

Children's

MEDICAL CURRENTS

A Children's National Medical Center Quarterly Publication for Physicians



Fall 2005

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Children's
National Medical Center

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Laura Tosi, MD
director, Children's Pediatric
Bone Health Program



Dorothy Bulas, MD
director, Diagnostic Imaging
and Radiology

Laura Tosi, MD, is the director of the Bone Health Program. Her team focuses on the management of children with orthopaedic health needs, such as club feet, spina bifida, osteogenesis imperfecta (brittle bone disease), limb deficiency, skeletal dysplasia, and arthrogyposis.

Dorothy Bulas, MD, is a nationally recognized expert in the field of pediatric radiology, with a special interest in obstetric sonography and MRI evaluation of congenital anomalies.

Children's Bone Health Program Now Offers DXA Testing

by Laura Tosi, MD

Bone mineral density at skeletal maturity is a key determinant of adult skeletal health. Peak bone mass is attained early in adulthood and serves as an individual's "bone bank" for the remainder of his/her life. Although peak bone mass is strongly influenced by genetic factors, a child's full genetic potential is attained only if nutrition, activity, endocrine function, and other lifestyle factors are optimized. Thus, there is a critical window of opportunity during childhood and adolescence for maximizing bone acquisition.

A variety of pediatric diseases can result in bone demineralization as well as decreased bone density and strength, leaving children vulnerable to increased fracture risk and disability throughout life. Children's Bone Health Program was established to help ensure that every child develops the most complete bone "account" possible.

The Bone Health Program recently acquired a dual-emergency X-ray absorptiometry (DXA) machine. DXA is a state-of-the-art technique for determining bone density and is available for select patients.

Although DXA testing is commonly performed in adults, it is more challenging in the pediatric population. "Accurate DXA interpretation requires appropriate pediatric software, knowledge of pediatric positioning standards and an understanding of the critical influence of bone size, pubertal stage, skeletal maturation, ethnicity, and body composition on the final measurement," said Dorothy Bulas, MD, director, Diagnostic Imaging and Radiology. Children's is one of the few medical centers in the country with both the equipment and the staff expertise to use this promising diagnostic technique.

"The DXA machine allows us to document a child's current bone health status and track changes in bone density over time; it is also used to assess a child's response to treatment. The test is speedy and precise," said Laura Tosi, MD, director of Children's Bone Health Program. "Equally important, it is painless, non-invasive and requires minimal radiation exposure – no more than you would get from 10 minutes of sun exposure."

Children with any of the following conditions may be referred to the Bone Health Program:

- Eating disorders
- Repeat fractures
- Pathologic fractures
- Osteogenesis Imperfecta
- Neurofibromatosis
- Gaucher's disease
- Cystic Fibrosis
- Muscular Dystrophy
- Glucocorticoid-Therapy
- HIV
- Chronic Renal Disease
- Amenorrhea (1 or 2)
- Nephrotic Syndrome
- Malabsorption Syndrome
- Inflammatory Bowel Disease
- Celiac Disease
- Small bowel transplants
- Kidney transplants
- Long term cancer survivors
- Blood Dyscrasias
(Sickle Cell Disease, Hemophilia, etc.)
- Seizure disorders
- Systemic Lupus Erythematosus
- Undergoing chemotherapy

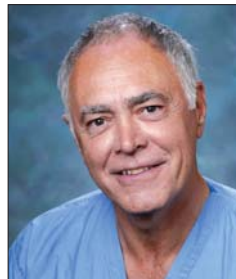
To refer a patient to Children's Pediatric Bone Health Program, call 202-884-2778.

Team Performs Rare Complex Neurosurgery on Toddler

Children's pediatric neurosurgeon Derek Bruce, MD, an internationally recognized pediatric neurosurgeon and a pioneer in the development of modern pediatric Neurosurgery, recently performed complex surgery on a 23-month-old boy flown in from Chicago. The child had a sphenoidal encephalocele. Encephaloceles are herniations of the brain through the skull. The occurrence rate in North America is about 1 in 10,000 live births. The toddler came to Children's National Medical Center with the least common type of encephalocele, accounting for no more than 2 to 3 percent of lesions or 1 in 100,000 to 200,000 live births.

