OPENS!
A storied beginning for our children’s future

The opening of our new Children’s Hospital Scott & White is a dream come true. Hundreds of people have worked hard to make this day a reality, from the architects and construction teams of the child-friendly patient floors and playrooms to the planning committees and the pediatric specialists, allied caregivers, volunteers, and staff whose input has helped shape each detail to respond to any need a child here might have.

Many more donors and volunteers have extended their generous support for the thousands of children who may need us at some point on their way to adulthood. It’s the might of a few, for the struggles of many—children with chronic diseases, acute illnesses, and traumatic injuries. This is the healthcare narrative of our time, but the story for Central Texans has a new chapter. Now parents don’t have to travel a great distance to seek a higher level of pediatric healthcare excellence, because it’s all available right now, right here, within easy reach. We’ve added more pediatric specialists and programs in a family-centered care environment. We also have a keen interest in furthering the study of pediatric medicine and advancing the science of patient care. With a strong commitment to partnership with pediatricians and primary care physicians, it all makes for a powerful combination.

We’re all believing in a little bit of magic these days. Together we’re making so many things possible for our children and their healthy futures.

Robert W. Pryor, MD
President and CEO, Scott & White Healthcare
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ON THE COVER—A ribbon-cutting ceremony officially opened the
Children’s Hospital Scott & White! Read more beginning on page 4.
The New Children’s Hospital Scott & White welcomes patients!
Scott & White has built it, and they are coming—to the new Children’s Hospital Scott & White. Children from across Central Texas can now experience an even higher level of pediatric healthcare excellence, with additional pediatric specialists and a brand-new facility dedicated just to them.

On opening day, October 4, the doors to the state-of-the-art Children’s Hospital Scott & White on the former King’s Daughters campus in Temple were flung wide, and many beds were soon filled with young patients and surrounded by the busy activity of pediatric specialists, nurses, technologists, child life specialists, and other caregivers who chose these careers because they simply love children. The spirits of children, too, were brightened by the colorful, child-friendly surroundings that resemble a Texas meadow, with playrooms, on-demand movies, and the ability to chat with friends using Internet-based Skype, all within easy reach. And for parents, there’s a respite room, where they can reflect, relax, and regroup during their child’s stay.

The 148,000-square-foot hospital has 64 private beds, including 48 medical and surgical rooms and 16 pediatric intensive care unit beds. A helipad, advanced surgical suites, a 14-bed Emergency Department, comprehensive laboratory services, and pediatric specialists in 40 pediatric medical and surgical specialties are on-site. (The Neonatal Intensive Care Unit within Scott & White Memorial Hospital remains in its current location. Patient transfers are easily conducted by specially trained neonatal/pediatric transport teams. Also, pediatric outpatient clinics remain in their current location, on the main campus at 2401 S. 31st Street in Temple, until construction on the new multispecialty pediatric outpatient facility is completed. See pages 16 and 17.)

Integrated teams of caregivers focus on individual needs of patients with chronic and acute illnesses, and those of children who require emergency care as a result of trauma or accident. The Children’s Hospital also has outreach programs, and plans for an expanded pediatric cancer treatment facility are under way (see page 16).

“Two years of planning, construction, and recruitment of additional pediatric specialists all came to fruition on this special day. We’ve been looking forward to it for a long time,” says John Boyd III, MD, MBA, Children’s Hospital Scott & White CEO and chief medical officer. “It’s really a turning point in all of our lives because we have made good on our promise to Central Texas families to offer the very best pediatric specialty care nearby so that children can do what they’re supposed to
The New Children’s Hospital Scott & White Welcomes Patients! continued

Dozens of pediatric specialists hold faculty positions at Texas A&M Health Science Center College of Medicine, and carefully trained nurses, technologists, respiratory, physical, and occupational therapists, and other pediatric professionals care just for children. The philosophy of care at the Children’s Hospital includes offering the most advanced technology, such as the Flash CT scanner, the only one available at a pediatric hospital in Texas. The scanner reduces imaging time and sedation needs for children. The Children’s Hospital also incorporates a family-centered care approach. This means that each child, his siblings, and his parents can expect the physical and emotional support they need in a child- and family-friendly environment. Specialists in social work, spirituality, and child life help patients and families cope with the challenges of caring for a sick or injured child.

“We are transforming pediatric healthcare in Central Texas to serve as a model for how to deliver high-quality, academic-based pediatric care in a community setting,” says Robert W. Pryor, MD, president and CEO of Scott & White Healthcare.

Dr. Boyd says, “Preserving and restoring the health of our children is what we have dedicated our lives to do. We have elevated our commitment to children here who need easier access to pediatric specialists.”

The Children’s Hospital Scott & White has also joined forces with the Texas Children’s Hospital (TCH) in Houston, which is ranked fourth among the nation’s children’s hospitals by U.S. News & World Report. This new partnership between Scott & White, one of the nation’s largest and most recognized multispecialty group practice healthcare systems, and TCH enhances access to pediatric care for children in Central Texas and the metropolitan Houston area. The shared expertise means that children in the region and around the state have the pediatric expertise they need near their homes, reducing the burden parents and children faced when they had to travel to a large metropolitan area to access certain types of pediatric care. It means having the right

**WILSONART’S GIFT**

Temple-based Wilsonart International, a manufacturer of decorative surfaces like countertops, has generously donated all the laminate surfaces in the Children’s Hospital Scott & White! In the past, Wilsonart has also donated its products to the Scott & White Cancer Institute.

In almost every corner of the new hospital, from the nurses’ stations to the patient rooms and playrooms, Wilsonart’s beautiful laminate surfaces contribute to the hospital’s bright, child-friendly decor. In addition to their aesthetic beauty, the laminates were created and installed as seamless pieces, thus eliminating the potential for bacteria and dirt to become trapped in seams between pieces of laminate.

“The hospital is such a great resource for everyone who lives and works here, so it was easy to get people here to rally around the idea,” says Bill DiGaetano, president, Wilsonart International, North America. “Our organization and Scott & White are both passionate about good service in the community. Wilsonart wants to do what it can to preserve and grow that.”

The company is so supportive of Scott & White’s efforts to care for children that the employees have selected the Children’s Hospital as the biannual recipient of their annual employee fundraising campaign. And Wilsonart has pledged to match their contributions three to one.
care in the right place. “The nation’s only children’s hospital located in a community setting is in Temple, Texas. We are proud of this distinction,” says M. Reddy Beeram, MD, physician-in-chief at the Children’s Hospital Scott & White and interim chairman, Department of Pediatrics at Scott & White Healthcare.

The partnership also allows for an equal exchange of ideas among specialists and for scientific inquiry to flourish at both esteemed institutions, in the hope of solving pediatric medicine’s most pressing problems. Medical training and outreach programs for children in underserved areas are another exciting benefit of the collaboration between the Children’s Hospital Scott & White and the Texas Children’s Hospital.

