

imagine

fall 2010

CHILDRENS HOSPITAL LOS ANGELES



ChildrensHospitalLosAngeles
International Leader in Pediatrics



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 is one of the nation's leading children's hospitals and is acknowledged worldwide for its leadership in pediatric and adolescent health. Childrens Hospital Los Angeles is one of only seven children's hospitals in the nation — and the only children's hospital on the West Coast — ranked for two consecutive years 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.

The Saban Research Institute of Childrens Hospital Los Angeles is among the largest and most productive pediatric research facilities in the United States, with 100 investigators at work on 186 laboratory studies, clinical trials and community-based research and health services. The Saban Research Institute is ranked eighth in National Institutes of Health funding among children's hospitals in the United States.

Childrens Hospital Los Angeles is a premier teaching hospital and has been affiliated with the Keck School of Medicine of the University of Southern California since 1932.



On the cover: Chase Stecyk is Living Proof that Childrens Hospital Los Angeles is Making a World of Difference. (See page 11.)



D. Brent Polk, MD

chair of the Department of Pediatrics
and vice president of Academic Affairs,
Childrens Hospital Los Angeles
director of The Saban Research Institute of
Childrens Hospital Los Angeles
chair of Pediatrics and vice dean for Clinical
Affairs at the Keck School of Medicine of the
University of Southern California

Leadership expresses itself in many ways. For those of us here at Childrens Hospital Los Angeles, it means a commitment to excellence — in clinical care, research, education and advocacy. It means being willing to explore a promising idea and to carve out new and creative paths.

Leadership changes the future — many futures, one child and one family at a time. The history of Childrens Hospital Los Angeles is an ongoing story of how exceptional leaders advance and even transform a community.

In this issue of *Imagine*, you'll read about our leadership in pediatrics — from innovative maternal/fetal medical interventions to nurse scholars, sports medicine expertise, a new Center for Personalized Medicine and influential neuroscience research in The Saban Research Institute of Childrens Hospital Los Angeles.

You'll also learn about an opportunity for you to take a leadership role in the community through your support of the final stages of our New Hospital Building. Starting in October, you'll be able to join in a series of *Turn on the Lights!* events as we open this one-of-a-kind medical facility. Please join us. Thank you. •

in this issue



healing

- Every step of the way **4**
- Delivering hope **7**
- The pursuit of excellence **14**
- Hoopsters **18**



research

- Getting personal **8**
- Chase Stecyk **11**
- Brain trust **12**
*A special feature from The Saban Research Institute
of Childrens Hospital Los Angeles*



community

- Healing journey **16**
- Turn on the Lights!* **20**
- A survivor's gift **22**
- Children's Miracle Network Honor Roll **24**



imaginehealing

i

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



The Landry family: Clark and Dayna with their children, Cole and his big sister, Sophie. Right, bottom: Cole's ready to grow, now that his lung has been repaired.

THE INSTITUTE FOR MATERNAL-FETAL HEALTH PROVIDES
ADVANCED, INTEGRATED CARE FOR THE MOST AT-RISK BABIES —
EVEN WHILE STILL IN THE WOMB.

every **step** of the way

With a tiny incision in a mother's abdomen, a straw-like scope and a host of tiny tools, Ramen Chmait, MD, is ready to get to work. His job: to surgically repair life-threatening defects on a fetus still in the womb.

Such a task once was considered impossible. Today, as director of Fetal Therapy at the Institute for Maternal-Fetal Health, a joint collaboration between Childrens Hospital Los Angeles and the University of Southern California (USC), Dr. Chmait performs 100 of these minimally invasive procedures each year.

"Just a few years ago, there was nothing we could do for these high-risk babies," says Dr. Chmait, also assistant professor of obstetrics and gynecology at the Keck School of Medicine of USC. "Now, some have a 90 percent survival rate."

The Fetal Therapy program is just one example of how the Institute for Maternal-Fetal Health is leading the way in innovative diagnostics and treatment for the youngest and tiniest

patients. Part of the Center for Fetal and Neonatal Medicine at Childrens Hospital, the Institute is the only facility of its kind in Southern California and one of only a handful nationwide. It offers comprehensive, seamless integration of care for mothers and babies — from pregnancy to delivery to post-natal life and beyond.

That womb-to-cradle care is made possible by a powerhouse alliance between medical leaders from Childrens Hospital and the Division of Maternal-Fetal Medicine at USC. This close collaboration involves perinatologists (who care for high-risk pregnancies) and neonatologists (who care for high-risk newborns), as well as a multitude of physicians from nearly every pediatric subspecialty, including surgery, radiology, cardiology, genetics, neurology, urology and more.

The Institute partners with Hollywood Presbyterian Medical Center, which houses its offices and the Fetal Therapy program and provides a place where high-risk babies can be

delivered, next door to Childrens Hospital.

“One of our center’s greatest strengths is our collaboration,” says Istvan Seri, MD, PhD, HonD, director of the Center for Fetal and Neonatal Medicine and co-administrative director of the Institute. “From pregnancy onward, patients are followed by an interdisciplinary team of specialists working together in one unified program. That’s absolutely unique.”

For some life-threatening conditions, treatment begins right in the womb. About two-thirds of the Institute’s fetal interventions are performed for twin-twin transfusion syndrome, an often fatal condition where twins sharing the same placenta share blood unevenly. Dr. Chmait uses a scope and laser to ablate the blood vessels that connect



Dr. Istvan Seri

the twins to each other *in utero*. The procedure has a 90 percent success rate with one twin surviving, and a 70 percent success rate for both twins.

The Institute also offers fetal MRI and a range of other minimally invasive fetal interventions, including placing shunts for urinary tract abnormalities, giving transfusions for severe fetal anemia and shrinking cystic lung masses.