This type of encephalocele is usually present because of repeated episodes of meningitis. The only correction is by surgery and the usual surgical approach has been to operate through the mouth and palate. "This has not proved satisfactory because of recurrent leakage, damage to the pituitary gland as a result of the surgery and damage to the palate," says Dr. Bruce. Michael J. Boyajian, MD, division chief for Children's Plastic and Reconstructive Surgery, assisted with the surgery.

About 10 years ago, while at North Texas Children's Hospital, Medical City in Dallas, Dr. Bruce, Jeffrey Fearon, MD and Ian Munro, MD, craniofacial surgeons, devised an approach through the base of the skull that allowed correction without damage to the pituitary. Using this approach, Dr. Bruce has performed 10



Derek A. Bruce, MD

of these surgeries, with the youngest being 14 months old. There have been no major complications and the scar is behind the hairline so that after healing there is no apparent evidence of a surgical incision.

Additionally, every child's sense of smell has been saved by removing the bone containing the olfactory nerves as a block with nasal mucosa attached. This preserves the continuity of the nerve and avoids brain injury. All the bones are replaced at the end of the procedure so that the appearance is unaltered.

Currently there is increasing interest by other neurosurgeons around the world to utilize Drs. Bruce, Fearon and Munro's technique.

Derek A. Bruce, MD, is an attending neurosurgeon at Children's and a professor of Neurosurgery and Pediatrics at The George Washington University. He was formerly a professor of Neurosurgery at the Children's Hospital of Philadelphia and at Children's Medical Center in Dallas. He has more than 250 publications on pediatric Neurosurgery in journals and books. His clinical interests include cranial base surgery, epilepsy, craniofacial anomalies, and brain tumors. To contact Children's division of Neurosurgery, call 202-884-3020.

Children's Sickle Cell Program Expands

In November 2005, Children's Sickle Cell Program expanded services to Outpatient Centers in Laurel and Upper Marlboro. Emily Meier, MD, along with physician assistant Randi Rabin, will offer well-child visits for children living with sickle cell disease. During these visits, the care team will focus on basic sickle cell care and management.

APPOINTMENT AVAILABILITY:
Laurel Outpatient Center
 Second Tuesday of each month
 301-369-4100 or 1-800-787-0006

Upper Marlboro Outpatient Center
 Fourth Tuesday of each month
 301-868-5777

Children experiencing fever or pain will need to visit the Sickle Cell Clinic at Children's Hospital.

The Safe Concussion Outcome, Recovery & Education (SCORE) program at Children's National Medical Center is committed to assisting community pediatricians with assessment and management of mild TBI.

CONCUSSIONS: Guide to Identification and Management, Part II

by Gerard A. Gioia, PhD, and Jennifer A. Janusz, PsyD, Safe Concussion Outcome, Recovery & Education (SCORE) Program
Rebecca A. Demorest, MD, Medical Director, Sports Medicine

Effective management of a mild TBI requires three components: current knowledge of the injury and its full set of manifestations, an organized assessment tool for signs and symptoms and available management recommendations and resources. Significant opportunities exist for early, active medical management of children and adolescents with mild TBI when a reliable, valid and efficient assessment process is in place to guide appropriate management decision making.

The lack of a systematic approach to managing mild TBI within the primary care pediatric setting is well recognized by the Centers for Disease Control and Prevention, and is an identified area for improvement. The Safe Concussion Outcome, Recovery & Education (SCORE) program at Children's National Medical Center is committed to assisting community pediatricians with assessment and management of mild TBI.

Management Recommendations

Appropriate management of a child with a mild TBI needs to cover a broad range of daily activities including school, homework, play, sports, hydration, and sleep.