A community of support

Special events were held in September to thank the community, donors, and organizations that supported efforts to open the Children’s Hospital. The celebrations highlighted all that has been achieved, and all that is to come.

“We continue to be inspired by the commitment our community has shown to the place that is synonymous with excellence in healthcare—Scott & White,” says Alfred B. Knight, MD, president of the Scott & White Healthcare Foundation, and professor of obstetrics/gynecology at the Texas A&M Health Science Center College of Medicine. “Children in Central Texas now will never have to worry about accessing the kind of specialty care they deserve, the kind that gives parents and families everywhere peace of mind. Philanthropy helped make this possible.”

Nancy Birdwell, chief executive officer of the Scott & White Healthcare Foundation, says, “It’s human nature to want to do whatever one can to help others. Each person who gave of their time or treasure is an example of all that is good about the people who surround and support Scott & White. They are among those who are fiercely dedicated to protecting the needs of our children.”

With pediatric expertise and the support of the communities that the Children’s Hospital Scott & White is privileged to serve, children in this area will thrive for generations to come.

Caden Davis hooks horns with Colt McCoy during a special visit that the Cleveland Browns quarterback and his wife, Rachel, made to Children’s Hospital Scott & White.

Getting Involved Is Easy!

Many opportunities exist to show your support for the Children’s Hospital Scott & White. Visit foundation.sw.org to learn more about these and other programs:

Grandparents Club
You can make a gift in your grandchild’s honor and continue our legacy of caring for children in Central Texas.

Champions Program
Share your child’s story about the care he or she received at the Children’s Hospital, serve as “Ambassadors of Thanks” by writing thank-you notes to donors, volunteer at Children’s Hospital events, and serve on hospital committees.

Volunteer Program
Join our band of supporters and help bring smiles to our young patients’ faces.

sw.org | Fall 11 THE CATALYST
THANK YOU ALL!

A heartfelt thank-you to all of our donors and community members who share our vision of making children’s futures brighter. Our hearts were warmed by the overwhelmingly positive response we received at the events to celebrate the opening of the new Children’s Hospital Scott & White. For more information on how you can get involved, please visit foundation.sw.org.
Many Stars Sharing Our Vision Event

On September 23, a special preview event was held for donors to the new Children’s Hospital Scott & White. The evening included tours of the new hospital, a progressive dinner catered by The Range restaurant in Salado, and musical entertainment by Toast and Jam.
“Birthday Party” Community Celebration

A community open house and ribbon-cutting ceremony on September 24 welcomed hundreds of individuals, including current and past patients, as well as other well-wishers eager to see the brand-new Children’s Hospital Scott & White. Tours, face painting, live entertainment by the Emmy Award—winning music-and-television team the Biscuit Brothers, cowboy storytelling by K. R. Wood, and a meet-and-greet with pediatric leaders were part of the revelry! Other highlights included carnival games, crafts, fitness demonstrations, refreshments, and excitement about this amazing new place dedicated to preserving and restoring the health of children.
The opening of the new Children’s Hospital Scott & White fulfills the first phase of Scott & White’s efforts to serve the population of children in Central Texas. “We’re working hard to open three new facilities to support our inpatient services,” says Nancy Birdwell, chief executive officer of the Scott & White Healthcare Foundation and chief development officer at Scott & White Healthcare. “When we made a commitment to the children of Central Texas, we pledged to see it through. That means making sure parents could count on all the resources they need to help them manage their child’s health, including the Children’s Hospital and the continued development of facilities and programs to keep pace with pediatric healthcare delivery.”

**New Pediatric Cancer Center**
Scott & White plans to open a dedicated Pediatric Cancer Center next to the new Children’s Hospital Scott & White. Under the direction of hematologist Javier R. Kane, MD, the new center will encompass 8,000 square feet. It will include six examination rooms, two treatment rooms, eight infusion bays, a family consulting area, a parents’ lounge, and a play area. An anonymous gift of $1.5 million was received to support the development of this most important facility. (Please see the Spring 2011 issue of *THE CATALYST* to learn more.)

**New Pediatric Multispecialty Clinic**
An 80,000-square-foot multispecialty pediatric outpatient clinic on the Children’s Hospital campus will include general pediatric physicians as well as medical and surgical pediatric specialties. The new Pediatric Neurosciences Center will be on-site as well. It will include pediatric neurology, neurosurgery, otolaryngology (ear, nose, and throat), audiology, speech pathology, and mental health.

**New Pediatric Primary Care Clinic**
A new 10,000-square-foot pediatric clinic will be built on West Adams near Holy Trinity Catholic High School in Temple. The new clinic will have 18 exam rooms and space for nine pediatricians. (The existing pediatric primary care clinic, at 2401 S. 31st Street, Temple, will continue seeing patients until the new clinic opens.)

Philanthropy makes a critical difference to the achievement of these goals, and you can, too. Visit foundation.sw.org to learn more.
PRIORITY EQUIPMENT NEEDS

WE’RE NOT DONE YET! Vital equipment is still needed to support our new Children’s Hospital. A few examples include:

HUGS Patient Protection System
$152,000
Armbands connected to an alarm that is triggered when a child is too close to an exit

Glidoscope for Emergency Department
$25,000
State-of-the-art technology that allows physicians to quickly and easily place a child’s breathing tube

Light Source for Bronchoscope
$8,900
A special light that visualizes a child’s airway

Portable Ultrasound for Emergency Department
$45,000
A diagnostic tool that takes images inside the body

Mini C Arm for Emergency Department
$60,000
A portable X-ray machine

Two Automatic External Defibrillators (AED)
$1,000 each
Portable electrical devices that help stop a heart’s irregular rhythm and reestablish normal beating function

For more information, please visit foundation.sw.org.
Additional physicians and programs help more children and their families

NEW LEADERSHIP
AND EXPANDED PEDIATRIC SPECIALTY SERVICES
The new Children’s Hospital Scott & White welcomes new physicians, leaders, and specialty care programs to augment existing pediatric medical and surgical expertise. More than 40 pediatric medical and surgical specialties and support programs are delivering the best possible pediatric care, with more programs to follow. Some of these are featured below.

**Pediatric Emergency Department**
The state-of-the-art 14-bed Pediatric Emergency Department cares for patients with acute illnesses and injuries, making the Children’s Hospital the only acute care pediatric hospital between Dallas and Austin. “It’s really an amazing thing to have a dedicated pediatrics-specific emergency room in a community this size,” says Dominic Lucia, MD, medical director of the Pediatric Emergency Department at the Children’s Hospital. Dr. Lucia completed an emergency medicine residency at Scott & White, and returned this past September after completing a fellowship program in pediatric emergency medicine at Georgia Health Sciences University.

Dr. Lucia says the Central Texas community will benefit greatly from a pediatric emergency room. “We specialize in evaluating and treating children. Everyone here has an interest in treating acute childhood illnesses and traumatic injuries. We have the facilities, the equipment, and staff who are skilled in treating children and helping families understand what’s going on. We focus on shared decision making with parents. At Scott & White, we strive to put our patients first.” If necessary, a deep bench of pediatric specialists at the Children's Hospital is available for patients who need to be referred.