In addition, the Institute is seeking approval to start the first U.S. clinical trial for a minimally invasive fetal surgery that could mitigate complications from severe cases of congenital diaphragmatic hernia. In this often life-threatening condition, the fetal diaphragm has a hole, and abdominal contents (intestine, stomach, spleen and sometimes the liver) occupy part of the fetal chest, which prevents normal lung and heart development. The complex procedure will require collaboration between the Institute and Childrens Hospital experts in pediatric surgery, neonatology and pediatric otolaryngology (ear, nose and throat).

In most cases, babies with prenatally diagnosed complications receive treatment after birth. “Planning for that care needs to start during pregnancy,” notes Dr. Seri, also head of the USC Division of Neonatal Medicine and professor of pediatrics at the Keck School of Medicine of USC. That’s because a baby born with a complication often needs advanced care in the first seconds after delivery.

Many babies followed and treated by the Institute will stay in the Newborn and Infant Critical Care Unit (NICCU) at Childrens Hospital,

a Level IIID unit, meaning it offers the highest level and most complex subspecialty care available anywhere for critically ill infants and newborns.

Seamlessly coordinating this all-encompassing care are the Institute’s nurse care managers, who address the complex practical details of providing prenatal diagnostics and treatment, deliveries and transport to Childrens Hospital. These experts provide continuity, as well as individualized educational and emotional support for families throughout pregnancy and delivery.

“One of the unique things about our program is that each family has one central point of contact guiding them through the process and making sure everyone is working together,” says David Miller, MD, medical director and co-administrative director of the Institute for Maternal-Fetal Health and professor of obstetrics, gynecology, maternal-fetal medicine and pediatrics at the Keck School of Medicine of USC.

“Just having a problem with your unborn baby is hugely stressful,” says Sharon Suncin, RN, BSN, perinatal administrator for the Institute. “We let people know they’re not alone.”

Suncin remembers working as a nurse in the NICCU a decade ago. Back then, many complications came as a surprise at birth, hitting parents “like a hammer blow,” she says. “I remember thinking, ‘If only we could go back and prepare them.’ And now, we can. We walk with families every step of the way.” •

—katie sweeney



Dayna and Clark Landry with their son, Cole, at Childrens Hospital Los Angeles

delivering hope

Twenty weeks pregnant, Dayna Landry and her husband, Clark, were eagerly anticipating learning the sex of their unborn baby. Just a few minutes into the ultrasound exam, the doctor paused. Something was wrong — very wrong.

The doctor immediately referred the West Los Angeles couple to a perinatologist, a high-risk pregnancy specialist, who confirmed the diagnosis: The baby boy had a congenital cystic adenomatoid malformation (CCAM), a mass of abnormal lung tissue. Although many CCAMs can be successfully removed after birth, this mass was as big as the baby's head and had pushed his heart to one side. He had virtually no chance of surviving.

The Landrys were devastated. The doctor offered to refer them to the Institute for Maternal-Fetal Health, a collaboration between Childrens Hospital Los Angeles and the University of Southern California (USC). A few hours later, the Landrys' phone rang. It was Terri Maitino, RN, nurse-coordinator for the Institute's Fetal Therapy program.

"Terri was so caring and kind," says Dayna. "It was like a ray of hope."

The next day, the Landrys were seen by Ramen Chmait, MD, the Institute's director of Fetal Therapy. Dr. Chmait confirmed the seriousness of the situation. But he also offered a novel treatment.

With a tiny incision, he could insert a straw-like scope into the womb and inject a special solution into the mass to shrink it, releasing the pressure on the heart. If all went well, the

baby could develop normally *in utero*, and the remaining mass could be removed after birth.

Worldwide, only three such procedures, all successful, had been attempted. Dr. Chmait had done one of them. But there were no guarantees.

"I knew right away I wanted to try it," Dayna says. "We wanted to give our baby any chance we could."

The minimally invasive procedure took just half an hour. Four weeks later, it had worked: The mass was dramatically smaller. But would the baby have enough lung function to breathe?

The answer came Nov. 6, 2009. The Institute had arranged for the birth to take place at Hollywood Presbyterian Medical Center, next door to Childrens Hospital, in case the baby needed immediate care. In a delivery room filled with doctors, including Dr. Chmait, baby Cole arrived with a loud, healthy scream — and weighed in at nearly 9 pounds.

As a precaution, he spent a week in the Newborn and Infant Critical Care Unit at Childrens Hospital. Six months later, the remaining mass was successfully removed at Childrens Hospital by pediatric surgeon Tracy Grikscheit, MD. "It's clear that Cole has adequate lung capacity to live a full and healthy life," she says.

Now 7 months old, Cole is a happy, smiling baby who's adored by his parents and his big sister, 3-year-old Sophie. "He's a sweet, beautiful, healthy baby," says his mother. "Words can't express how grateful we are." •

—katie sweeney



research



CHILDRENS HOSPITAL LOS ANGELES IS ADVANCING THE FUTURE OF TARGETED THERAPIES WITH ITS NEW CENTER FOR PERSONALIZED MEDICINE.

getting personal

Did You Know?

The Human Genome Project took 13 years and involved scientists from several countries. One of the goals it achieved: to identify all the approximately 20,000-25,000 genes in human DNA.

In 2003, the Human Genome Project concluded that people are roughly 99.9 percent genetically identical. Yet our risk for illness and response to treatment are often determined by the minuscule 0.1 percent of DNA that makes each of us unique.

Timothy J. Triche, MD, PhD, will lead the new Center for Personalized Medicine at Childrens Hospital Los Angeles. He is the hospital's former pathologist-in-chief and professor of pathology and pediatrics at the Keck School of Medicine of the University of Southern California.

