research program is another central component; its findings are continuously fed back to improve program services.

Since its founding, HOPE has created a community of patients and families, which for 20 years has come together at an annual event every June. Today, Celebrate Life with HOPE is the largest annual gathering of childhood cancer survivors in the West.

—carrie st. michel
Ask Silvanna Petrocelly anything about roller coasters, and she can tell you — including which one has the best acceleration and which is the most thrilling start to finish. When she faced surgery for scoliosis (curvature of the spine) in summer 2008, she had a short list of questions for Vernon T. Tolo, MD, her orthopaedic surgeon at Children’s Hospital Los Angeles. One was, “Am I going to die?” Another was: “How long until I can ride a roller coaster again?”

Dr. Tolo, chief emeritus of the Division of Orthopaedic Surgery, assured Silvanna that not only would she live, she’d only have to wait a few months to hit warp speed.

Silvanna’s scoliosis — hard to detect for the untrained eye — came as a surprise to her parents, Lorena and Tony Petrocelly. “She had always been so healthy,” says her mother. Fortunately, Silvanna’s school decided to exceed the state-mandated scoliosis screening for seventh-grade girls and screen sixth graders as well. Each year, the Division of Orthopaedic Surgery assists the Los Angeles Unified School District by conducting secondary screenings at 600 schools. While at Lone Hill Middle School in San Dimas, Phyllis D’Ambra, RN, caught the first signs of Silvanna’s curvature.

Silvanna, 13, woke up from her surgery two inches taller. A year later, the teen who enjoys art, swimming and singing says she can now swim faster and breathe more deeply. The benefits are more than physical. “If I didn’t have the surgery, I wouldn’t be who I am right now,” she says. “I gained more confidence, too.”
Rhett Hemingway knows a lot about diabetes. Although he’s only five, he’s been learning about the disease for over a year. Showing off the remains of his birthday party piñata, he explains that it was filled with tiny toys instead of candy.

“Because I’m a diabetic,” he says. “And candy is the baddest thing for kids with diabetes.”

Rhett is one of about 183,000 American children living with type 1 diabetes. This autoimmune disease destroys insulin-producing beta cells in the pancreas and occurs in genetically predisposed individuals. Without insulin, the body cannot utilize glucose derived from food, and additional glucose is produced by the liver. Glucose builds to toxic levels, which affects the kidneys, and youngsters become dehydrated. The normal balance between acids and bases in the body becomes dangerously acidic, potentially leading to coma and even death.

That’s the precipice at which Elisa and Blaise Hemingway stood when they rushed their son to Childrens Hospital Los Angeles in 2008. “From the moment we arrived, everyone rallied around us, reassuring us and teaching us how to care for Rhett,” his mother says.

“Education is the foundation on which the care of diabetic children must be built,” explains Lynda K. Fisher, MD, in the Center for Endocrinology, Diabetes and Metabolism at Childrens Hospital. Dr. Fisher is associate professor of clinical pediatrics at the Keck School of Medicine of the University of Southern California and an expert in pediatric diabetes. She also is Rhett’s doctor. “Since there is currently no cure, survival hinges on how well the family learns to manage their child’s disease.”

Within hours of Rhett’s diagnosis, the Hemingways received basic safety training at the hospital: how and when to prick their son’s finger, test his blood sugar and give insulin injections. Because he was so small, they also had to learn to dilute insulin with saline and fill syringes with miniscule amounts of the mixture.

The next day they began hours of in-depth diabetes management education. They learned what foods to give and how much; how to count carbohydrates and calculate the resulting units of insulin that must be given; how to adjust dosages according to time of day, level of activity and even stress.

“It’s like a crash course in diabetes,” says Rhett’s father. “At first it’s terrifying.”
Luckily, Louise A. Brancale, RN, CDE, made the experience easier. She is one of the Center’s four diabetes nurses. At any given time, she works with 150 to 200 families, offering one-on-one encouragement and advice. When she’s not available, they can access a 24-hour telephone hotline, staffed by others well-versed in diabetes care.

“Initially, parents are overwhelmed by the scope of their new responsibility,” she says. “I’m here to de-escalate that stress.”

