Giving Thanks
20 Years of Philanthropy Transforms Lucile Packard Children’s Hospital
2010 Donor Roll Inside
Dear Friends,

What a momentous time for Lucile Packard Children’s Hospital. This year, our 20th anniversary, we are taking stock of two decades of notable accomplishments: advancing care for children and expectant mothers, discovering new cures for childhood diseases, training future caregivers, and gaining national recognition as a leader in pediatric and obstetric medicine.

Our accomplishments become truly meaningful in the inspiring stories of the patients and families we have the privilege to serve. These children are, quite simply, the reason the Hospital was established in the first place, and the reason we strive to make it ever better.

Each child in this issue of Packard Children’s News tells a story of life sustained and hope restored. Their experiences provide a glimpse of how important your dedicated support is for thousands of similar families in our community. Your generosity makes these miracles possible, and for this, we thank you.

I hope you will celebrate with us this year at one of our special 20th anniversary events. You can be proud of how much you have achieved for our patients and their families, and how much more we will continue to accomplish together for children’s health.

With gratitude,

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President and Chief Executive Officer

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Giving Thanks

By Jennifer Yuan
children’s hospital is as good as its community wants it to be,” says Christopher Dawes, president and CEO of Lucile Packard Children’s Hospital. “In our case, the community has spoken loud and clear: they’ve made us one of the nation’s best.”

In the two decades since it opened, Packard Children’s has established itself not only as a place of healing for local families, but also as a world-class leader in advancing pediatric and obstetric care.

This year, as we celebrate our 20th anniversary, we also celebrate the tremendous community support that has made its success possible. From the founding commitment and vision of Lucile Salter Packard, to the unwavering generosity of donors at all levels, philanthropy has driven our progress at every step.

“My mother had always hoped that the Hospital would be embraced by others in the community,” says Susan Packard Orr, Lucile’s daughter and board chair of the Lucile Packard Foundation for Children’s Health. “She would be touched by the depth of affection that so many old and new friends have demonstrated for our children’s hospital.”

(continued on next page)
Over the span of its short history, more than 75,000 donors have chosen to invest in Packard Children’s and child health programs at the Stanford University School of Medicine, collectively contributing over $1 billion to date. This outpouring of support is more than just an impressive figure—it has made possible the advanced level of care the Hospital provides to children and expectant mothers.

“Day in and day out, across every area of the Hospital, I see the impact of donor support in our patients’ and families’ lives,” says Hugh O’Brodovich, MD, the Adalyn Jay Physician-in-Chief. “It would be impossible to overstate the importance of philanthropy in shaping Packard into one of the nation’s top children’s hospitals.”

Packard opened in 1991 with a focus on caring for local children and expectant mothers. From the beginning, it had the right ingredients for success: a child-friendly facility, a dedicated staff, and an unmatched location at the center of Stanford’s medical and research enterprise.

While continuing to provide for local families, Hospital leadership began to develop a strategic vision to advance children’s health care at the national level. However, in order for Packard Children’s to realize its potential, an exceptional level of community support would be required.

“It’s great to have ideas about what you want to do,” says Harvey Cohen, MD, PhD, the Deborah E. Addiscott - John A. Kriewall and Elizabeth A. Haehl Family Professor and former chief-of-staff. “But unlike other children’s hospitals, some of which have over 100 years of reserves to grow their programs, Packard Hospital was still in its infancy. Philanthropic dollars were essential to make our vision a reality—more so here than at any other children’s hospital in the country.”

In 2001, the Lucile Packard Foundation for Children’s Health launched the Campaign for Lucile Packard Children’s Hospital. Its aim was to raise $500 million—at the time an unprecedented goal in the history of U.S. children’s hospitals. Thanks to an inaugural grant and challenge match from the David and Lucile Packard Foundation, the philanthropic community responded quickly and generously.

By 2005, two years ahead of schedule, the Campaign had raised $526 million. Never before had a children’s hospital so young raised so much money in so short a time.

Almost overnight, the Campaign transformed Packard Children’s. Campaign gifts established 100 new endowments to support new recruits and existing faculty, train future pediatric leaders, and sustain innovative clinical programs. With these investments, Packard and Stanford were able to attract more than 60 of the world’s brightest surgeons, physicians, and researchers to drive advances in pediatric and obstetric care.

“Our location at Stanford was invaluable,” notes Cohen. “The environment of the University and of Silicon Valley naturally sparks development and innovation. Coupled with donor investments, we were able to recruit the best, make major advances in pediatrics and obstetrics, and become a world-class children’s hospital.”

By 2005, Packard Children’s was ranked among the Top 10 children’s hospitals in the nation, according to U.S. News & World Report. The Hospital opened the Mary L. Johnson Pediatric Ambulatory Care Center, the Bass Center for Childhood Cancer and Blood Diseases, the
This year, as Packard looks ahead, it continues to rely on community support to build a better future for all children. To date, the Breaking New Ground Campaign, launched in 2007, has raised $405 million toward its $500 million goal. These investments will enable Packard to expand its facilities through the addition of 100 new beds, and equip the School of Medicine with resources to train the next generation of caregivers.

“We’re building more than a new hospital. We’re also laying the groundwork for the future of pediatric and obstetric medicine.”

Christopher Dawes, CEO  
Lucile Packard Children’s Hospital

The expanded facility will arm Packard’s experts with the tools and technology to quickly translate research breakthroughs into new therapies and cures, and provide the community with the most advanced care available, all within a family-centered environment.

“We have seen amazing advances and growth since day one,” adds Dawes. “We’ve increased access and breadth, improved quality and expertise, and expanded our education and research programs. In the years and decades to come, with donor support, we will continue to be a hospital of innovation.”

As the following stories illustrate, many of Packard’s supporters are inspired to become donors by their own family’s medical experience. Their personal stories provide a meaningful look at the depth of Packard’s expertise, its family-centered care, and the importance of philanthropy in making the Hospital a special place for healing and hope.

Ford Family Surgery Center, a new cardiovascular intensive care unit, and an expanded dialysis unit. Additionally, Packard Hospital partnered with Stanford Hospital & Clinics to create a dedicated Pediatric Emergency program, an endeavor facilitated by an unparalleled outpouring of community philanthropy.

In addition to developing world-class specialty programs, the Campaign helped to sustain the Hospital’s commitment to care for local families. Thanks to donor support, Packard offers a breadth of specialized services to address the unique needs of children and expectant mothers. This approach includes family-centered care—engaging families as partners in their child’s treatment. It also includes giving kids opportunities to be kids—encouraging their growth and development through Recreation Therapy and Child Life activities, and supporting their education through the on-site Hospital School. In addition, philanthropic investments maintain important outreach programs like the Teen Health Van, which benefit families in surrounding communities.