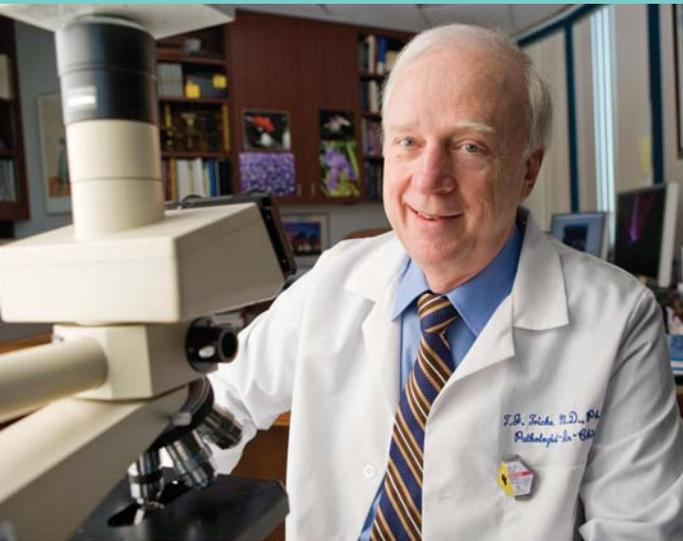
The Center's mission: to coordinate and expand the basic and translational research in cutting-edge genomics technologies under way in The Saban Research Institute of Childrens Hospital Los Angeles and the hospital's Centers of Excellence. The ultimate goal: to generate targeted therapies for children.

How do you define personalized medicine?

It's a term that covers many areas of biomedical research. Most therapies are still administered as if everyone is the same, their disease is the same, and their response to therapy is the same. We now know these assumptions are flawed. Diseases can produce similar symptoms yet be fundamentally different. This implies that different patients require different therapy. Your genetic profile has a lot to do with how well you will react to therapy. By factoring in these particulars, we can do a better job of using the right drug, at the right dose, for the right diagnosis.

Do some children get sick due to a genetic malfunction?

Yes, but a single gene rarely explains a disease. It takes the convergence of multiple factors. So the hunt is on to find those sets of genetic



Dr. Timothy Triche

? Did You Know?

Armed with a grant from the American Recovery and Reinvestment Act (ARRA), Dr. Timothy Triche hopes to identify genetic indicators in patients with rhabdomyosarcoma, a soft tissue tumor often found in children. He is one of nearly 30 physician-scientists and investigators from Childrens Hospital and The Saban Research Institute to receive ARRA awards in 2009 and 2010.

irregularities — and the proteins they produce — that lead to abnormal cell function and disease. In the case of cancer, these tumor-specific proteins may be secreted into the blood and detected, a so-called “biomarker” of the disease.

For example, we are collaborating with the Retinoblastoma Program in The Vision Center at Childrens Hospital to identify biomarkers, or tumor-associated proteins, in the blood of children with cancer to create a simple blood test to enable early diagnosis.

Can biomarkers pinpoint the severity of a disease?

Sometimes. We recently identified a biomarker profile for children with another pediatric cancer — rhabdomyosarcoma — composed of 34 genes that can predict the severity of their disease. This information can help physicians determine the correct therapy. With our recent “Grand Opportunities” award from the National Institutes of Health, we will test the utility of this profile in newly diagnosed patients. If it shows predictive ability, this profile will be used to determine a treatment regimen — instead of our current, less reliable clinical indicators.

Is personalized medicine applied most often to cancer therapy?

Currently, yes, because we know cancer can be fatal, and successful therapy can cause serious side effects. It would be great to know before starting therapy the prognosis and potential treatment options, in order to maximize cures while minimizing

adverse side effects. Also, we are seeing many new “targeted” therapies that require genetic analysis to determine whether the therapeutic target is present in the tumor of a given patient.

How important is the analysis of this genetic data?

It’s crucial. In fact, data analysis is the bottleneck in personalized medicine, and the problem is growing worse as genomic data sets become more complex. Fortunately, we have a strong and growing bioinformatics core at Childrens Hospital. We’re also collaborating with colleagues at the Keck School of Medicine and elsewhere. The challenge is to interpret the data in a clinically useful way.

Is personalized medicine being utilized in areas other than cancer?

Yes, and with time it will almost certainly become widespread in diagnosis and treatment in general. We already are supporting the clinical use of genomic technology in medical genetics, organ transplantation and autism, and expect this to expand significantly.

Are there other centers like this one?

So far only for adult medicine, but the number is increasing rapidly. Our program is unique in the pediatric world. Our focus on the clinical use of genomics is built on years of research in the area. That means Childrens Hospital is poised to be a leader in this field. •

—kate vozoff

beneficiaries of research

chase stecyk

Chase Stecyk is learning the indy grab — gripping his skateboard in midair — and someday wants to perfect a grind, sliding off the edge of a staircase at the beach.

These skateboarding tricks may be difficult to master. But not as difficult as what 10-year-old Chase has already done: confront cancer.

Four years ago, on a family trip to Lake Havasu, Chase grabbed his right leg, moaning in pain. Each day, the pain worsened, until he could barely walk. Back home in Redondo Beach, doctors couldn't figure out what was wrong, even after a series of blood tests and bone scans.

The family's pediatrician sent his parents, Amy and Randy Stecyk, to Childrens Hospital Los Angeles, where they met Mark Krieger, MD, of the Division of Neurosurgery.

He told them something no parent wants to hear: Chase had a slow-growing spinal cord tumor pressing on the nerves of his spine. The name alone was daunting: myxopapillary ependymoma.