- 1. Rest** - Adequate sleep at night; no overnight trips or stays, daytime naps or rest breaks if needed
- 2. Limit Exertion** - Limit both physical and cognitive exertion until symptoms resolve
 - Physical - No participation in physical education, sports practices or physically demanding play or activity
 - Cognitive - Reduced homework and class work load

3. Return to School - Watch for:

- increased problems paying attention, concentrating or focusing
- increased problems remembering or learning new information
- taking longer than usual to complete tasks
- increased symptoms (headache, fatigue, etc.) when completing schoolwork (i.e., cognitive exertion)

Until full recovery, child may need:

- decreased homework/class work load
- extended time for assignments/tests
- shortened school day
- rest breaks during day

4. Return to Sports Play

- No return until asymptomatic and cognitively back to baseline
- Gradual return to play until asymptomatic after physical exertion

5. Ensure Adequate Hydration

Drs. Gioia and Janusz are currently developing a systematic mild TBI assessment tool for use in the pediatric office setting, the Pediatric Acute Concussion Evaluation (PACE), with plans to pilot it during the next year. Initial research findings about this screening tool were presented at the Pediatric Academic Societies meeting in Washington, DC in May 2005.

With the proper assessment tools, evaluation and management, most children and adolescents with mild TBI can recover from their injury without long-term sequelae. Proper initial assessment at the time of injury and limited cognitive and physical

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Kidney Transplant Program Announces New Director

Children's is pleased to announce Amy D. Lu, MD, MPH, MBA, FACS, as the surgical director of the Kidney Transplantation Program.

Dr. Lu comes to Children's through a collaborative partnership with Georgetown University Hospital. Dr. Lu, a transplant surgeon at Georgetown, has joined Children's on a part-time basis to direct the program. Philip Guzzetta, MD, will work with Dr. Lu within the program. "Dr. Lu is a great complement to our talented team of surgeons," said Kurt Newman, MD, executive director of the Joseph E. Robert, Jr. Center for Surgical Care.

Nephrologist Asha Moudghil, MD, will continue as the program's medical director. According to Gerard Martin, MD, executive director of the Center for Heart, Lung and Kidney Disease, "This collaboration between institutions is just one example of our commitment to providing the best care to children throughout the region."

The Kidney Transplantation program has already been reactivated. For consultations or referrals, call 202-884-5058.

Concussions *from page 4*

exertion until the patient is asymptomatic is the cornerstone to concussion management. The SCORE program provides specialized objective neuropsychological assessment of the cognitive and behavioral problems associated with a mild TBI, a key factor in determining recovery.

At Children's, families and children are provided with information about symptom management and potential long-term

Children's Opens Cardiac ICU

In October a cardiac intensive care unit (CICU) opened on the second floor of the hospital. The 8-bed unit is a partnership between Children's National Heart Institute and the Center for Hospital Based Specialties and brings together an interdisciplinary team to meet the needs of our patients and their families.

The CICU enables Children's to provide highly focused subspecialty care for a distinct population of patients recovering from heart surgery and critical cardiac disease. Pediatric CICUs exist only in top-tier Children's hospitals. The medical director for the CICU is John Berger, MD, director of Cardiac Intensive Care.

"Since Richard Jonas joined our cardiac surgery program, the volume and acuity of our patients are much higher, necessitating the development of such a specialized unit," said Gerard Martin, MD, executive director of the Center for Heart, Lung and Kidney Disease and co-director of the Children's National Heart Institute. "This collaborative effort signifies our commitment to making the Heart Institute a leader in its field."

problems, including second-impact syndrome. Individualized management recommendations are made to children, families, schools, and pediatricians regarding appropriate return to school, sports and everyday activities.

For more information regarding mild TBI or concussions, or to refer a patient, call the SCORE program at 202-884-2429.

Children's National Heart Institute Brings World-Class Cardiac Care to Washington

Children's National Heart Institute is emerging as one of the top cardiac centers in the nation. The Institute brings together a multidisciplinary team to provide specialized expertise and supports all facets of pediatric cardiac science. Led by world-renowned cardiac surgeon Richard Jonas, MD, Children's National Heart Institute has seen an increase in the program's efficacy and a marked improvement in overall patient outcomes. Our team of dedicated pediatric cardiac surgeons, interventionalists, anesthesiologists, cardiologists, fetal heart specialists, and cardiac intensivists care for children with a wide range of congenital heart disease.