Physicians, nurses, and support staff have a shared goal here: ensuring patients’ well-being and making the experience as positive and comfortable as possible. “Nobody wants to come to the Emergency Department, but we can tailor it to children and their families, to make it less scary,” says Dr. Lucia.

**Pediatric Cardiology**
Pediatric cardiologists treat children with congenital conditions (those present at birth) and acquired heart disease caused by high blood pressure, childhood obesity, familial condition, or infection. John Pliska, MD, chief of the Division of Pediatric Cardiology, and assistant professor of pediatrics at the Texas A&M Health Science Center College of Medicine, says, “We have a high level of expertise, so we can comprehensively evaluate and treat children with possible or known heart abnormalities and disease.” He and Judith Lazol, MD, are already on board now to diagnose and treat patients, and Dr. Pliska is recruiting two more pediatric cardiologists to join the Children’s Hospital by next summer. “Our...
The partnership will help Children’s Hospital Scott & White build a pediatric cardiac surgery program, Dr. Pliska says, as well as boost the education missions of both hospitals. Dan Penny, MD, PhD, chief of cardiology at the Texas Children’s Hospital, says, “We will learn from each other. We’ll be paying close attention to Scott & White’s expertise in how to deliver community-based care. Our partnership helps both organizations and, ultimately, the children we care for.”

Pediatric Pulmonology
Pediatric pulmonologists treat children with lung and breathing disorders. With almost 40 years’ experience, Felix Shardonofsky, MD, brings his expertise to the Children’s Hospital as the new chief of pediatric pulmonary medicine. He joins Alma Chavez, MD, MPH, who was recruited by Scott & White in 2010, and longtime pediatric nurse practitioner Michele Prater.

“Our goal is to develop a pediatric pulmonary division that has an advanced capability to deal with complex patients,” says Dr. Shardonofsky. He plans to develop new respiratory care programs to join Scott & White’s Cystic Fibrosis Center. Another goal is to develop a dedicated asthma program for patients with that life-threatening disease, as well as multidisciplinary programs with the Division of Pediatric Cardiology to treat patients with cardiopulmonary problems, such as pulmonary vascular disease. He also plans to create a pediatric sleep program and recruit a pediatric pulmonologist certified in sleep medicine; sleep disturbances often affect breathing.

Dr. Shardonofsky looks forward to the opening of a pediatric pulmonary physiology laboratory, as well as a cardiopulmonary exercise laboratory, both scheduled for 2012. These labs will mean that patients in Central Texas will no longer have to travel to big-city hospitals for specialty tests. “They will give us the capability to perform a very thorough evaluation of patients with cardiopulmonary problems,” says Dr. Shardonofsky. Pediatric respiratory medicine clinics also will expand at Scott & White locations in Round Rock, Killeen, and Waco, with a new clinic opening in College Station.

Pediatric Hematology/Oncology
The Division of Pediatric Hematology/Oncology recently welcomed new leader Javier Kane, MD, who came to the
Children’s Hospital from St. Jude Children’s Research Hospital in Memphis, Tennessee. He joins Guy Grayson, MD, assistant professor of pediatrics, Texas A&M Health Science Center College of Medicine, and Melissa DeLario, MD, assistant professor of pediatric hematology/oncology, Texas A&M Health Science Center College of Medicine. Dr. Grayson and Dr. DeLario are also pediatric hematology/oncology specialists who care for children with blood disorders and all types of cancer. “These are children who are severely ill with diseases that can be considered catastrophic,” says Dr. Kane, who is also a professor of pediatrics at the Texas A&M Health Science Center College of Medicine. “The pediatric cancer and blood disorder team delivers the best treatment that science has to offer, while being mindful of offering the best possible quality of life during treatment, and not losing hope for a cure. There’s always hope,” he says.
As a member of the Children’s Oncology Group, an international clinical trial cooperative supported by the National Cancer Institute, the Children’s Hospital can offer patients the opportunity to participate in the latest Phase III clinical trials for cancer medicine. Participation in Phase III trials is considered the standard of care for pediatric cancer treatment, Dr. Kane says. “Our patients at the Children’s Hospital Scott & White receive the most advanced treatment available to any child in the United States,” he says. “What makes us different is our ability, and our mission of providing this very highly sophisticated treatment while also optimizing comfort and quality of life. Our aim is to give patients and family a life that is as normal as possible.”

A strong focus on patient and family comfort includes emotional, social, and spiritual support. As part of this effort, Dr. Kane emphasizes an interdisciplinary approach to palliative care, which he stresses no longer means end-of-life care. “Palliative care is defined as the art and science of patient and family-centered care, aimed at alleviating suffering, promoting healing, and improving quality of life,” he says.

His words underscore the Children’s Hospital’s commitment to meeting each child’s needs, and those of the child’s parents and siblings as well. “We recognize that when a child is sick, it affects the whole family. We want to give patients and families the best possible experience with our healthcare system, one that cannot be duplicated elsewhere,” Dr. Kane says. “That’s our goal, and it is what we are working to achieve every day.”

**FAMILY-CENTERED CARE APPROACH IS VITAL**

The hospitalization of a child can sometimes be as traumatic for family members as it is for the patient. The Children’s Hospital Scott & White has an array of programs to help each family member cope during difficult times, including spiritual guidance and social work support.

“It’s really our way of ensuring that not only are each child’s medical needs being met, but their—and their family’s—emotional, developmental, and psychological needs are being addressed as well,” says John Boyd III, MD, CEO and chief medical officer, Children’s Hospital Scott & White.

For Christy and Scott Cosper of Killeen, that family-centered care has played an important part in the treatment of their daughter, Kaitlyn. She was diagnosed at Scott & White with a rare endocrine disorder that prevents the development of several hormones by the pituitary gland, including the one responsible for creating sufficient insulin to regulate blood sugar. Just days after her birth, Kaitlyn had to be admitted to Scott & White’s Neonatal Intensive Care Unit (NICU) so that doctors could stabilize her rapidly deteriorating condition. The infant even stopped breathing at one point. Incredibly, Kaitlyn briefly spent time in the Pediatric Intensive Care Unit (PICU) as well.

“Throughout our stay, the NICU and PICU staff went to great lengths to explain and make sure we understood what was happening to Kaitlyn,” says Mrs. Cosper. “We never felt alone, and knew they not only cared about Kaitlyn, but about us as well, constantly reminding Scott and me that we needed to rest and take care of ourselves so that we could be there for Kaitlyn.” The Cospers had a wonderful support system because family was nearby—Kaitlyn’s grandparents were able to relieve her parents at the hospital so they could tend to big sister Taylor, age 2 at the time.

“But even when we weren’t with Kaitlyn, we knew she was in the best hands possible,” says Mr. Cosper. “When you walked into that NICU and PICU, you felt like you were in the presence of God. All the staff were so incredibly committed to the well-being of the children in their charge.”