But the Stecyks had come to a place where expert surgeons, clinicians and scientists at The Saban Research Institute of Childrens Hospital Los

Angeles routinely push the envelope of medical knowledge through research.

The challenge with this type of tumor, the Stecyks learned, is that its growth pattern is variable and unpredictable. With only 100 pediatric cases a year, finding someone who knows how to treat it isn't easy. "We have more experience with this type of tumor than almost anywhere else in the country," says Dr. Krieger, an associate professor of neurological surgery at the Keck School of Medicine of the University of Southern California (USC).

Dr. Krieger's research focuses on improving outcomes for pediatric brain tumors with novel molecular and radiologic treatment techniques. Working in the lab, investigators are using Magnetic Resonance Spectroscopy — which reveals the chemical composition of tissues — to better understand this tumor.

Studying rare tumors can yield benefits for all types of cancer, notes Dr. Krieger. "We never know where we'll find that one piece of information that unlocks so many others."

Chase had his first surgery at age 6 and since then, has had four more. This spring, he underwent a round of chemotherapy. Instrumental on his interdisciplinary team is Jonathan



Chase Stecyk, left, and his brother, Cole

Finlay, MB, ChB, director of the Neural Tumors Program in the Childrens Center for Cancer and Blood Diseases and a member of the Cancer Program in The Saban Research Institute.

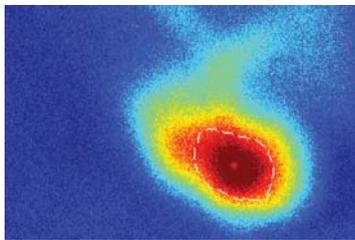
Dr. Finlay has spent three decades researching better ways to deliver chemotherapy to pediatric patients and protect their cognitive function. These protocols are continually evaluated through research conducted by the Head Start Consortium for Pediatric Brain Tumors, headed by Dr. Finlay, professor of pediatrics, neurology and neurosurgery at the Keck School of Medicine of USC.

The Stecyks are grateful for the hospital's depth of expertise. "I tell my friends, 'God forbid anything should happen to your kids, Childrens Hospital is where you go — start there,'" says Chase's mother.

Chase is an A student who enjoys karate, hanging out with his brother, Cole, and playing with his dog, Indy. This spring, he and his family traveled to Oahu. One morning, they took a hike to Diamond Head. Chase — who once had trouble walking — quickly moved ahead. He made it to the top first. •

—candace pearson

brain trust



It's the most complex organ in the human body — the seat of our intelligence. Now people are beginning to realize the brain is the source for so much more.

“The origins of many later health issues — from autism and other learning and behavioral disorders to obesity and diabetes — are in early brain development,” says Richard B. Simerly, PhD, director of the Neuroscience Program at The Saban Research Institute of Childrens Hospital Los Angeles.

Within this ambitious program, a multifaceted team of scientists is focused on how the brain wires itself and what happens when this process is disrupted. These investigators are collaborating with like-minded colleagues at the University of Southern California (USC), including the Zilkha Neurogenetic Institute.

THE NEUROSCIENCE PROGRAM IS UNLOCKING THE BRAIN'S SECRETS TO STOP HEALTH PROBLEMS BEFORE THEY START.

Zilkha director Patrick Levitt, PhD, says, “Our work together will establish a critical mass of basic, translational and clinical researchers who can address some of the biggest challenges in understanding typical and atypical development.”

They're aiming at a fast, moving target. “Most of what we know about the brain and nervous system, we've learned in the past 20 years,” notes Dr. Simerly, professor of pediatrics and biology at the Keck School of Medicine of USC. “The pace of our progress is exploding.”

The game-changer? Molecular genetics, or the characterization of the human genome and development of experimental tools for studying genes associated with specific conditions.

As scientists like Dr. Simerly and his team gain a deeper understanding of how the brain develops and maintains its pathways, new therapies may emerge. “Our success in designing effective treatments for neurodevelopmental disorders will be grounded in an improved understanding of how the brain develops normally,” he says.