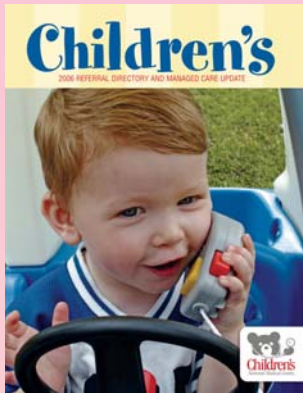
What sets Children's apart is our commitment to the entire family. At Children's, we understand that a child's illness affects every member of the family, which is why we focus our care from the perspective of the family. Instead of waiting for surgery and adding more stress to families, Children's advocates early repairs for heart defects. In fact, one third of our surgeries for congenital heart defects are performed on children less than three months of age. Dr. Jonas is a pioneer in correcting complex congenital heart defects; he is able to repair defects that allow the corrections to grow with each child.

Children's team members are specially trained to treat children and are sensitive to their needs – and to the needs of their families. Our care doesn't stop with surgery. We provide families with the emotional and spiritual support needed to thrive before, during and after their time at Children's.

For a consultation or to make a referral, call 202-884-2811.

Physician to Physician Access Line

202-884-4880 • 571-226-8388 (in Virginia)



Managed Care Update



Physician Referral Pad

REFERRAL AND SERVICE DIRECTORIES

Detailed laminated referral cards and service directories are available to help you identify and reach Children's specialists. These useful resources provide an overview of the services and contact information for the main hospital and seven Regional Outpatient Centers. New 2006 materials will be coming soon.

PHYSICIAN TO PHYSICIAN ACCESS LINE A Resource for Community Physicians

In response to the growing needs of community physicians seeking guidance while making diagnoses and determining whether to refer a child for immediate hospital-based care, Children's National Medical Center created the Physician to Physician Access Line.

This line is for direct consults with any of Children's specialists when an urgent clinical decision about a patient is needed. This number is operational 24 hours a day, seven days a week and physicians will return your call or get on the line within 15 to 20 minutes. The line does not have phone trees or require callers to submit paging requests.

Other Resources for Communicating with Children's

Children's wants to help you make the right call when seeking specialty care or advice for your patients. From assistance with making a clinical decision about a complex case to scheduling a routine follow-up visit, there are resources available to help you.

BEAR LINE — Referral and Information Service 888-884-BEAR (2327)

This number serves as a quick number for patients to obtain access to all departments. This centralized line will forward parents to the appropriate specialty. Parents can also email tbear@cnmc.org with questions about services at Children's.

LIFELINE — Medical Transportation Service

Lifeline: 202-884-LIFE (5433)
Lifeline (Long Distance): 800-884-LIFE (5433)
Children's Lifeline staff coordinates transportation for patients via sedan, taxi or van service as well as ambulance, helicopter and fixed wing transports.

Language Services

202-884-5444
Basic interpretation services are provided on-site for patients receiving care at Children's. When making an appointment, inform the clinic operations specialist that this patient will need an interpreter.

Children's web site

www.dcchildrens.com

Physicians wishing to utilize the Internet as they coordinate care for patients can visit Children's web site to schedule appointments. Although this is not real-time appointment scheduling, a customer service representative will call or email you to make arrangements.

Physician Liaisons

Children's will assign a personal physician liaison to your practice. These liaisons will visit your practice and keep you updated on the latest news and resources available at Children's. Liaisons will assist with your needs and concerns in working with the main hospital and Regional Outpatient Centers. Call 202-884-4500 to request a liaison visit to your practice.