“Going through this experience has made us cherish our girls even more,” Mrs. Cosper says. “We are grateful not only for the care Kaitlyn received, but for the friendships we created with many of the staff. They will be lifelong members of our family.”
Meet Hunter, Landon, Rebekah, Autumn, and the Rentas children.

Their stories are about bravery, and their parents’ steadfast belief in the pediatric expertise at the Children’s Hospital Scott & White. They are our heroes. They inspire us, along with many other children who have been cared for at Scott & White. The integrated teams of pediatric specialists and caregivers at Scott & White have helped all these children, including one who now works here as a pediatric nurse. As their lives continue, so does our commitment to helping all children who need us.

To learn more or to become involved, please visit swcatalyst.org or foundation.sw.org.
NEONATAL INTENSIVE CARE UNIT

The Neonatal Intensive Care Unit (NICU) at Scott & White ranks among the nation’s top 3 percent for survival rates. As the only Level III facility between Dallas and Austin, the NICU cares for extremely premature newborns or critically ill infants who require surgery or other pediatric expertise. Specially trained pediatric teams provide ground and air transport for fragile newborns and expectant mothers. Highly specialized technology and neonatal expertise have helped thousands of families take their infants home to thrive.

Hunter Reed age 2

Two years ago, when she was almost 38 weeks pregnant, Sabrina Reed became alarmed by her baby’s sudden inactivity in her womb. The wife of Army Staff Sergeant Travis Reed, now stationed in Kuwait, Mrs. Reed contacted doctors at Fort Hood’s Darnell Army Medical Center. Within a few hours after arriving at the hospital, she had a placental abruption, a very serious condition in which the baby may be denied oxygen and the mother may bleed heavily. Mrs. Reed’s doctor performed an emergency Caesarean section.

“When I saw Hunter, he was completely limp,” she recalls. The Reeds were frightened, but became hopeful when they learned their tiny son would be transferred to Scott & White. There, neonatal experts, under the supervision of Cheryl Cipriani, MD, director of the Division of Neonatology, would administer the Cool Cap System™. It is the only FDA-approved device that could prevent damage to Hunter’s brain. This was a concern because he had been without oxygen for 19 minutes during birth. It was the only hope of reducing Hunter’s risks for cerebral palsy and other debilitating conditions, too. Scott & White is the first hospital in Texas to use this technology.

As the ambulance arrived at the hospital, Dr. Cipriani and her team were waiting. They immediately placed the Cool Cap™ on Hunter, and maintained a safe body temperature for him for 72 hours, a critical step in the process. They continuously monitored his brain activity as well.

The next two months were touch and go for young Hunter. Finally, with the help of the nurses and physicians at Scott & White’s NICU, the exhausted parents were able to bond with their newborn son.

“Everyone in the NICU was so compassionate. They made it possible for us to care for our son and be involved with his recovery,” Mrs. Reed says. Remarkably, Hunter hadn’t experienced any developmental delays. Today, he’s an active and determined two-year-old. “Hunter has gone from the worst-case scenario to living a normal life without any delays,” says Mrs. Reed. “We attribute this miracle to Scott & White, and thank God every day.”

“Hunter has gone from the worst-case scenario to living a normal life without any delays. We attribute this miracle to Scott & White.”

—Sabrina Reed
Hunter
Stars in Our Eyes continued

Landon
NEONATAL INTENSIVE CARE UNIT

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**Landon Orsag age 4**

Holly Orsag did everything she could to prepare for a healthy delivery of her baby in 2007. When Landon arrived, however, he was 14 weeks early and weighed just 30 ounces. It was critical that he be immediately transferred from the hospital where he was born to Scott & White, where he could receive the expert care offered by the pediatric specialists there.

Time was of the essence. Landon had quickly developed life-threatening pulmonary emphysema because of his underdeveloped lungs. The neonatal transport team from Scott & White soon arrived via helicopter and sprang into action. They began to deliver lifesaving respiratory therapy from equipment inside the chopper, which is specially outfitted with a temperature-controlled airborne incubator, or isolette. It also houses a high-frequency ventilator to pump air into a newborn’s tiny lungs, giving the baby a fighting chance. Soon the team and Landon were on their way to the hospital, where Landon would begin a three-month stay at Scott & White’s Neonatal Intensive Care Unit (NICU).

Landon is alive today because of the generosity of the McLane Company, which donated the funds to purchase the neonatal transport equipment. He was the first child to benefit from it. Now, four years later, hundreds of lives have been saved, and Landon’s story has gone on to be a classic tale of childhood: He loves baseball and playing outside with his tractors. He’s walking and talking, just a normal little boy. As Mrs. Orsag says, “When you see all the technology to help your child, it’s just unreal. But technology saves lives, and Landon is living, breathing proof of that.”

The combination of pediatric experts and advanced technology helps make miracles happen! Scott & White is grateful to the McLane Company, which has taken a strong lead to ensure that the most fragile patients get the very best care. The company has also donated most of the funds needed for a dedicated pediatric ambulance, as well as funding for transport infusion smart pumps for the ambulance and the helicopter. These contributions have allowed Scott & White pediatric specialists to reach out to hospitals in remote areas and treat very sick children who may not otherwise have had access to advanced medical care.

“When you see all the technology to help your child, it’s just unreal. But technology saves lives, and Landon is living, breathing proof of that.”

—Holly Orsag
PEDiatric Gastroenterology

Scott & White board-certified pediatric gastroenterologists treat diseases of the digestive system, including the stomach, liver, and bowel. They also treat feeding and eating issues, such as acid reflux. The experts at the Pediatric Inflammatory Bowel Disease Center treat patients with episodic and chronic illnesses, such as Chron’s disease and colitis. Nurses, surgeons, nutritionists, social workers, and psychologists help children manage pain and other symptoms associated with gastrointestinal disease.

Rebekah Hudson age 14

The Hudson family knows how to throw a party, even in unconventional circumstances. When Temple High School freshman Rebekah Hudson was in the hospital just days before Thanksgiving, her parents brought the holiday to her, including Dad’s famous stuffing.

“They threw a surprise feast for me. The nurses walked me down the hallway and told me to turn into the room. Everyone was there,” Rebekah says. The celebration was early so she could enjoy her favorites ahead of a surgery to give her digestive tract a much-needed rest. For most of her life, Rebekah has struggled with Crohn’s disease, a painful condition that causes severe inflammation of the gastrointestinal system and often requires surgery.

Rebekah has been treated at Scott & White ever since she was four and a half years old, adding a couple of birthdays and at least one Fourth of July to the list of holidays celebrated there. “They treat you like you’re their own kid. All the nurses are always happy to see me. But they’re not happy to see me back in the hospital,” says Rebekah.

Pediatric surgeon Monford Custer, MD, performed her first surgery 11 years ago, and has done every one since. “I don’t think Rebekah would let anyone else do it,” says her mother, Malie Hudson, a supervisor at Children’s Hospital Scott & White.