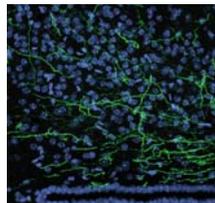
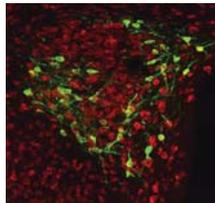
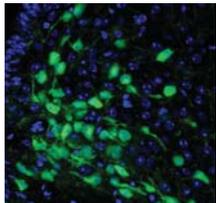
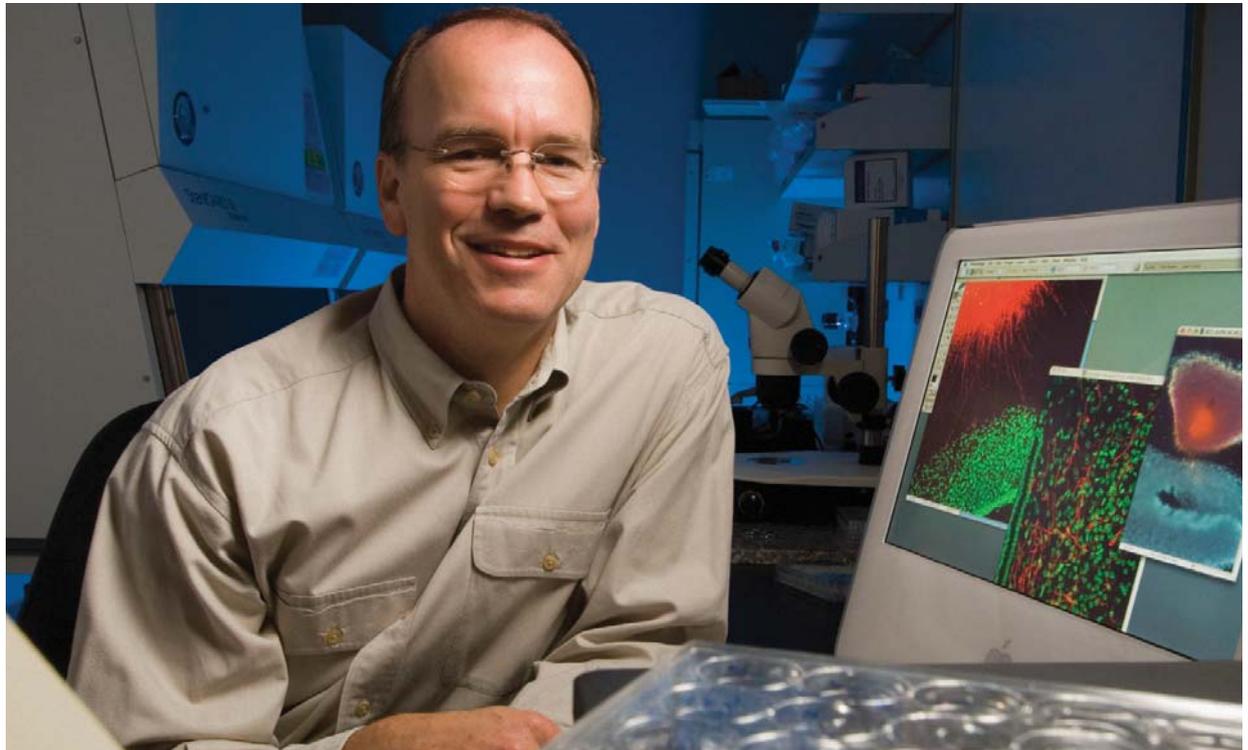
Parents faced with a diagnosis such as autism spectrum disorder may wish for a single cause — when the truth lies within “a constellation

of gene events that interact during development with a variety of environmental signals,” says Dr. Simerly. In the same way, the solution to obesity isn't simply a matter of eating vegetables and exercising, he adds. “There are biological underpinnings to the condition that have to be addressed first.”

In his laboratory at The Saban Research Institute, he's hard at work studying the development of brain circuits that control appetite, feeding and blood sugar levels.

His colleague, Sebastien Bouret, PhD, specializes in what happens to these circuits in the prenatal environment. Together, they are analyzing how nutrition during this crucial period — whether mothers-to-be eat too little or too much — can lead to increased fat deposits and insulin resistance in offspring, which can be a fast track to diabetes.

“Only quite recently have people conceded that obesity and diabetes could be brain problems, too,” notes Dr. Bouret, also assistant professor of pediatrics at the Keck School of Medicine of USC. The goal is to develop therapies that can undo early programming and target the part of the brain involved in feeding.



Opposite page: Areas of the cerebral cortex responsive to visual stimuli are revealed by optical imaging — red and yellow are most responsive. Above: Dr. Richard Simerly. Left to right: Neurons (green) that are sensitive to leptin, an appetite-suppressing hormone; neurons (green) that control parts of the autonomic nervous system known to regulate metabolism and body weight; axons (green) involved in appetite regulation.

Neuroscience Program investigator Aaron McGee, PhD, an assistant professor of pediatrics at the Keck School of Medicine of USC, is exploring how anatomical changes influence the brain's plasticity.

Meanwhile, fellow researcher Takako Makita, PhD, is analyzing cellular signaling events that direct development of the peripheral neural system. Her studies someday could have therapeutic application in congenital neurological disorders, nerve injury repair and tissue transplantation. Dr. Makita also is an

assistant professor of pediatrics at the Keck School of Medicine of USC.

The Neuroscience Program has received funding from the Associates Endowment for Neuroscience and Imaging Research; Cheryl Saban, PhD, Haim Saban and the Saban Family Foundation; and the Office of the Provost at USC.

The Sabans are the largest individual donors in Childrens Hospital's history, establishing The Saban Research Institute with a transformative gift of \$40 million.

"If we can identify kids at risk for conditions like obesity, diabetes and

autism when the brain is still responsive to treatment," says Dr. Simerly, "the hope is we could potentially effect a lifetime cure."

He calls it a "new paradigm in pediatric medicine" — intervening early in the disease process and fixing it once. "It's the dream of all of us here that continued improvements in pediatric medicine not only will produce healthier kids, but healthier adults as well." •

—candace pearson

nurse scholars

the pursuit of excellence



Left to right: Cecily Betz, Kathy Meeske, Nancy Blake and Rita Secola.

They began with a shared vision — to make a difference. As pediatric nurses, they pushed themselves to seek new knowledge and discover uncharted paths to influence their profession.

Today, some of the most prominent leaders in nursing call Childrens Hospital Los Angeles home. This elite group is internationally recognized for their contributions through research, teaching and professional practice — and they represent one of the many reasons Childrens Hospital earned coveted Magnet Recognition status from the American Nurses Credentialing Center in 2008.

“I’m proud of our hospital for being a place where scholarly nursing work is expected and supported,” says Mary Dee Hacker, RN, MBA, FAAN, chief nursing officer and vice president of Patient Care Services.

One of these nurse scholars, Cecily Betz, PhD, RN, FAAN, has left

an indelible stamp on the nursing profession with her writing. She is the author of 10 books, as well as co-founder and editor-in-chief of the highly regarded *Journal of Pediatric Nursing*, the official publication of the Society of Pediatric Nurses and the Pediatric Endocrinology Nursing Society. At Childrens Hospital, she serves as director of the Transitions Program and Nursing Training in the USC University Center for Excellence in Developmental Disabilities.