“Without donor support,” says Cohen, “the Hospital might still find a way to function. But we would lose the ability to truly care for children and families in the way that makes Packard unique.”

Breaking New Ground

Offering the most advanced care available, Packard now treats patients not just from around the corner, but from around the world. Having outgrown its original facility, the Hospital must grow dramatically to accommodate new technologies and ensure the capacity to care for future generations of children.

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Lydia Lee of Palo Alto was 6 years old when she experienced the first warning signs of cancer. “I remember how it started,” she says. “It was November of 1990. I was at school, and I felt a pain in my neck. It became so unbearable that I had to go home.”

*(continued on page 8)*
Lydia’s parents took her to a local clinic, where doctors discovered a lymph node abnormality and referred her to the pediatric oncology experts at Stanford. Lydia’s primary physician was Michael Link, MD, one of the country’s foremost child cancer specialists.

Tests revealed that Lydia had an unusual variant of acute lymphoblastic leukemia (ALL), a rare, fast-growing cancer of the white blood cells. “Back then, the survival rate for kids with her subtype of ALL was very low,” says Link.

In 1990, the standard treatment for ALL involved several doses of chemotherapy spread out over two years. But Link and other researchers had discovered a close similarity between Lydia’s variant and Burkitt lymphoma, another rare cancer. Instead of two years of chemotherapy, lymphoma patients were being given high doses of chemo over a period of four to six months.

Link recommended trying the more aggressive approach: Lydia would start chemotherapy immediately and complete therapy over the next five months. If her parents consented, she would be one of the first children with her form of ALL to receive this intensive chemotherapy.

“She was almost like a test case,” says her mother, Joanne. “It was a new treatment, and my husband, David, and I had to trust the doctors. We told them, you should do whatever you think is the best for her.”

Lydia got her first round of chemo shortly after being admitted to the Children’s Hospital at Stanford in December 1990. “It was an arduous few months,” she recalls. “It was very painful. My hair fell out, I was throwing up, and I went from 60 pounds down to 30.”

Lydia’s ordeal was also difficult for her little sister and her parents. “David and I went through a real struggle about how we could care for Lydia 24 hours a day and still take care of her sister,” Joanne says.

By June 1991, the chemotherapy had ended, but Lydia continued to receive care to help manage her low blood counts. That month, Lucile Packard Children’s Hospital opened, and she was among the first patients transferred to the brand new facility.

“Dr. Link carried me into the new building,” Lydia says. “I don’t remember much about when I was sick, but I will always remember Dr. Link. He cared. He brought me gifts and made sure I did my homework. There was a deep doctor-patient relationship that continued for many years.”

By December 1991, a year after she started treatment, Lydia was in complete remission, and her life was virtually back to normal. She still needed frequent check-ups, but fewer and fewer as the years went by.

“Children like Lydia are one of the main reasons Packard Hospital was built,” says Link. “We were treating desperately sick patients with regimens associated with potentially life-threatening complications. If they needed intensive care, we’d have to transport them to the pediatric unit across campus at Stanford Hospital. It was like being a tightrope walker without a net. To finally have a full-service hospital with an intensive care unit, surgical rooms, and CT scanners in one building was enormously comforting.”

With deep appreciation for the care that Lydia received at Packard, David and Joanne endowed the Lydia J. Lee Professorship in Pediatric Oncology at Stanford in 2002. The first recipient of the endowed chair was Michael Link.

“My family wanted to give back,” Lydia says. “What better way than to give an endowment to Dr. Link, who was such a big part of my life.”

The Lee Professorship provides salary support for Link and other investigators in the oncology program to search for new and better treatments for leukemias and lymphomas. In addition to the generous endowment, Joanne Lee also volunteers at Packard as a Korean language translator for patients and families.

“The Lees are remarkable people,” Link says. “They’ve become part of the fabric of the Hospital, giving back financially and physically. You can’t ask for more.”

Lydia, now 26, is pursuing a career in public relations. Her prognosis is excellent, and the chance of her cancer recurring is remote. Today, the survival rate for children with Lydia’s rare subtype of ALL is about 80 percent, and what was considered experimental therapy 20 years ago is now the standard treatment.

“What a great thing,” Joanne says. “So many patients have benefited from the research that came from Lydia’s case. But successful research depends on help from the community. If we have the ability to provide support, I think we should.”
AT AGE 10, BRANDON PRIDE OF MORGAN HILL has been elected school president, competed in the Junior Olympics, and earned a brown belt in Taekwondo.

Brandon’s achievements are extraordinary considering that, when he was 17 months old, he was diagnosed with Wilms tumor, a rare form of kidney cancer. Typically, Wilms affects only one kidney, which can be removed or treated with radiation and chemotherapy. But Brandon had tumors in both kidneys—a large one on the right and a smaller one on the left. In 2002, Packard surgeons removed his right kidney and kept the left one intact. But within weeks, the tumor in the left kidney began to spread.

“At that point, most doctors would have recommended a parent-to-child kidney transplant,” says Brandon’s mother, Keira. But Packard transplant surgeon Oscar Salvatierra, MD, suggested—and successfully performed—a new procedure: he removed the left kidney, cut out the tumor, irradiated the organ, and then re-implanted it into Brandon’s abdomen.

Then Brandon had another setback. A tumor appeared in his right abdomen in the area where the right kidney had been taken out. In 2003 the new tumor was removed by Craig Albanese, MD, the John A. and Cynthia Fry Gunn Endowed Director of Pediatric Surgical Services.

Brandon underwent an aggressive schedule of chemotherapy and radiation to combat his relapse. “We spent a lot of time at Packard,” says Brandon’s father, David. “We’re really thankful for the quality of care and the quality of the people there, especially Dr. Neyssa Marina, Brandon’s oncologist.”

Keira agrees. “Dr. Marina is basically a genius,” she says. “She remembers everything. Her mind is amazing. She has a great personality and is super-friendly and energetic. And she always addresses Brandon first—she talks to him on his level.”

During his hospitalization, Brandon spent many hours in the Forever Young Zone, the Hospital’s recreation playroom. He also enjoyed watching movies and playing with therapy dogs. And there were surprises. One day, Pixar artists working on the animated film, Finding Nemo, came to the Hospital and drew pictures for patients.

Now in 4th grade, Brandon has become a top athlete and student. He still goes to Packard for annual check-ups, but he is cancer free. “If Dr. Salvatierra hadn’t suggested that new surgery, Brandon would have had to undergo a transplant and be on anti-rejection medication for the rest of his life,” Keira says.