Like the time the Hemingways called from Legoland, near San Diego. They’d forgotten Rhett’s insulin at home. “I reassured them that he’d be fine,” Ms. Brancale recalls. “Then I located a nearby pharmacy, ordered the supplies they needed, and their vacation went off without another hitch.”

The Center’s pediatric education program — among a select few nationwide officially recognized by the American Diabetes Association — also includes expert dietitians and clinical social workers.

Most of the 2,000 families served, like Rhett’s, are dealing with type 1 diabetes. “But in the last decade, we’ve seen a dramatic increase in children with type 2,” says Susan R. Benson, RN, clinical manager. Strongly linked to obesity, inactivity and genetics, type 2 demands major changes in healthy eating and exercise habits.

The Center is helping to spread the word by making its Kids N Fitness weight management program available to hospitals, health clinics and after-school programs.

“The goal is to move everybody toward independent problem-solving,” says Ms. Benson. “Our job is done when families no longer need us.”

More than a year ago, Rhett switched from insulin injections to a more convenient and precise pump he wears on a belt around his waist. Through ultra-thin tubing, it continuously delivers insulin under his skin. This change necessitated more hours of parent education.

Passionate and well-informed, the Hemingways already are starting to share what they’ve learned about diabetes. For example, they recently attended a local school board meeting to lobby for full-time, on-campus nurses who can help keep Rhett — and all diabetic students — healthy and safe.

—kate vozoff
On his most recent visit to Childrens Hospital Los Angeles, Paul "Dino" Dinovitz, executive director of the Hearst Foundations, couldn't help but see evidence everywhere of the hospital's mission to provide the best care possible to all children. "Childrens Hospital is a very special place, and we're impressed by its commitment to serve the underserved," he says.

The Hearst Foundations have been generous supporters of Childrens Hospital for some time, providing two grants for the Versant RN Residency in Pediatrics and one for the Boone Fetter Clinic, which provides clinical diagnostic and treatment services for children with Autism Spectrum Disorders (ASD). An initial gift of $100,000 to create an endowment for the Versant RN Residency was established in December 2001, with an additional $150,000 added in October 2005.

"Nursing is the foundation of the health care system, and it is a significant area of priority for us," says Mr. Dinovitz. "We are proud to support the hospital's residency program in training young nurses."

The William Randolph Hearst Foundation was founded in 1945 by legendary publisher/philanthropist William Randolph Hearst. Today, this national philanthropic organization operates two separate foundations, one based in New York and one in San Francisco. Together, they advance an agenda focused on education, health, culture and social services, and have provided more than $800 million in funds to various organizations.

The contributions to the Versant RN Residency "have allowed us to continue to grow and to take our program to the next level," says Jessica Klaristenfeld, RN, BSN, program manager. "We have so many innovative ideas to improve the experience of our residents. We're extremely grateful for this support."

So far, the funding has served to further the program's educational goals, including the purchase of laptop computers used by residents to access curricula, research material and schedules. In addition, new hand-held computer devices enable residents to submit responses to interactive questions during group classes. The fact that all student answers can appear on the teacher's PowerPoint projector instantaneously aids group discussion.

"This is a great tool to test knowledge, poll the audience and keep everyone engaged in the presentation," explains Ms. Klaristenfeld. "It will make such a difference in our teaching."

In December 2008, the William Randolph Hearst Foundation made another generous gift to Childrens Hospital — a $200,000 grant for the Boone Fetter Clinic, which operates within the CHLA-USC Institute for the Developing Mind (IDM). The IDM is engaged in an innovative program of translational and clinical research designed to address a full spectrum of neurological difficulties that affect children, including ASD. Within the Boone Fetter Clinic, families can access one central source on the hospital campus for comprehensive evaluation and treatment options by a team of experts.

The William Randolph Hearst Foundation is supporting the Boone Fetter Clinic’s Autism Warm Line, which gives families up-to-date information on treatment options and access to care. Funds also support a new quarterly e-newsletter for use by clinic experts in community education.

"Autism is a significant health care issue that we feel strongly about supporting," says Mr. Dinovitz. "Childrens Hospital is doing a great job educating the community and offering needed resources."

—elena epstein
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