“I was raised with a belief that each generation must contribute more to society,” says Dr. Betz, associate professor of clinical nursing at the University of Southern California (USC).

When the U.S. Centers for Disease Control and Prevention needed to establish guidelines for emergency preparedness, they tapped into the vast knowledge of Nancy Blake, MN, RN, CCRN, CNAA, director, Critical Care Services and co-leader of Childrens Hospital’s Pediatric Disaster Resource and Training Center. A recognized expert in pediatric disaster preparedness, she was one of only three nurses selected nationwide.

“If you want to see change, you have to get involved and make things better,” says Blake. Her doctoral research is on staff satisfaction and patient outcomes in the pediatric intensive care unit — the first such study in a pediatric environment.

Rita Secola, RN, MSN, CPON, PhD-C, clinical manager for Hematology/Oncology and Bone Marrow

Transplant, is a sought-after speaker at professional conferences, a role that intensified with her post as 2006-2008 president of the national Association of Pediatric Oncology Nurses.

“My dad was a wonderful role model who taught me to never stop learning, never stop growing and to always give back,” says Secola.

She has received three grants for her doctoral research on reducing bloodstream infections in children with cancer, including one from the federal Agency for Healthcare Research and Quality.

Kathleen Meeske, PhD, RN, director of Health Outcomes and Cancer Control Research in the Childrens Center for Cancer and Blood Diseases, has published more than 30 peer-reviewed journal articles on long-term health outcomes of childhood cancer survivors. Dr. Meeske, also assistant professor of pediatrics and preventive medicine at the Keck School of Medicine of USC, is presenting her research on survivorship at two upcoming international conferences. Among other research projects, she’s involved in the development of a national registry for childhood cancer survivors.

After three decades, she remains inspired by her mission. “Working in pediatric oncology reminds you just how fragile and precious life is.” •

—elena epstein



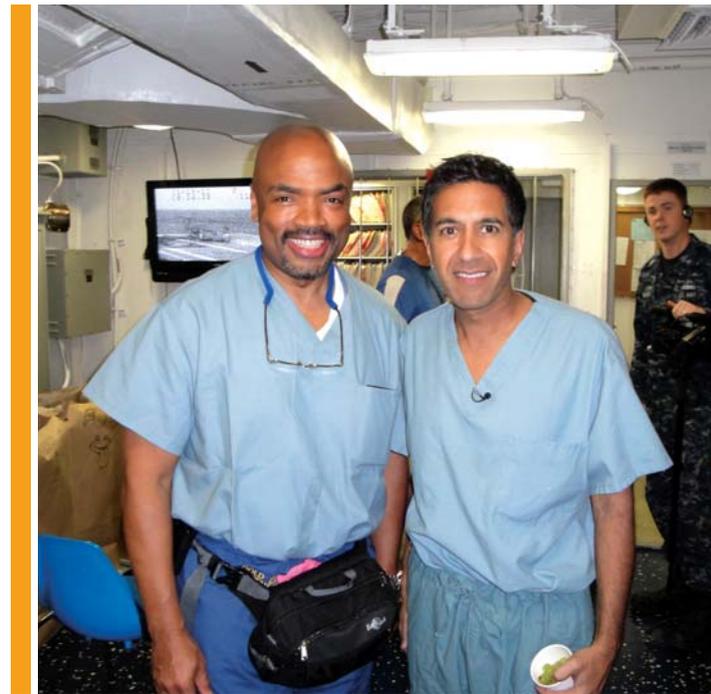
imaginecommunity

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We reach out to the neighborhoods around this hospital and to the broader community of children everywhere who need our care.



FOR DR. HENRI FORD, GOING HOME AGAIN WAS BITTERSWEET — BECAUSE IT MEANT PLUNGING INTO EARTHQUAKE-TORN HAITI TO LEND A HELPING HAND.



healing journey



He arrived back in Haiti four days after the devastating Jan. 12 earthquake. But for Henri Ford, MD, surgeon-in-chief and vice president at Childrens Hospital Los Angeles, this was no time for reflection.

Soon after he stepped off the plane, the Haitian-born surgeon operated on a 6-year-old boy with a crushed abdomen. As he tended to the wounded and took the lead in setting up a field hospital in Port-au-Prince, Dr. Ford’s memories flooded back.

“I grew up within a mile from the field hospital,” recalls Dr. Ford, also professor and vice chair for Clinical Affairs, Department of Surgery, at the Keck School of Medicine of the University of Southern California (USC). “This area once was a beautiful park with dancing fountains. We would come here every Sunday with friends.”

Those childhood years prior to moving to the United States at age 14 are now a backdrop not only for Dr. Ford’s volunteer surgical work, but his efforts in leading the creation of a new health care infrastructure in his native country.

Dr. Ford, who is fluent in Creole and French, spent two weeks in Haiti after the earthquake that killed an estimated 220,000 people and left everything in shambles. Since then, he has returned several times to meet

with local health officials in sessions arranged by the U.S. Department of Health and Human Services. In May, he hosted a delegation of Haitian government officials, including the Minister of Health, at Childrens Hospital. Their focus: reconstruction efforts.

Three teams of volunteer physicians and nurses from Childrens Hospital also have since traveled to Haiti with Project Medishare, a non-profit group committed to improving health conditions in the country.