In gratitude, Brandon’s parents joined the Children’s Circle of Care, an important source of annual support for the Hospital’s greatest needs.

“We direct a lot of our giving to Packard’s Social Services Fund, so that families who are financially challenged don’t need to worry about things like rent, food, and utility bills,” David says.

“When you spend weeks at a time at the Hospital, you get to know other families very closely,” Keira adds. “Many of them have financial troubles on top of their child having cancer. It’s heartbreaking. That’s why we feel it’s so important to help Packard continue to make its services available to the entire community.”
LIKE MANY KIDS IN ASPEN, COLO., Peyton learned to ski shortly after he learned to walk. He also loves ice hockey, or the preschool version of it anyway. “There’s a pond at his school,” says his mother, Kirsten, “and they go out on it with balls and sticks.”

That’s remarkable considering that Peyton was born with pulmonary atresia, a malformation of the valve that sends blood from the heart to the lungs to pick up oxygen. Kirsten was 30 weeks pregnant when Colorado doctors diagnosed the condition in Peyton, her second child. “There’s no Neonatal Intensive Care Unit in Aspen, and we have family in California,” she explains. “So we did our research and decided to have the baby at Lucile Packard Children’s Hospital.”

Five days after Peyton’s birth in 2007, Packard heart specialists attempted to open his pulmonary valve with a catheter. He had a second catheterization at six weeks. Then at three months Frank Hanley, MD, chief of pediatric cardiothoracic surgery and the Lawrence Crowley, MD, Endowed Professor in Child Health, performed open heart surgery, increasing the blood flow to Peyton’s lungs.

In all, the family spent three-and-a-half years in California, traveling back and forth from the East Bay to Packard whenever Peyton needed follow-up care. “I thought it was going to be a horrible, horrible experience,” Kirsten says. “But looking back, the care that Peyton received was just phenomenal.” Today, she reports, “He has no physical restrictions at all. He’s as happy as a little clam. I’ve had strangers walk up to me saying he needs his own comedy show.”

While in the Bay Area, Kirsten gave birth to a second baby boy, bringing their little brood up to three: big sister Skylar, Peyton, and little brother Logan. They also made an important financial decision: to present a major gift to the Children’s Heart Center at Packard Children’s Hospital.

“The funds that Peyton’s family provided have allowed the Heart Center to recruit a new mid-career faculty member, Pilar Ruiz-Lozano,” reports a grateful Daniel Bernstein, MD, chief of pediatric cardiology. “Dr. Ruiz-Lozano has garnered worldwide attention for her pioneering work on cardiac development and on the role of stem cells in cardiac repair.” The money also will enable Bernstein to hire a post-doctoral research fellow, giving Ruiz-Lozano and her colleagues much-needed help to seek new cures and therapies for patients like Peyton.
FOUR-YEAR-OLD ELISE COTTONARO IS A SPUNKY LITTLE PRESCHOOLER with bright eyes and swingy blonde hair. She loves to sing and dance. As for her social skills, “She’s a force to be reckoned with,” says her mother, Ryann. “At the park, she has no hesitation about running up to other children and asking them to play. She’s not shy at all.”

Hard to believe that at birth, Elise was so weak she could hardly move. The cause was severe fetal anemia, brought on by a tear in the placental lining about a month before her due date. “I’d had a normal pregnancy,” Ryann recalls, “and then at around 36 weeks I was sitting at my desk at work and thought, ‘She isn’t moving as much as usual.’”

A Packard nurse encouraged the first-time mother to come in for an ultrasound, and before Ryann knew it, she was being whisked down the hall for an emergency C-section. Her husband, Mark, saw the whole thing. “I was told that looking over the curtain was okay but not recommended,” he wrote shortly after the birth. “When I saw our daughter for the first time, almost completely lifeless, I could hardly contain myself. I had to keep giving my wife words of assurance that everything was okay, to get her past the last leg of her surgery.”

Elise, just hours old, received three blood transfusions that night. She spent the next 12 days recovering in Packard’s Neonatal Intensive Care Unit.

“It felt like a lifetime then,” Ryann recalls. “But everyone was just so wonderful to us, taking us step by step. There was never any question that they didn’t know exactly what was going on. I don’t know what the outcome would have been if she had been in a different hospital.”

After Elise went home to Redwood City, her mother brought her back at regular intervals to the Mary L. Johnson Pediatric Ambulatory Care Center at Packard, where doctors checked to make sure her growth and development were on target. The only hitch came at 15 months, when Elise seemed slow to talk. “They started her in speech therapy and by the time she turned 2 she was actually ahead of the game,” Ryann says. “It was so reassuring that we had Packard looking after her in those first months.”

As a sign of their gratitude, Ryann and Mark decided to support the Hospital with a Circles of Leadership annual gift. Mark also sent a heartfelt thank-you letter to Packard CEO Christopher Dawes. “It is rare and eye-opening,” he wrote, “to see people of this caliber selflessly helping our child recover. We are eternally grateful that people such as your staff exist and are so willing to do whatever it takes, day after day, with such devotion. We owe our daughter’s life to your hospital and extraordinary staff.”
TARGETED THERAPY HAS BECOME A HOLY GRAIL in pediatric medicine. The goal is to design new drugs that target specific molecules and genes that cause childhood disease. Targeted drugs have proven more effective than radiation or chemotherapy for treating certain cancers, and have fewer debilitating side effects, such as nausea, weight loss, and fatigue.

At the Stanford University School of Medicine, Michael Cleary, MD, director of the Pediatric Cancer Biology Division, is conducting pioneering research that could lead to targeted therapies for leukemias, lymphomas, and other childhood cancers. But for Cleary and other scientists, securing financial support for basic research in pediatric oncology is a constant challenge.

“Relatively few children are diagnosed with cancer,” says Cleary, the Lindhard Family Professor in Pediatric Cancer Biology and professor of pathology. “It doesn’t make financial sense for a big pharmaceutical company to make a large investment for a small number of cases. So it’s up to academic institutions to do basic research that creates new therapies for kids.”

For the thousands of families whose lives have been turned upside down by cancer, every dollar that goes to basic research is a dollar well spent. Just ask Simone and Tench Coxe of Palo Alto. In 2003, the Coxes brought their 6-year-old son, also named Tench, to Lucile Packard Children’s Hospital for severe stomach pain and a swollen lymph node in his neck.

Tests revealed that Tench had Burkitt lymphoma, a cancer of the lymphatic system. If treated early, kids with Burkitt have an 85 percent survival rate. Within days of his diagnosis, he underwent the first of four rounds of intensive chemotherapy at Packard.

The chemotherapy was successful, and today, Tench is cancer-free. He’s in seventh grade and enjoys basketball, soccer, and reading about the history of ancient Greece and Rome.