Rebekah will spend the next year with a colostomy, to divert her digestive tract around the areas damaged by Crohn’s disease. Her treatment plan is complicated by a second condition, chronic granulomatous disease, or CGD. Patients with CGD make white blood cells that don’t have the same germ-fighting power of normal cells, leaving them with a weakened immune system. CGD is a very rare disease. Rebekah was diagnosed 10 years ago by a specialist in Salt Lake City, Utah. “Nobody in the state of Texas could have diagnosed her at that time, so we got a referral from a physician in Austin,” says Mrs. Hudson. “It is great to now have a children’s hospital right here at Scott & White that can hopefully diagnose complicated cases like Rebekah’s, with the added expertise and research ability to help kids who need it.”

For Rebekah and her caregivers at Scott & White, treating both conditions is a balancing act. While steroid medications heal her digestive tract, the same medications make her CGD worse. Living close to state-of-the-art medical treatment at Scott & White is vital for Rebekah, who doesn’t have to worry when she is in too much pain or notices something is wrong and a visit to the doctor is needed.

No cure for Crohn’s disease or CGD exists, but Rebekah perseveres. Despite frequent inpatient stays at the hospital, she continues to keep her grades in the top 5 percent of her class and plans to become a pediatric gastrointestinal physician. “She is determined,” says her mother.

“It is great to now have a Children’s Hospital right here at Scott & White that can hopefully diagnose complicated cases like Rebekah’s, with the added expertise and research ability to help kids who need it.”

—Malie Hudson
Stars in Our Eyes continued

**PEDIATRIC HEMATOLOGY/ONCOLOGY**

About 1,200 pediatric patients are treated at the Children’s Hospital Division of Pediatric Hematology/Oncology. The team of specialists in blood-related disorders and cancer takes a multidisciplinary approach that includes not just high-tech treatments, but high-touch compassion as well. Leukemia and lymphoma, sickle-cell disease, anemia, thalassemia, von Willebrand disease, and other conditions are diagnosed and managed by board-certified pediatric experts. Nurses, social workers, nutritionists, and other professionals collaborate with physicians in an effort to help each child and family heal.

**Autumn Lobdell, RN age 30**

When nurse Autumn enters the room, young patients smile. Not only is she a talented and dedicated pediatric nurse, but she knows what they’re going through on a most personal level. At age 12, Autumn was diagnosed with acute lymphocytic leukemia (ALL), the most common form of childhood cancer. ALL is a cancer of the blood and bone marrow, characterized by the proliferation of immature white blood cells that make the body unable to fight infection.

Autumn’s mother, Liz Henry, was a nurse at Scott & White at the time. One night at dinner, she noticed a mass in her child’s neck when her daughter turned her head. The next day, Mrs. Henry took Autumn to the family’s physician for evaluation. The blood work revealed an elevated white blood cell count, and other tests showed that the mass in her neck was wrapped around her trachea. Although Autumn was not experiencing shortness of breath or any other symptoms, she was immediately admitted to the intensive care unit at Scott & White.

The biopsy was positive for ALL. Autumn underwent steroid therapy to shrink the tumor. She also endured a grueling schedule of chemotherapy for two and a half years, under the direction of her oncologist, Arthur Frankel, MD, who holds the Stone Centennial Endowed Chair in Cancer Research. Along the way, she developed additional complications, but with the expertise of Dr. Frankel and pediatric surgeon Monford Custer, MD, she was able to overcome them as well. She also kept up with her schoolwork. Autumn feels grateful to have had a great team of caregivers who were willing to work with her school and teachers to ensure that she kept pace with her classmates. She was also impressed with the hospital’s commitment to provide for all of her needs, not just the physical ones she faced.

“It wasn’t easy, but I was fortunate because I didn’t have any neurological problems with my diagnosis, so I could stay the course with school,” she says. “I definitely had a few bumps in the road with infections and reactions to medication, but I had a wonderful group of people at Scott & White who took care of me.”

Autumn’s ties to Scott & White run deep. Her stepdad is Robert Henry, MD, medical director of the new Scott & White Westfield Family Medicine Clinic. Her mom has retired from her nursing position after more than 23 years, and her sister January Kovacevich works in the administrative office at Children’s Hospital. In addition, her brother-in-law, Kyle Kovacevich, works in Risk Management.

Many of Autumn’s childhood caregivers are still caring for children today—like nurse Barbara Baugh, who has remained a close friend and who has served as a mentor for Autumn as she pursued a career as a Pediatric Intensive Care Unit (PICU) nurse at the Children’s Hospital Scott & White. “I knew I wanted to make a difference in the life of a child,” Autumn says. “It’s neat in a way to come here, to come home again. It gives me a new perspective about how to practice nursing. It makes me want to do the best possible job with the kiddos I’m treating and their families.”

Her recent 30th birthday was reason enough to celebrate her success, and a Jamaican getaway with friends did just that. “I spend a lot of time with my family and friends,” she says. “And I love what I do. The bottom line is I want to take care of kids.”
Autumn now works side by side with Barbara Baugh, who was one of her original caregivers.
Stars in Our Eyes continued

Xavier

Cariel

Josiah
PEDiATRIC HEMAToloGY/oNCOLOGY

About 1,200 pediatric patients are treated at the Children’s Hospital Division of Pediatric Hematology/Oncology. The team of specialists in blood-related disorders and cancer takes a multidisciplinary approach that includes not just high-tech treatments, but high-touch compassion as well. Leukemia and lymphoma, sickle-cell disease, anemia, thalassemia, von Willebrand disease, and other conditions are diagnosed and managed by board-certified pediatric experts. Nurses, social workers, nutritionists, and other professionals collaborate with physicians in an effort to help each child and family heal.

Rentas Family
Josiah age 9, Cariel age 8, Xavier age 6

The Rentas family is one in a million. Josiah, Cariel, and Xavier Rentas all have an extremely rare inherited blood disorder that leaves them nearly blind and vulnerable to bruising and life-threatening bleeding, even during normal activities. Hermansky Pudlak Syndrome (HPS) is a genetic disease so rare that many doctors, even those who specialize in blood-related disorders, have never heard of it. Worldwide, HPS affects about 3,000 people of Puerto Rican descent.

Josiah was diagnosed with ocular albinism when he was three months old by retired Scott & White ophthalmologist Louis Adams, MD. It was Dr. Adams who referred the Rentases to Richard Lewis, MD, an ophthalmologist at Baylor College of Medicine in Houston. Dr. Lewis had just returned from a medical conference on HPS, and immediately recognized the visible signs of the disease in the little boy. Mr. Rentas and his wife, Lyzzette, finally had a diagnosis that could explain their son’s persistent bruising, and bleeds that resulted in an emergency room visit and a 10-day hospital stay at Scott & White.