Each team of 10 volunteers spent seven days in Port-au-Prince, working 12- to 18-hour shifts treating such conditions as severe wound infections, multiple fractures, internal bleeding, dehydration and respiratory distress. Michael Jordan, RN, MSN, MBA, CMSRN, trauma



Opposite page, far left: Dr. Henri Ford operating in Haiti. Photo provided by the U.S. Navy. Left: Dr. Ford with CNN medical correspondent Sanjay Gupta, MD. This page: One of the many scenes of devastation in Port-au-Prince.

program manager at Childrens Hospital, was part of the first team. He describes the environment as “a military-type setting with austere conditions,” noting volunteers slept on cots in a huge 180-person tent and ate one hot meal per day provided by the United Nations.

With 50 percent of the Haitian population under age 18, the pediatric trauma specialists from Childrens Hospital provided critical expertise. “The need is immense,” says Tracy Grikscheit, MD, attending surgeon in the Department of Surgery and assistant professor of surgery at the Keck School of Medicine of USC. “We had moments of great joy, such as when we were able to save babies born in need of ventilation, but moments of great sadness, too.”

While in Haiti, Dr. Ford, who also serves as vice dean of Medical Education at the Keck School of Medicine of USC, navigated the streets to assess living conditions and spread the word about the field hospital. His daily updates to Childrens Hospital provided haunting images of the desolation. “Hundreds, if not thousands, living in tents...the stories are gut-wrenching,” he wrote in one email.

Childrens Hospital is home to physicians and nurses who transport their expertise around the world — whether that means performing reconstructive surgeries in Peru, establishing oncology programs in Russia or teaching post-graduate diabetes coursework in India.

Under Dr. Ford’s leadership, the hospital is in a distinctive position to help a nation in need. During his

initial trip back to Haiti, Dr. Ford was made the medical liaison officer for the U.S. Department of Health and Human Services’ Haitian relief efforts, and now serves as co-director and member of the Board of Directors for Project Medishare.

His own journey led him as a teenager to John Jay High School in Brooklyn, then to Princeton University (where he is now a trustee) and Harvard Medical School. He coupled a specialization in pediatric surgery, pediatric trauma and surgical infection with notable research and executive leadership in national associations.

Now he has set out on a path to help his home country. He says, “I truly believe my entire life, I have been preparing for this very moment.” •

—elena epstein



 profile

amber & jasmine scott [hoopsters]

When 18-year-old twins Amber and Jasmine Scott hit the basketball court, they do it together. As starting point guard, Amber's a playmaker, often setting up shots for her sister, Jasmine, a starting shooting guard with a mean jump shot.

They even shared the same sports injury 16 months apart — a tear in the anterior cruciate ligament (ACL), one of four ligaments connecting the bones of the knee joint. Such ACL tears are common among young athletes, especially girls. The Scott sisters saw the same expert surgeon — Jennifer M. Weiss, MD, head of the Sports Medicine Program in the Childrens Orthopaedic Center at Childrens Hospital Los Angeles and the only pediatric sports medicine specialist in Southern California.

“Adolescent bones are still growing, and surgery must take that into account,” says Dr. Weiss, assistant professor of orthopaedic surgery at the Keck School of Medicine of the University of Southern California and a member of the Childrens Sports Medicine Program in Santa Monica.

Both sisters were injured during practice for their magnet high school, the Los Angeles Center for Enriched Studies. During recovery, they worried their layups might be affected — but that didn't happen. After being scouted by several Division I schools, both accepted full scholarships to the College of Eastern Utah. Jasmine wants a career in sports administration, Amber in physical therapy. “Basketball will always be part of our lives,” Amber says. “We live and breathe it,” Jasmine adds. “We love it.” •



A VARIETY OF EXCITING FESTIVITIES WILL INVOLVE THE COMMUNITY IN THE OPENING OF THE NEW HOSPITAL BUILDING AT CHILDRENS HOSPITAL LOS ANGELES.

turn on the **lights!**

? Did You Know?

The New Hospital Building will feature 317 beds and 85 percent private rooms. The seven-level, 460,000-square-foot inpatient facility will have 120 beds dedicated to intensive care.



As the New Hospital Building nears completion, Childrens Hospital Los Angeles is preparing for a one-of-a-kind celebration leading up to the moment it will *Turn on the Lights!* of the state-of-the-art, 460,000-square-foot facility.

Among the festivities being planned as part of *Turn on the Lights!* are the *Walk for Kids* 5K, Street Party and Lighting Celebration on April 30, 2011.

The action begins this fall. Friends of Childrens Hospital from around the world can become fundraisers for the New Hospital Building beginning in October — when the *Walk for Kids* website launches.

All participants — whether individuals or teams — will be able to use the online toolbox to encourage friends, family and colleagues to sponsor them on the walk or to make a donation to Childrens Hospital Los Angeles. Participants do not have to physically join the 5K event to be virtual “walkers” and fundraisers.

“The online launch of our *Turn on the Lights!* celebration will give people from Southern California and

beyond an opportunity to support this great hospital,” says Chris Albrecht, New Hospital Building Campaign co-chair and president/CEO of Starz, LLC, the premium cable network.

“Childrens Hospital is a tremendous resource for our community and for children’s health,” he adds. “This is a chance for everyone to play an important role in our future.”

Walk for Kids on April 30 will be a pre-sunset walk through the Los Feliz and Griffith Park areas, as participants literally “bring the light” to Childrens Hospital. A two-block stretch of Sunset Boulevard will be closed off for the Street Party, featuring cuisine and entertainment that represent multicultural Los Angeles. As the sun sets, attendees will be treated to a spectacular light show.

“Childrens Hospital has always been a center for all that is vibrant and forward-looking about Southern California, because we care for families from every culture, community and walk of life,” says Mary Hart, New Hospital Building



Campaign co-chair and member of the Childrens Hospital Board of Trustees. “We’re thrilled to have that diversity represented in these events.”