“We were fortunate to be near such a world-class hospital,” says his father. “But ‘world-class’ doesn’t happen overnight. Simone and I used to take health for granted. Then we realized, holy mackerel, this could happen to anyone’s child at any time. That’s when we decided we really wanted to support pediatric cancer research.”

Since 2004, the Coxe family has supported the work of Cleary and the Pediatric Cancer Biology Division. “Thanks to their gifts, we’ve been able to hire additional postdoctoral fellows in our lab to do innovative experiments that are otherwise difficult to get funded,” Cleary says.

The Coxes’ generosity has already led to one major result. A postdoctoral researcher in Cleary’s lab recently discovered that up to 10 percent of all pediatric blood cancers are dependent on an enzyme associated with Alzheimer’s disease and diabetes, which affect millions of people worldwide. It’s the kind of discovery that is likely to pique the interest of the pharmaceutical industry, Cleary says.

“I’ve met with the Coxes, and I’m quite impressed with their understanding of the need to support basic academic research as a foundry for new pediatric therapies,” he adds.

In 2010, Tench and Simone augmented their earlier support with a major commitment to help fund the Packard Children’s expansion project.

“Medicine improves when people invest in it,” Simone says. “We benefited from all those years of research in lymphoma. Looking toward the future, we want Packard Children’s Hospital to be the best in everything, not only cancer care. It serves the community well, and we’re a part of this community.”
VISITORS TO PACKARD CHILDREN’S HOSPITAL may not know Caitlin Burns by name, but they’re likely to recognize her face.

“Caitlin’s poster is plastered everywhere at the Hospital,” says Packard pediatrician Carol Conrad, MD. “I often point to Caitlin’s poster and tell people, ‘See her? I know her!’”

Caitlin, now 16, was born with pseudo-obstruction of the gastrointestinal tract, a life-threatening condition that prevents the normal movement of food through her intestines, and an immune deficiency. Conrad and a team of Packard specialists have been caring for her since she was an infant.

“Caitlin has had amazing doctors and nurses,” says her mom, Kelly. “Their whole approach is, how can we make the hospital experience more normal for the child and family?”

For the Burns family of San Jose, Caitlin is not just a smiling poster child but a perfect example of Packard’s commitment to family-centered care. During her 15 years as a patient, Caitlin has been treated by specialists in surgery, immunology, gastroenterology, pulmonary medicine, endocrinology, genetics, and nutrition. She continues to visit Packard every three weeks for six-hour infusion therapies—an essential treatment that she will need well into adulthood.

Like many kids with pseudo-obstruction disorder, Caitlin developed an aversion to eating at a very young age. “We had to put her in feeding therapy,” says her dad, Jim. “We had to re-train her to eat smaller meals more frequently.”

Little wonder, then, that her parents were surprised when their daughter recently announced her career choice.

“I want to be a chef,” Caitlin says. “I want to open up a bistro. I just love to cook, any type of food.”

For Caitlin, it’s the little things at Packard that make the difference. In 2007, staff members threw a party for her 12th birthday. They even let her ride her bicycle on the Hospital’s rooftop patio.

Now a sophomore in high school, Caitlin gets good grades and enjoys jazz dancing and ballet. Her condition is manageable, and her prognosis is good. She’s looking forward to college and, eventually, culinary school.

“Having spent as much time at the Hospital as we have, you learn to count your blessings,” says Jim. “Packard treats so many families that can’t otherwise afford care—they don’t get turned away.”

To ensure that Packard is able to continue serving families in need, Jim and Kelly have joined the Circles of Leadership annual giving program. “We give every year, which is important,” Jim explains. “There are so many services at Packard that families can’t get at any other hospital, and that’s all funded through donations.”

Caitlin’s story has inspired other relatives and family friends to support Packard Children’s as well. Her grandmother, Missy Ryan, began volunteering at the San Jose Auxiliary when Caitlin was 3 and eventually became president of the Association of Auxiliaries, overseeing all seven volunteer-run Auxiliaries whose events and activities raise funds to support uncompensated care at the Hospital. “Volunteering was something I knew I wanted to do, because we wouldn’t have Caitlin without Packard Hospital,” Missy says.

This year, in tribute to the Hospital, Caitlin prepared a list of the Top 10 Reasons Why Packard Is a Great Place for Kids, including:

1. It is a place where thousands of kids receive the best possible medical care from the best medical teams in the country!
2. Kid Focused—Treatments are personalized for kids, with everything from bubblegum anesthesia to red wagon transportation.
ON A WARM SUMMER EVENING LAST YEAR, 12-year-old Cole Combi of Lafayette took the mound at the Oakland Coliseum. The occasion was Donate Life Night with the A’s, and Cole—a two-time kidney transplant recipient and big-time sports enthusiast—had the honor of throwing out the ceremonial first pitch. Cheering from the VIP stands were his transplant doctors and nurses, along with five other kids who’d had transplants or were awaiting them.

Besides being a fun occasion, the event raised $12,000 for the Social Services Transplant Fund. The fund is an important source of support for needy families, and covers basic living expenses while their children receive treatment at Packard.

The A’s game was not the only fundraiser spearheaded by Cole’s parents. Last year the couple hosted a Mexican fiesta and auction in a neighbor’s restored barn that netted $22,000 for Packard’s new dialysis center. Another time they ran 200 miles with friends, from Calistoga to Santa Cruz, to educate people about the importance of organ donation.

John Kerner, MD, professor of pediatrics and medical director of the nutrition support team, is one of several Packard physicians who have been bowled over by Rob and Carla Combi’s generosity. “It’s awesome, seriously,” says Kerner, who treats many of the Hospital’s young liver transplant patients. “What this family has undertaken for organ donor awareness is light years ahead of what anyone else I know has done. They should be commended big-time.”

The eldest of three children, Cole was born with a blocked urethra that caused his urine to back up, damaging both of his kidneys. His first transplant, using one of his mother’s kidneys, was performed by Packard surgeon Oscar Salvatierra, MD, when he was barely a year old. When Cole was 7 his body began to reject that graft, and he was put on the transplant list again.

“The second time around we sent out emails to several friends asking for people to volunteer to be tested,” his mother says. “They passed it on to others, and in the end over 200 people were tested. It was an incredible outpouring of support.”

Cole eventually found his new donor—a family acquaintance named Warren Helffinger, who’s now a close friend. Since the transplant, “Knock on wood, things have been very quiet,” his mother reports. “Cole is in sixth grade now, his first year in middle school. And he can play sports in the mainstream, which is really great. Basketball is his passion.”