“We were devastated at first when we learned about HPS, especially when we heard Josiah wouldn’t be able to play baseball,” says Mr. Rentas, a painter in the Construction Department at Scott & White. He remembers a frightening experience when Josiah and his sister, Cariel, bumped heads during some playful roughhousing: Josiah’s face swelled up from internal bleeding, and he required an immediate blood transfusion at Scott & White. Another time, Xavier, the youngest Rentas child, accidentally scratched his ear. He, too, had to have a blood transfusion due to excessive bleeding.

The Rentas children are monitored by Javier Kane, MD, who just joined Children’s Hospital Scott & White from St. Jude Children’s Research Hospital in Memphis. When necessary, they see Donald Mahoney, Jr., MD, director of hematology at the Texas Children’s Hospital (TCH), as well. The new partnership between the Children’s Hospital Scott & White and TCH means that Josiah, Cariel, and Xavier will see the right pediatric specialist in the right place. They have access to anyone they might need to help them manage their disease and its side effects, which include irritable bowel syndrome and chronic stomach pain. Until a year ago, the Rentases were driving to Houston frequently from their home in Nolanville, Texas, for their visits to Dr. Mahoney. Now they’re breathing a sigh of relief that the Children’s Hospital Scott & White has the kind of expertise they need to care for the three children, with only occasional trips to Houston needed.

Josiah, Cariel, and Xavier go to school and participate in activities just like other kids. But their health situation requires moment-by-moment vigilance, and they must take extra care to avoid anything that might result in dangerous internal bleeding. For now, there is no cure for HPS. But for the Rentas family, life moves on. And that means gymnastics meets for Cariel, Josiah’s drum playing, and Xavier’s consuming interest in learning as much as humanly possible about sports cars. “Life is 10 percent what you’re dealt, and 90 percent how you respond,” says their father.
The opening of the new Children’s Hospital Scott & White does more than enhance medical care for the children of Central Texas. Through an affiliation with the Texas A&M Health Science Center College of Medicine, it allows Scott & White Healthcare to intensify its academic mission. Expanded medical education, outreach, and research programs help provide the highest-quality care to children.

“The new Children’s Hospital and clinical staff have drawn the attention of many medical school graduates who are interested in furthering their training in pediatrics,” says Alisa A. Acosta, MD, MPH, assistant professor of pediatrics, Texas A&M Health Science Center College of Medicine, and director of the Pediatric Residency Program. “We already have a great group of residents here, and my goal is to strengthen the program even more.” Dr. Acosta recently was recruited to Scott & White, after completing her medical training, which included chief resident and nephrology fellow positions at the University of Texas Medical School at Houston.

Each year the three-year Pediatric Residency Program, established in the 1970s, receives more than 400 applications from medical school graduates across the country and around the world. About 25 percent of the applicants will be interviewed for six open positions, as administrators look for candidates with strong personal skills as well as medical knowledge. Demand for pediatric residency slots at the Children’s Hospital has prompted the Department of Pediatrics to add two more spots for postdoctoral medical students, to be filled in July 2012, at the beginning of the new academic year. At that time the program will welcome eight first-year pediatric residents. Within a few years after that, the program will reach its full complement of 24 residents.

The Scott & White pediatric medical education program seeks to produce excellent, well-rounded general pediatricians who understand the complexities of
pediatric care. To achieve that, Dr. Acosta is focused on innovative ways for medical residents to learn. These include incorporating the medical residents’ ideas to enhance their training, such as encouraging them to offer input during medical rounds and morning reports and lectures. This kind of interactivity better prepares them for their board exams, she says.

During the program, residents are exposed to multiple aspects of pediatric care as they make monthly rotations through departments including the Pediatric Outpatient Clinic, the Pediatric Intensive Care Unit (PICU), and the Neonatal Intensive Care Unit (NICU). Second- and third-year residents rotate through the inpatient clinic and supervise first-year residents. After residency training, physicians may become pediatricians or continue their education with a three-year fellowship program in a pediatric specialty. “We’ve applied for fellowship programs in neonatology, infectious disease, and hospitalist medicine through the Accreditation Council of Graduate Medical Education,” says Dr. Acosta. A child and adolescent psychiatry fellowship program already is offered for physicians who have completed a residency program in general psychiatry.

**A good match**
Each spring, medical students in the United States learn where they’ve been accepted for pediatric residency during a process called “Match Week.” Residents eagerly await their assignments, especially the opportunity to train in pediatrics at a place like Scott & White, one of the nation’s largest and most well-respected multispecialty practice healthcare systems. Those early days of training can be rigorous, as residents experience things they’ve only read about during medical school. Former Scott & White pediatric resident Jill Flippin, MD, assistant professor of pediatrics, Texas A&M Health Science Center College of Medicine, is now a pediatrician at the Scott & White Clinic - College Station. She remembers having to
be on call at the hospital the first night of her residency. Dr. Flippin followed a third-year resident and watched her maneuver through several crises and tough procedures, including a lumbar puncture—inserting a needle into the spine to obtain cerebrospinal fluid in order to check for meningitis—on an infant. “That first night was overwhelming,” says Dr. Flippin. “I went home the next morning and cried my eyes out.”

Despite some tough moments, Dr. Flippin found the overall experience rewarding, and still helpful to her in her medical practice today. She learned that the best way to conquer the stresses of being a resident was simply to persevere. “You just have to do it,” she says. “You get put in situations where you know you have to take care of a patient and you just do what you have to do.” Dr. Flippin adds that she could always rely on Scott & White’s faculty for guidance. “I had a lot of support,” she says. “I never felt like I was alone.”

**Elevating our stature**

Scott & White’s Pediatric Residency Program is experiencing a higher profile and growing reputation. Dr. Acosta says, “Pediatric specialists here and new ones being recruited are a few reasons why our program is attracting more attention. Combined with the new Children’s Hospital, it adds up to a unique opportunity for recent medical school graduates who want to further their training and care for children.” Medical residents are able to obtain a broader education, as they are exposed to a range of cases—both routine and acute care pediatric conditions. “Good clinical teaching combined with a solid didactic curriculum is great training ground for residents as they prepare for their future in pediatrics,” she says.

As the Children’s Hospital continues to recruit more specialists, additional aspects of pediatric medicine will become available for residents to study. More specialists will also bring further research opportunities to residents. Research is a crucial part of a resident’s education; in fact, each third-year resident is required to participate in a research project.

The Department of Pediatrics now has more than 100 full-time primary care and specialty physicians. The size of that faculty is one of the Pediatric Residency Program’s advantages because it’s small enough to foster the development of close bonds between residents and these mentors. “I know each resident and they know each other very well. It makes for a great environment,” says Dr. Acosta.

This dynamic made a difference to Dr. Flippin. She says, “Faculty members were excellent to work with and were readily available to me. They never made me feel like I shouldn’t be asking questions or calling for help. They made me feel part of the team.”