Turn on the Lights! also will feature *Dream for Kids: The Grand Opening Gala* on May 7, 2011, at Childrens Hospital. Marion Anderson, co-chair of the Board of Trustees, will receive the “Living Proof Visionary” Award at the gala fundraising event. Also being honored are Hart and Albrecht, both of whom will receive the “Building the Dream” award.

The seven-level New Hospital Building is expected to set the gold standard for pediatric facilities

when it opens in summer 2011. It will feature 317 beds, including 120 intensive care beds, along with state-of-the-art HEPA-filtration, family lounges, dining facilities and two gardens. Fully 85 percent of patient rooms will be private.

The last time a new building opened on the hospital campus was 2003, with the dedication of The Saban Research Building, part of The Saban Research Institute of Childrens Hospital Los Angeles. Construction of the research tower was made possible by a \$40 million gift from Cheryl Saban, PhD, Haim Saban and the Saban Family Foundation.

“It’s exciting to watch another shining addition to Childrens Hospital Los Angeles come to completion,” says Dr. Saban, a member of the hospital Board of Trustees. “With the advent of this new, state-of-the-art inpatient facility, coupled with our superior research facilities, Childrens Hospital is poised to change the face of children’s health care forever.”

To learn more about how you can help Turn on the Lights!, visit www.CHLA.org/walk.



a survivor's gift

FACED WITH CANCER, IT'S STILL POSSIBLE TO ACCOMPLISH YOUR DREAMS WITH THE HELP OF A FEW FRIENDS.



What do you want to be when you grow up? Many adults forget their childhood answer to this question, opting for more practical goals in life. Not Joy Clausen. At age 25, she was living her childhood dream, working as a dolphin trainer at SeaWorld San Diego.

She knew how lucky she was. Then life came to a screeching halt. She was diagnosed with non-Hodgkin's lymphoma. She quickly decided, though, that she'd fight it with everything she had.

Joy was unsure of the course of treatment her doctors proposed, so her aunt suggested she talk to Stuart E. Siegel, MD, director of the Childrens Center for Cancer and Blood Diseases at Childrens Hospital Los Angeles. Dr. Siegel and the physicians at Childrens Hospital are very experienced with this form of lymphatic system cancer, which is common in teens and young adults.

Though rare, it's not unheard of for a 25-year-old to be treated at Childrens Hospital, especially when the illness is most prevalent in children. So Joy checked in, and soon became a big sister to her young roommates and neighbors.

"I was older than some of the nurses," she says. However, this unique situation helped her deal

with her disease. "When you find out you have cancer, you begin to feel sorry for yourself. But at Childrens Hospital, there are 5-year-olds battling the same thing you are, with smiles on their faces. You realize that if they can handle it, you can, too."

Joy also had something to share that her young friends would always get excited about — dolphins. They loved hearing about her job. Joy became especially close with one of her roommates, a 5-year-old girl diagnosed with leukemia, and promised that when they both got out of the hospital, she'd take her to meet a dolphin.

"She was just the cutest little thing," says Joy, who was heartbroken when she heard that her young friend had passed away. "I decided that I still wanted to share this great experience with other kids undergoing cancer treatment."

When Joy recovered and returned to her job at SeaWorld, she approached her supervisors, and they agreed to support her efforts. In 2008, the first group of cancer patients from Rady Children's Hospital in San Diego came to play with dolphins. In Spring 2009, she welcomed kids from "her" hospital, Childrens Hospital Los Angeles. They were able to interact side-by-side in the water



Above, left to right: Childrens Hospital Los Angeles patients Jose Roque, Mario Arias, Gustavo Arias, Destiny Himmel and Tanya Perez pose with a friendly pilot whale at SeaWorld San Diego. Opposite page, top, left to right: Mario, Tanya and Gustavo meet a dolphin with trainer Joy Clausen. Bottom: Splashtastic fun with Tanya, Destiny, Joy, Jose, Gustavo and Mario.

with the dolphins, petting them and learning from Joy how to give commands. The next group from Childrens Hospital Los Angeles is scheduled to visit in October 2010.

Joy, now healthy and cancer-free, wanted to share this opportunity for a number of reasons. “Parents spend so much time and money helping their children fight cancer that often, little is left over for extras,” she says. She also wanted to show kids that there is life after cancer. “I think it’s important to see someone who has survived and is doing well.”

Joy is a great role model, says Dr. Siegel, professor and vice chair of the Department of Pediatrics at the Keck School of Medicine of the University of Southern California. “She has not let her cancer get in the way of accomplishing her personal and professional dreams,” he says. “She is still the same great person she always was, but with an even greater desire to help people.”

“I’m so happy that I can do this for kids and parents,” she says. “It’s the best gift I have to offer.” •

—sarah brown

? Did You Know?

Joy Clausen had just begun studying filmmaking when she was diagnosed with non-Hodgkin’s lymphoma. She chronicled her treatment from beginning to end in “Just One Year,” her documentary on surviving cancer. Find out more about it at www.justoneyearmovie.com.



Children's Miracle Network sponsors calendar year 2009

honor roll of friends



Left to right: Joseph Anthony ("Tony") Kouba, president, Landmark Restaurant Group (franchise partner); Jean Birch, president, IHOP; and Richard D. Cordova, FACHE, Childrens Hospital president and CEO

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 27 years, generous sponsors have contributed nearly \$3.5 billion to CMN, enabling its hospitals to treat 17 million children annually for every disease and injury imaginable. In calendar year 2009, these donations totaled \$5 million to care for children treated at Childrens Hospital Los Angeles.

We extend our heartfelt gratitude to these sponsor organizations for their passion, dedication and tireless work on behalf of children.

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