For their next fundraiser, the Combis are planning another barn party, this one to benefit Packard’s 2011 Solid Organ Transplant Camp. The program allows kids like Cole to spend a week away from home each summer, happily spreading their wings and playing ball under the supervision of Packard transplant staff volunteers.●
Our Hearts Are with Packard
By Theresa Johnston

Standing in the Neonatal Intensive Care Unit at Packard Children’s Hospital, Beth and Bob Shuman of Los Altos felt increasingly anxious. Their first and only child was fighting for her life after inhaling a potent mixture of meconium and amniotic fluid in utero. Several hours after Katie Jo’s birth, in 1999, doctors and nurses still were trying to get the sticky fecal material out of her lungs.

As the situation worsened, a physician approached the Shumans with a medical release form. Would it be okay if she gave Katie Jo an experimental drug—one that might help her tiny body break down the tar-like substance and expel it?

“Bob and I looked at each other,” Beth recalls, “and then we looked at the papers and said to the doctor, ‘We’re not going to read these. Would you give this to your baby?’ She replied, ‘Absolutely.’ So we just signed it and she ran. She gave Katie Jo the new medication, and it made all the difference.”

Katie Jo spent 13 days in the NICU at Packard Children’s, during which time staff and nurses “became family,” Beth recalls. “We didn’t realize until later how they got us through it. The kind of work they do is mind boggling, and the fact that it was a teaching hospital, in those circumstances, was a huge plus. You can’t have enough brains working together to treat your child. We just felt we had the best of the best available to us, 24 hours a day.”

Fortunately for the Shumans, Katie Jo has had no lingering effects whatsoever from her early NICU experience. Now 11, she’s an active sixth grader. Besides pitching for her school’s softball team, she loves basketball and soccer. She also has an artistic, entrepreneurial streak: One of her hobbies is designing and selling jewelry for good causes.

Her parents likewise have a soft spot for good causes, which is why the couple decided to support Packard Hospital with an annual Children’s Circle of Care gift. As Beth explains, “Katie Jo was our last gasp at having a child; I was 42, my husband and I both were on our second marriage. She truly is the joy of our lives. So when we sat down this year and thought about what philantropies we wanted to support, I said, ‘You know, we wouldn’t even have this life but for the fact that they brought her back from the edge of that cliff.’ There are so many needs that it’s hard to know where you ought to be putting your dollars. But our hearts are with Packard Children’s Hospital.”
When Jeffrey Kockos of Woodside was born with severe heart defects 23 years ago, doctors gave him little chance of survival.

“We were told that he wouldn’t make it to his first birthday,” recalls his mother, Susan. “But we were determined that our son would live a strong, healthy life, so we took him to Stanford. They gave us hope.”

Pediatric cardiologists at Stanford confirmed that Jeffrey had two congenital heart conditions—subaortic stenosis, or narrowing of the left ventricle, and hypertrophic cardiomyopathy, a thickening of the heart muscle.

When Jeffrey was 18 months old, he underwent heart surgery to widen his ventricle. He seemed fine until age 3, when he caught the flu and became violently ill.

“We didn’t know what was wrong,” Susan says. “He kept throwing up and was in a state of total confusion.” Jeffrey was hospitalized and placed on intravenous fluids for a week. Doctors diagnosed him with acidosis—a condition in which high concentrations of lactic acid can overwhelm a child’s small body—but they were unable to determine why.

For the next nine years, virtually every time Jeffrey got the flu, lactic acid would fill his system, and he would be admitted to the Hospital until the virus passed. Each time, he was placed on IV fluids for several days until he was well enough to return home. But not all patients were as fortunate.

“I had roommates who had been there for weeks at a time,” he says. “When you know there are kids still struggling while you’re getting better, it makes you want to do something for them and give back to the Hospital and the staff for helping you.”

Jeffrey’s philanthropic spirit continued to grow, and at age 11 he came up with an inspired fundraising plan—he would build a haunted house for Halloween. Admission would be free, but visitors would be encouraged to leave donations for the Hospital. At age 13, with the help of family and friends, Jeffrey opened his first haunted house to the public and raised $604 for Packard Children’s.

Each year, the haunted house became bigger and more elaborate, with props, lights, moving parts, and tiny valves that shoot air at startled trick-or-treaters. His lactic acid condition also improved, and he no longer needed to be hospitalized when flu season arrived.

But at age 16, Jeffrey suddenly experienced severe chest pains. By then, he was under the care of Daniel Bernstein, MD, Packard’s chief of pediatric cardiology.

Bernstein traced the chest pains to Jeffrey’s heart surgery as an infant. It turned out that a surgical wire fastened to his breastbone had fractured and was irritating a nerve ending under his skin. When Packard surgeons removed the wire, the chest pains went away.

The surgical team also gave a sample of Jeffrey’s muscle tissue to Gregory Enns, MD, director of biochemical genetics, for closer analysis. Using technology unavailable 20 years ago, Enns was able to diagnose Jeffrey with complex IV deficiency, a rare metabolic disorder that caused his bouts with acidosis when he was younger, and may have contributed to his congenital heart problems.

Today, Jeffrey is a successful real estate agent. His health is good, and his long-term prognosis is excellent.

“The nurses, doctors, and volunteers at Packard have been amazing to Jeffrey and to our family,” Susan says. “The care was brilliant. It saved all of our lives.”

And over the last decade, thousands of people have gone through Jeffrey’s Haunted House, raising more than $20,000 for Packard Children’s Hospital. For Jeffrey, the secret to giving is to have fun while you’re doing it.

“I love it so much,” he says. “It’s like a double-end gift: I get to do what I enjoy, which is to build a haunted house, and I also give back to the Hospital that did so much for me.”
VISIT THE ROSSI HOME IN APTOS and you’re likely to hear the steady thump-thump-thump of drums coming through the front door. Thirteen-year-old Cole Rossi, a seventh grader at Aptos Junior High School, has just started percussion lessons. “It’s a little loud at our house!” his mother, Linda, says with a laugh.

Six years ago the family was considerably more downbeat. Cole had had a rough infancy complicated by problems with his adrenal glands. Then one day while on a family trip to Mexico, he began vomiting uncontrollably. The Rossis rushed home, and a subsequent CT scan at Packard Children’s Hospital led to a frightening diagnosis: Cole had a golf-ball-sized tumor in the middle of his head that was causing a dangerous buildup of fluid in his brain.

At first pediatric neurosurgeons said an operation was out of the question—too risky. But when radiation failed to shrink the mass, Paul Fisher, MD, chief of child neurology, convinced his colleagues to operate anyway. Michael Edwards, MD, and Stephen Huhn, MD, scrubbed up and set to work. Eight intense hours later they came back with the best possible news: They had been able to remove one hundred percent of the tumor.