**Outreach program opportunities**

Scott & White also offers educational opportunities for medical students at the Texas A&M Health Science Center College of Medicine. In 2010, Children’s Hospital Scott & White pediatrician Catherine McNeal, MD, assistant professor of pediatrics and associate professor of internal medicine, Texas A&M Health Science Center College of Medicine, led an outreach effort to pair families in the rural town of Holland, Texas, with first-year medical students. The program is called HeartAware Reaching Rural Populations. Its intent is to improve screening and diagnosis of risk factors for cardiovascular disease. Although this may not seem relevant to pediatrics, one of the program goals was to improve the future health of rural communities by teaching future physicians about the barriers that people there face when they need to access healthcare, or even the unique challenges they encounter as they try to follow a healthy lifestyle. Therefore, this education transcends a focus on cardiovascular disease and becomes pertinent to the overall health of rural residents and their children, who must travel more than 15 miles to visit a doctor. Many of these families have only one vehicle, and parents often cannot afford to take a day off work to take their child to a physician. “These barriers seem to be small, but they’re actually fairly immense,” says Dr. McNeal, who also leads the pediatric cardiovascular.
Providing medical care to such families is important, and so is educating the medical students about the importance of rural medicine and, ultimately, improving rural health by attracting more students into a rural practice when they finish their residency. “The goal was to have these families act as teachers for the medical students, so the students can learn firsthand what life is like walking in their shoes and what the healthcare system looks like through their eyes,” she says.

Fifteen first-year medical students were matched with five families who generously gave up one night a month to work with the students. All of the families have multiple children, many of whom have special needs that require frequent and/or specialized pediatric care. The students were accompanied by at least one faculty mentor from Scott & White, as well as members of the hospital clergy and social services, and many of the pediatric faculty. The families’ participation had a lasting effect in the lives of the students. Dr. McNeal says, “They will—and may have already—become completely different physicians, with a different perspective. They left the program with a much better appreciation of the barriers that rural populations face.” Dr. McNeal says that the feeling was reciprocal: one of the family members commented, “This was the first time I felt like someone in the healthcare system really listened to me.”

This type of training is essential, and innovative. What began as a pilot elective is now a highly desired program on the permanent list of elective courses at Texas A&M Health Science Center College of Medicine and possibly even destined to become a required course. Dr. McNeal hopes that more families in more communities will choose to become educators (in the truest sense of the word) for medical students so that they can influence the course of students’ careers in ways that a standard classroom setting may not be able to provide.

**Pediatric research is a priority**

Along with medical training, research is integral to Scott & White’s academic mission. The Pediatric Endocrinology Division at the Children’s Hospital, led by Section Chief William Bryant, MD, associate professor of pediatrics at the Texas A&M Health Science Center College of Medicine, is now an affiliate of the Type I Diabetes TrialNet, an international consortium of diabetes researchers. Dr. Bryant and primary investigator Matthew Stephen, MD, pediatric endocrinologist, and assistant professor of pediatrics at the Texas A&M Health Science Center College of Medicine, are engaged in a research study that seeks to identify those who may be at risk of developing type 1 diabetes mellitus (insulin-dependent diabetes commonly diagnosed in childhood). Voluntary screening is offered to relatives of those who have type 1 diabetes.

The overall aim of the study is to identify those at highest risk for development of insulin-dependent diabetes mellitus. Further study goals include offering intervention for those deemed to be at high risk, with the hope of developing ways to prevent the development of the disease. Drs. Bryant and Stephen say the study has another, immediate benefit for the families they see. Whenever a child is diagnosed with type 1 diabetes, the family often worries about the risk of another child or family member developing this disease. Through its membership in Type 1 Diabetes TrialNet, the Pediatric Endocrinology Division at the Children’s Hospital can better answer that question, at no cost to the family. The study is open to first-degree relatives up to the age of 45 years and second-degree relatives up to the age of 20 years. Those interested in participating are encouraged to contact Nenita Torres, RN, at 254-724-6069.

Education, outreach, and research are important components of a pediatric patient’s overall care. Scott & White’s efforts in these areas hold much promise for the future of our young children.
Board Member Spotlight

Don Grobowsky

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BANKING ON
uch of my life has been about location. Whether it’s been being in the right place at the right time or knowing when to make a move, I’ve always ended up in a better place by taking a good look at what is happening around me.

Growing up in Austin, I spent most of my youth like any other native Texan, with lots of hunting and fishing. I started dove hunting at the age of eight and still enjoy it today. But during those formative years I was also plotting how I was going to get out of Central Texas. Austin only had about 100,000 people at the time, and I’m still astounded at its transformation from a sleepy little government town to a high-technology center.

When I graduated from the University of Texas in 1968 with an accounting degree—I come from a family of bankers—I accepted a position with the Office of the Comptroller of the Currency. They told me to pack my clothes and report to the Dallas office first thing Monday morning so I could be assigned to my region. Guess where they assigned me? Austin, Texas.

For the next seven years I served as a national bank examiner in Austin and Abilene. It’s ironic that even today Austin plays such an important role in my position as chairman and CEO of First State Bank Central Texas.

Over the better part of the next two decades, I held positions in loan review and acquisition work, and served as CEO of InterFirst Bank and Central Texas Savings. The 1980s weren’t very kind to the savings and loan industry, so when I had an opportunity to purchase the charter of First State Bank in Chilton in 1987—and transfer the charter to Temple—I knew it was the right thing to do. This purchase wasn’t my first foray in investing in financial institutions. In 1979 I was part of a group that purchased First State Bank in Granger.

In a time when most independent, local banks were failing, First State Bank enjoyed exceptional growth while expanding from $4 million in assets and one location to more than $1 billion in assets, serving customers in 31 locations in 27 communities in 12 contiguous counties.

I attribute that growth to our ability to respond to our small- to medium-sized, closely held business clients in a timely and personal manner. We strive to help our clients achieve their goals while establishing lasting relationships with them—much like the philosophy of Scott & White. We know our customers; Scott & White knows its patients. And we both work to provide that kind of service with every encounter. While our businesses may be worlds apart, both of them touch individuals on a very personal level.

That’s one of the reasons I accepted an offer from Al Knight to join the board of directors of the Scott & White Health Plan in 1982. Three decades later, I’m still helping Scott & White strike that fine balance between its aspirations and desires to provide even more exceptional care and what it can financially afford to do. My involvement has expanded from the health plan over to the healthcare system, and I am constantly impressed with the many initiatives the system undertakes.

The Children’s Hospital: A new generation of healthcare

I’m especially excited about the opening of the Children’s Hospital Scott & White and the partnership the system has established with the Texas Children’s Hospital. Our new Children’s Hospital is a real plus for the system. It will not only expand the available offerings, but it will also create a new relationship with folks between Temple and Houston. It’s a fine example of Scott & White’s commitment to children, allowing them to get the care they need close to their homes.

I have five wonderful reasons for applauding Scott & White’s commitment to pediatric healthcare services—they range in age from three years to eight years. My grandchildren weren’t born at Scott & White, but I know the importance of the system’s pledge to the children of this region. This new hospital is going to guarantee the highest quality of care for generations to come.