Looking back, Linda marvels at the care and concern lavished on her family. “Whether it was the nurses or the radiologists or the surgeons, they all went out of their way to alleviate our fears,” she says. “Dr. Fisher even gave me his personal cell phone number to call any time I needed. It was comforting to know he was just a phone call away.”

Linda also is grateful for the services of Packard’s innovative HEAL program—short for Hospital Educational Advocacy Liaisons. Not long after Cole’s operation, coordinator Jeanne Kane helped set up an Individualized Education Program at Cole’s elementary school to keep him on track academically. More recently, Kane assisted the family with the transition to junior high. Among her creative suggestions: Let Cole take a study skills class instead of PE, and have him take up after-school sports—martial arts, for now.

Like many thankful parents, Linda and her husband, David, wanted to give something back to Packard Children’s Hospital. Their chosen avenue was the Circles of Leadership annual giving program. As Linda explains, “We were really impressed with the Hospital’s level of care and the level of compassion.”

And what would Cole tell other kids about Packard Children’s Hospital? “I’d just say that the doctors and nurses are really nice and they want you to get well soon, so don’t worry. They’ll do their job.”
When Adrianne Wonnacott of San Carlos sat down recently to update her will, she couldn’t help thinking back to the dark winter and spring of 2006-07. Adrianne was barely six months pregnant with her first child when her amniotic sac ruptured prematurely, leaving little fluid to support her baby. For the first two weeks of his life, her son, Charlie, clung to life in the Neonatal Intensive Care Unit at Packard Children’s Hospital. Connected to a breathing ventilator, he also received blood transfusions and UV treatment for jaundice. At two months he developed retinopathy of prematurity, an eye disorder that tends to strike the smallest of preemies. At five months he developed hydrocephalus, a buildup of fluid inside his skull.

In short, it was a harrowing time. Yet Adrianne was so grateful for the care her tiny son received—and so impressed by the attention given to all the babies in the NICU, of all backgrounds and means—that she decided to leave a portion of her future estate to Packard Children’s Hospital. To do so, she worked closely with her attorney, Judy Gordon.

“It was just something I wanted to do,” Adrianne explains. “Packard really takes care of all of its patients. They take in everyone across the board, whether families can afford to pay or not, and they treat everyone equally. That was very apparent to me in the NICU, and it really meant a lot.”

Adrianne’s husband, Bruce, echoes her sentiments. “There were a hundred things for me to worry about when Charlie was born. But the question, ‘Should I try to get my son treated somewhere better?’ was never something I had to worry about. Knowing that we already were at one of the best children’s hospitals in the country took a huge weight off my shoulders.”

Today, Charlie is a high-energy preschooler who loves anything to do with trucks, trains, cars, and planes. His breathing scares and reflux issues are a thing of the past. Glasses help him to see better, and physical therapy has made him surer on his feet. “We expect that he’ll face ongoing challenges,” his mother reports, “but today he’s making steady progress.” Add to that the fact that there’s a new baby brother in the house, and the future for the Wonnacott family seems bright.
IN THE news

Shreyas Vasanawala, MD, PhD

Vasanawala Honored for Research
Shreyas Vasanawala, MD, PhD, the Tashia and John Morgridge Faculty Scholar in Pediatric Translational Medicine and assistant professor of radiology, received the GE Healthcare 2010 Thought Leader Award at the annual meeting of the International Society for Magnetic Resonance in Medicine in Stockholm. The honor recognizes his innovative research to improve pediatric MRI techniques for evaluating childhood disease. ■

Krummel Elected to Leadership Role
Thomas Krummel, MD, the Susan B. Ford Surgeon-in-Chief at Packard and professor and chair of the department of surgery at Stanford, has been elected to two positions in the James IV Association of Surgeons: international vice president and president of the U.S. division. The Association, named for a surgically-minded English monarch, sponsors activities to improve communication among surgeons in English-speaking countries. ■

Mentorship Award for Stevenson
David Stevenson, MD, director of the Johnson Center for Pregnancy and Newborn Services at Packard and vice dean and Harold K. Faber Professor of Pediatrics at Stanford, received the 2011 Maureen Andrew Mentorship Award from the Society for Pediatric Research. The award, established in honor of the late Dr. Andrew, is given to individuals who serve as exemplary mentors for trainees in child health research. ■

Roberts to Lead Physician Network Development
In January, Packard announced the appointment of Kim Roberts as vice president of physician network development and management. Roberts brings a wealth of experience to the Children’s Hospital, having served previously as chief financial officer and chief executive officer of the Santa Clara Valley Health and Hospital System. In her new role, Roberts will direct the development of a growing network of community physicians. ■

Community Honor for Safety Preparedness
Bernadette Burnes-Line, administrative director of the Office of Emergency Management for Packard and Stanford Hospitals, was honored by the City of Palo Alto and Palo Alto/Stanford Citizen Corps Council with a 2010 Achievement Award in October. The honor recognizes Burnes-Line for her efforts to ensure that the community is safer and better prepared for emergencies. ■

Central Payment Sponsors Patient Events
Central Payment of San Rafael has committed $25,000 to support special events for patients and siblings at Packard Children’s. The gift provides two years of funding for four events hosted annually by the Hospital’s Child Life Program: a Halloween Party, a Holiday Classic, a Spring Outing, and a Summer Party. The events provide a welcome relief from the rigors of daily medical care, and are open to all patients and their siblings.

The gift is part of a new corporate philanthropy program at Central Payment, a leading provider of transaction processing services founded in 2006 by twin brothers Matthew and Zachary Hyman. ■
Grant Helps Packard Prevent and Treat Child Abuse

The West Coast (San Francisco) branch of Hedge Funds Care has awarded $40,000 to support the Suspected Child Abuse and Neglect (SCAN) team at Packard Children’s, a multidisciplinary task force created to recognize, assess, and respond to abuse and neglect of children. The gift will enable the SCAN team to expand its outreach and advocacy efforts, purchase specialized equipment for conducting physical and sexual abuse examinations, and increase child abuse prevention messaging in the Hospital’s primary care clinic.

Led by medical director Nicole Marsico, MD, director of social services Jack Komejan, and forensic child abuse expert John Stirling, MD, the SCAN team has become an invaluable resource for Packard physicians, nurses, and social workers. In 2010, the Hospital recorded 188 cases of suspected abuse and neglect, 53 more cases than the year before—due in part to the SCAN team’s training efforts to help staff recognize signs of abuse.

Hedge Funds Care is an international charity, supported largely by the hedge fund industry, dedicated to preventing and treating child abuse. It is the only public charity that focuses exclusively on funding this cause. Since its inception in 1998, Hedge Funds Care has awarded more than 660 grants totaling $24 million.

Sibley Joins Leadership Group

Pediatric gastroenterologist Eric Sibley, MD, PhD, has been elected to the American Clinical and Climatological Association (ACCA). He was inducted into membership during the organization’s 123rd meeting in October in San Antonio. ACCA members are selected on the basis of leadership and excellence in their chosen field.

Dual Awards for Palliative Care

Barbara Sourkes, PhD, the John A. Kriewall and Elizabeth A. Haehl Director of Pediatric Palliative Care and associate professor of pediatrics, was awarded the 2011 Outstanding Clinical Care Award by the American Psychosocial Oncology Society at its annual conference in Anaheim in February.

Additionally, Nancy Contro, LCSW, director of the Family Partners Program and Bereavement Services, was recognized with the 2011 National Social Work Leadership Award by the Social Work Hospice and Palliative Care Network. She received the award at the annual American Academy of Hospice and Palliative Medicine meeting in Vancouver, also in February.

Sandborg Receives YWCA Award

Christy Sandborg, MD, chief-of-staff at Packard and chief of pediatric rheumatology at Stanford, was honored with a Tribute to Women (TWIN) Award from the YWCA Silicon Valley at its 27th annual program in San Jose in May. The TWIN Awards Program honors women who demonstrate excellence in executive-level positions and the companies that employ them.
IN THE NEWS

Wu Wins Emerging Scientist Award

Joseph Wu, MD, PhD, associate professor of medicine and radiology, won a Presidential Early Career Award for Scientists in November. The award is the highest honor bestowed by the U.S. government on outstanding scientists and engineers in the early stages of their careers, and includes a multi-year research grant from the NIH.

Wu studies how embryonic and adult stem cells survive, proliferate, and transform into other cell types. He also works on techniques that can turn developed cells, like skin cells, into induced pluripotent stem cells. His research has important implications for clinical treatment of childhood cardiac disease.

New Care Guidelines for Muscular Dystrophies

Packard pediatric neurologist Ching Wang, MD, PhD, recently led an international effort to develop standard-of-care guidelines for children with congenital muscular dystrophies, a rare, devastating group of inherited diseases that cause progressive muscle weakening.

The new publication provides the first comprehensive medical consensus on how these complex disorders should be diagnosed and managed.

Congenital muscular dystrophies, which affect as few as one in 100,000 newborns, can impair mobility, breathing, eating, and cardiovascular and neurologic function, and can markedly shorten patients’ life spans. Because the diseases are so rare, most general pediatricians have little experience meeting patients’ complex medical needs. The new guidelines were published in the December issue of the *Journal of Child Neurology*.

Prestigious National Appointment for Robinson

Thomas Robinson, MD, MPH, director of the Center for Healthy Weight at Packard and the Irving Schulman, MD, Professor of Child Health at Stanford, was recently appointed to the National Institute of Diabetes and Digestive and Kidney Diseases Advisory Council of the NIH. With this appointment, through 2014, Robinson will help shape national policy around clinical research on obesity.

Longhurst Among Top Clinical Informaticists

Packard chief medical information officer Christopher Longhurst, MD, was named one of the Top 25 Clinical Informaticists of 2010 by *Modern Healthcare* magazine. The honor recognizes medical professionals who excel at using patient-care data to improve the clinical and financial performance of their healthcare organizations.

Butte to Lead Systems Medicine

Atul Butte, MD, PhD, has been appointed as the inaugural division chief of the newly created Division of Systems Medicine in the Department of Pediatrics at Stanford. The Division was created to reflect increased research interest in using data-driven approaches to improve health and health care. With exponential growth in clinical, genetic, and molecular measurements and data, the new Division is expected to attract a wide spectrum of research and funding opportunities.

Packard Hosts Cardiac Imaging Symposium

The Children’s Heart Center at Packard and the Department of Radiology at Stanford hosted an Advanced Pediatric Cardiac Imaging Symposium in January. The event, presented in conjunction with the Society for Pediatric Radiology, provided an invaluable educational opportunity for radiologists and cardiologists from around the world to learn about state-of-the-art medical imaging for children with congenital heart disease.
Hyundai Funds Leukemia Research at Stanford

Last fall, Hyundai donated $100,000 to the Stanford School of Medicine as part of its national Hyundai Hope on Wheels program. The gift will support Michael Wei, MD, instructor of pediatric hematology/oncology, in his efforts to improve treatment of leukemias in patients less than 1 year of age.

With an overall survival rate of only 50 percent, infant leukemias affect an extremely vulnerable population and represent a particularly devastating subset of pediatric leukemias. Wei is exploring new ways of understanding the pathogenesis of this disease in order to identify novel approaches for care.

Hope on Wheels represents the united effort of Hyundai Motor America and its more than 800 dealers across the U.S. to raise awareness about childhood cancer. Since its inception in 2004, the program has donated more than $23 million to support research and programs at children’s hospitals nationwide.

Barth Honored for Leadership in Radiology

Richard Barth, MD, Packard Radiologist-in-Chief and professor of radiology at Stanford, recently collected two awards in recognition of his leadership and commitment to excellence in pediatric radiology. The Society for Pediatric Radiology honored Barth with a Presidential Recognition Award at its annual meeting in Boston. The award is bestowed on individuals whose energy and creativity have made a significant impact on the work of the Society and its service to its members. RT Image magazine also named Barth to its list of the 25 Most Influential people, institutions, or events that shaped radiology in 2010.

Packard Nurse Tapped for High Honor

Pam Simon, RN, PNP, received the 2010 Jean Fergusson Award from the Association of Pediatric Hematology/Oncology Nurses in Minneapolis in October. The award recognizes excellence in nursing practice. Pam is patient care manager for the Packard Day Hospital in the Bass Center for Childhood Cancer and Blood Diseases.

Johnson Center Team Recognized

Fetal and Neonatal Brain Injury, Fourth Edition, edited by Packard physicians David Stevenson, MD, William Benitz, MD, Philip Sunshine, MD, Susan Hintz, MD, and Maurice Druzin, MD, was recently recognized with a “Highly Commended” choice in the prestigious 2010 British Medical Association Medical Book Awards. The honor affirms the global influence of Packard’s Maternal-Fetal Medicine and Neonatology teams.

Michelle Monje-Deisseroth, MD, PhD

Award for Monje-Deisseroth

Packard neurologist Michelle Monje-Deisseroth, MD, PhD, received the 2011 Peter A. Steck Memorial Award from the Pediatric Brain Tumor Foundation in April in recognition of her groundbreaking research on pediatric brain tumors.