Being in the banking business for so many years has helped me better appreciate the significance of Scott & White Healthcare to the residents of Central Texas, not only as a source of healthcare but also as an employer and economic partner with Temple. I’m honored to contribute to Scott & White’s success in any small way I can.
Preserving a child’s relationship with his pediatrician or family practice physician is vitally important when that child needs specialty pediatric care. His primary care physician is his medical home, the person who, along with his parents, knows the child best.

Parents whose children receive specialty care from the experts at the Children’s Hospital Scott & White can rest assured that their child’s primary care physician is working alongside the specialists. And parents’ voices are part of each child’s treatment plan as well.

When a pediatrician recommends that a child see a specialist, many questions can run through a parent’s mind. Will my child be all right? Will my insurance company cover the care? How far will we have to travel? Will we lose touch with our pediatrician or family physician? Fortunately, the Children’s Hospital is nearby, and its pediatric specialists, caregivers, and administrative professionals work closely with parents and the referring physicians—both those within the healthcare system and those in other places across Central Texas—to address concerns and incorporate ideas that will best serve each child.
“Our network of pediatricians and family practice physicians is an important link that allows us to care for children to the best of our ability,” says M. Reddy Beeram, MD, physician-in-chief at the Children’s Hospital Scott & White and interim chairman, Department of Pediatrics at Scott & White Healthcare. “We also want parents to know we’re committed to communicating with them as well, and making sure their input is heard.”

A primary relationship

A family practice physician or pediatrician is usually a person to whom a child and family can turn, since that doctor typically follows the child from birth through puberty and into adolescence. “Primary care pediatricians are often trusted people, because we have an ongoing relationship with families,” says Robert E. Burke, MD, PhD, a pediatrician and vice chairman of the Department of Pediatrics at Scott & White Healthcare. He knows his patients’ family histories, and any medical issues a child’s siblings may have encountered. He also has a reference point for each and every patient visit.

Primary care physicians know when to consult a pediatric specialist for their patient’s care, and they will recommend a particular specialist according to the needs of that patient. Sometimes parents already have a pediatric specialist in mind that they’d like their child to see, but it can be difficult for many parents to know how to select a specialist within a complex healthcare system. So Scott & White tries to make it easy for parents with a simple referral process. This also helps keep costs down by eliminating extra care and making sure patients are directed to appropriate specialists in an efficient manner.

“When primary care pediatricians request a referral, we might need help making a diagnosis or providing a level of care that surpasses our own training. It doesn’t make sense for a patient not to take advantage of all that expertise,” says Dr. Burke. “The role of the pediatrician or family physician is to look at the whole picture, and that can include pulling in other members of the pediatric team.”

He continues, “A patient can capitalize on the expertise of a specialist, and on the expertise of the generalist, who often knows the family better. No one does this better than we do at Scott & White. We offer leading-edge care to our pediatric patients. The transfer of that care between specialists and primary care pediatricians is pretty seamless,” he says.

In his practice as a pediatrician at Scott & White, Dr. Burke refers almost 10 percent of his patients to specialists. These referrals might be for short-term issues, like a hernia that requires a single surgery, or for long-term issues, such as diabetes, which requires a child to see an endocrinologist, a diabetes specialist, several times each year but still see her pediatrician for annual physicals or for other medical concerns that might arise, such as colds and earaches. Or a child with a complex condition may need to see several specialists. A child with cerebral palsy, for example, needs to be under the care of a physical therapist to help develop physical skills, a neurologist to monitor any brain deficits related to the condition, and an orthopedist to help diagnose and treat abnormal bone and muscle conditions.

Links to physicians throughout the region

Hundreds of primary care pediatricians and family practice physicians—both private practice physicians and those who are affiliated with Scott & White Healthcare—refer their young patients to the Children’s Hospital Scott & White. It’s
easy for referring physicians to keep up to date on their patients’ care because Scott & White pediatric specialists communicate directly with them, often in real time, through the comprehensive electronic medical records (EMR) system. It can be accessed throughout the healthcare system, and its benefits are significant. The EMR system can save caregivers time and help patients receive follow-up care faster. (See the Spring 2011 issue of THE CATALYST for more information on EMR.) For example, when one of Dr. Burke’s patients needs an X-ray, he can order the test and then call the radiologist so they can discuss the image results while simultaneously viewing the same image. Patients benefit, too. “In the old days we’d have to wait days for the report or get our hands on the X-ray ourselves,” he says. “Now I can call patients the same day with the results.” New software also lets primary care physicians and specialists enter notes about a patient’s visit just as soon as the appointment is over. If the patient is headed to other appointments that day, the specialist can be updated on any issues that arise before the family even arrives at the office.

The hospital system makes it easy for parents, too, to access pediatric specialists at the Children’s Hospital in Temple, and at Scott & White Hospital - Round Rock. Pediatric specialists see patients at many other Scott & White clinics throughout the region as well.

Many of the patients who visit Scott & White pediatric specialists are referred from other primary care physician practices in Texas. Shannon Duble, MD, a pediatrician in private practice in Killeen refers to subspecialists at Scott & White for patients with complicated medical problems, such as diabetes or congenital heart disease. “This is great because patients can maintain their relationship with their primary care physician while still receiving necessary subspecialty care at Scott & White,” says Dr. Duble.

“As technology improves, we get more timely feedback from specialists at Scott & White about our patients,” says Dr. Duble. The consultation notes from Scott & White subspecialists facilitate communication with primary care physicians by addressing patient recommendations and follow-up care. That’s good news because in some instances, Dr. Duble’s patients can have an initial consultation with the subspecialist and then be able to follow up in her office. This can save time for patients and families, and make their experience much easier.

“The role of the pediatrician or family physician is to look at the whole picture, and that can include pulling in other members of the pediatric team.”

—Robert E. Burke, MD

To find a pediatrician or family practice physician near you, please call 877-724-KIDS (5437) or 254-724-KIDS (5437). Or visit sw.org and click on the “Find a Provider” link.
The outpouring of support for the Children’s Hospital from the family and friends of Scott & White is touching the lives of so many people. We are truly blessed to witness such a remarkable display of commitment to our children’s future, and your belief in Scott & White’s ability to help lead our children to healthy adulthood.

We are inspired by many of our young patients, whose bravery is evident when facing difficult diseases or when working hard to come back from devastating injuries. We’re also grateful for the gifts from people and organizations, both big and small, that helped make the opening of the Children’s Hospital possible. Our promise is to continue Scott & White’s legacy of being responsible stewards of your trust and generosity.

Every gift, kind word, and show of support has catapulted us to move boldly toward our dream of opening this facility dedicated to kids. And so we begin carving a path to a better future for children. This is just the beginning of good things to come.

ALFRED B. KNIGHT, MD
President, Scott & White Healthcare Foundation

NANCY BIRDWELL
Chief Executive Officer, Scott & White Healthcare Foundation
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Support Children’s Hospital Scott & White.

Our new hospital has brought hope to hundreds of families. But we’re not done yet. Your support will allow us to grow our pediatric services and expand our research divisions so we can continue to provide the highest quality healthcare—and create futures full of possibility.

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