Earlier this year, a team led by Monje-Deisseroth successfully created the first animal model of Diffuse Intrinsic Pontine Glioma, a rare brain stem tumor that is almost universally fatal. Her breakthrough will facilitate new research on treatments for this lethal childhood disease, and was published in February in Proceedings of the National Academy of Sciences.

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Dear Friends,

Twenty years ago, we opened the doors of a brand new hospital dedicated to the vision that every child in our community deserves the best medical care available.

As we celebrate our first two decades, I am honored to recognize philanthropy’s crucial role in helping Lucile Packard Children’s Hospital deliver on that promise, while also becoming a nationally recognized center for outstanding pediatric and obstetric care. Your support has allowed us to expand our clinical services and recruit faculty leaders and expert staff to build preeminent research and training programs.

Recent years, in particular, have brought remarkable achievements. In 2001, we established six Centers of Excellence, focusing on conditions such as childhood cancer, heart disease, and cystic fibrosis. In 2002, we launched our Quality and Safety Initiative, an applied effort to provide the highest quality of care to our patients. And in 2004, we opened the Peninsula’s first and only dedicated Pediatric Emergency program.

By 2005, we were recognized by U.S. News & World Report as one of the top 10 children’s hospitals in the country. The most recent rankings by U.S. News (see next page) also ranked a number of Packard’s specialty programs among the nation’s very best.

The next decade will see ongoing innovation. We will continue to advance care and research to benefit not only our own patients, but also children and expectant mothers across the country and around the world.

Our proposed expansion project will make all of this possible by providing the capacity and technology to meet the needs of the communities that we serve. The new facilities will allow us to fulfill our commitment to family-centered care, medical innovation, and training the caregivers of tomorrow. Your support will continue to be vital as we take this important next step.

Thank you, again, for your invaluable role in making Packard a world-class children’s hospital.

Sincerely,

Christopher G. Dawes
President and Chief Executive Officer
Lucile Packard Children’s Hospital
2010 Highlights

- **U.S. News & World Report** has once again ranked Packard Children’s among the nation’s best pediatric medical centers. The 2010 “America’s Best Children’s Hospitals” issue placed three of the Hospital’s specialties in the nation’s Top Ten, including heart and heart surgery (#5), kidney disorders (#5), and neonatology (#6). These honors made Packard Children’s the only Bay Area children’s hospital with programs in the Top Ten.

- In April, Packard opened the new Center for Comprehensive Fetal Health & Maternal and Family Care, designed to provide coordinated treatment for mothers and infants with challenging diagnoses. Families expecting a child with complicated medical issues benefit enormously from the Center’s collaborative subspecialty care and pioneering research.

- In an extraordinary event, the lives of three young Packard patients were saved by a single organ donor. Highly coordinated teamwork involving dozens of physicians, nurses, and Hospital staff resulted in separate pediatric kidney, heart, and liver transplants—carried out all on the same day. The three organ recipients are now thriving, thanks to Packard’s nationally recognized leadership in transplant surgery and care, and of course, to the donor who made it possible.

- Nurses from the Red Cross War Memorial Children’s Hospital in Cape Town, South Africa, arrived at Packard Children’s last summer to kick off a joint quality improvement project. The ongoing alliance fosters the professional development of critical care nurses at both hospitals, and develops strategies to improve clinical practices and patient care.

- In a case believed to be a U.S. first, Packard’s imaging team, led by Radiologist-in-Chief Richard Barth, MD, used prenatal MRI to detect a case of congenital chloride diarrhea (CCD). This frequently misdiagnosed genetic disease is extremely rare, with fewer than 250 total cases reported worldwide, but it can cause serious metabolic problems and severe dehydration in newborns. Thanks to a course of treatment that began at birth, the young patient with CCD is now thriving. Her case is one of only four known instances of CCD diagnosis ever made via prenatal MRI.

- Researchers at Packard Children’s were awarded a $12.7 million grant from the National Institutes of Health to design a pediatric weight-control program that could be used across the country. Under the direction of Thomas Robinson, MD, MPH, the Irving Schulman, MD, Professor in Child Health, Packard’s Center for Healthy Weight boasts an impressive track record: more than 80 percent of participants succeed in reducing their weight during an intensive, six-month program. The NIH grant will enable Packard’s model to benefit more overweight children nationwide.

- Members of the Stanford Autism Center at Packard Children’s Hospital, participating in an international consortium of researchers, announced the discovery of specific genes that give rise to autism. They believe this new information about the biological underpinnings of the complex disorder may lead to novel treatments and therapies.
### Statement of Operations

*For years ended August 31, 2010 and 2009 (in thousands)*

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<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
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</thead>
<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
<td></td>
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<tr>
<td>Net patient service revenue</td>
<td>$757,207</td>
<td>$695,915</td>
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<tr>
<td>Other revenue</td>
<td>23,570</td>
<td>27,847</td>
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<tr>
<td>Contributions used for operations</td>
<td>22,073</td>
<td>29,272</td>
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<tr>
<td><strong>Total revenues, gains, and other support</strong></td>
<td><strong>802,850</strong></td>
<td><strong>753,034</strong></td>
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<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
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<tr>
<td>Salaries and benefits</td>
<td>$338,753</td>
<td>$307,359</td>
</tr>
<tr>
<td>Other operating expenses</td>
<td>410,964</td>
<td>393,193</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>749,717</strong></td>
<td><strong>700,552</strong></td>
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<tr>
<td><strong>Excess of revenues over expenses</strong></td>
<td><strong>$53,134</strong></td>
<td><strong>$52,482</strong></td>
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</tbody>
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### Statistics

*Fiscal Year 2010*

- Medical Staff: 770
- Employees: 2,747
- Volunteers: 718
- Auxiliary Members: 1,183
- Licensed Beds: 311
  - Obstetric: 52
  - Pediatric: 259
- Inpatient Days: 81,830
- Clinic Visits: 140,353
- Discharges: 13,022
- Births: 4,574
Join the Packard Summer Scamper

Announcing the Packard Summer Scamper 5k/10k, an exciting new way to support the Children's Hospital! Our inaugural event—on Sunday, June 26, beginning at 9am—offers a USATF-certified course around the beautiful Stanford University campus.

Runners and walkers of all abilities are invited to participate. There's even a Kids' Fun Run! Teams and individuals can also choose to fundraise to support patient care, pediatric and obstetric research, outreach, and education at Packard and Stanford.

To find out more about the event and to register, please visit SummerScamper.org.

Participants are also invited to attend the nearby Packard 20th Birthday Party, following the race. Located at the intersection of Quarry and Welch Roads, the community celebration will feature more than 75 interactive booths, your favorite Hospital staff members, musical performances, storytelling, face painting, food, and more. This free event is open to everyone!