PEOPLE NOTES

Children's Welcomes the Following Members to Its Team:

Allergy, Pulmonary and Sleep Medicine

Jenny Lew, MD
Suja Nair, MD

Anesthesiology

Karen Thomas, MD
Janelle Vaughs, MD
Sophie Pestieau, MD
Songyos Valairucha, MD

Cardiology

Deneen Heath, MD
Joshua Kanter, MD
Rae-Ellen Kavey, MD
George Ruiz, MD

Cardiac Surgery

David McMullan, MD
Achintya Moulick, MD

Critical Care Medicine

Aditi Sharangpani, MD
William Tsai, MD
Angela Wratney, MD

Endocrinology and Diabetes

Nathaniel Clark, MD, RD
Priya Vaidyanathan, MD

Gastroenterology

Bryan Fine, MD
Sona Sehgal, MD

General Pediatrics

Cara Biddle, MD
Linda Fu, MD
Nathalie Quion, MD

Hematology

Shana Jacobs, MD
Emily Meier, MD
Jose Villagra, MD

Hospitalists

Francisco Alvarez, MD
Shelley Coffons, MD
Bryan Fine, MD
Heather Levens, MD
Neha Sha, MD
Rachel Wholberg, MD

Neurology

Maria Acosta, MD
Christine Heath, MD
Tammy Tsuchida, MD

Neurosurgery

Amanda Yaun, MD

Oncology

Percy Ivy, MD
Shana Jacobs, MD

Ophthalmology

Marlet Bazemore, MD
Brian Brooks, MD

Orthopaedic Surgery

Emily Hattwick, MD

Pathology

Atif Ahmed, MD

Physical Medicine

Olga Morozova, MD

Plastic and Reconstructive Surgery

Ananth Murthy, MD

Psychology

Michele Dadson, PhD
Donna Marschall, PhD
Lauren Krivitzky, PhD

Surgery

Cynthia Gingalewski, MD

Children's Frederick Outpatient Center MOVES TO A NEW LOCATION

Children's National Medical Center is relocating its Frederick Outpatient Center to:

5910 Frederick Crossing Lane

First Level 1

Frederick, MD 21704

This new and expanded Outpatient Center makes it more convenient for families to take advantage of the clinical expertise offered by Children's.

SERVICES AVAILABLE INCLUDE:

- Allergy, Michael Sly, MD
- Cardiology, Stanley Beder, MD, Sara Clauss, MD, John Cockerham, MD, Gerard Martin, MD
- Gastroenterology, Benny Kerzner, MD

- Nephrology, Kanwal Kher, MD
- Neurology, Adeline Vanderver, MD
- Urology, H. Gil Rushton, MD

Children's is always looking for ways to better serve you and our entire community of physicians. If you are interested in receiving a visit from one of Children's Physician Representatives, please contact Shay Raugh at 202-884-4500. Children's is excited to partner with you in providing your patients excellent pediatric specialty care.

To schedule an appointment, contact Children's Referral & Information Line at 1-888-884-BEAR. To reach Children's Outpatient Center in Frederick directly, please call 301-682-6661 or fax 301-682-6668.

Vol. 16 No. 4
Fall 2005

Children's Medical Currents is a publication produced four times a year by Public Relations and Marketing for the Medical Staff and referring physicians of Children's National Medical Center. For information, call 202-884-4223 or e-mail jvastyan@cnmc.org.

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Children's Hires New Executive Director to Lead Center for Cancer and Blood Disorders



Max Coppes, MD

Children's National Medical Center is pleased to announce Max Coppes, MD, PhD, MBA, as the new executive director of the Center for Cancer and Blood Disorders.

Dr. Coppes, born in the Netherlands, joins Children's from the University of Calgary where he was the first to hold the \$6 million endowed Kids Cancer Care Foundation Chair in Pediatric Oncology. For the past nine years, he was also the director of the Children's Cancer Program at the Alberta Children's Hospital in Calgary, Canada.

"Dr. Coppes is a recognized and respected leader in pediatric oncology and will be a true asset to Children's," said Peter Holbrook, MD, chief medical officer at Children's National Medical Center. "We are delighted to have him in Washington, DC to guide our team."

Dr. Coppes is an internationally recognized expert in Wilms tumors, the most common form of childhood kidney cancer. He has been published in more than 120 manuscripts, is a member of several editorial boards, and sits on numerous national and international committees. His research interests include the molecular genetics of pediatric tumors. Dr. Coppes and his wife Arty have three children.

The Center for Cancer and Blood Disorders at Children's National Medical Center plays an active role in childhood cancer research, education and advocacy. The Center includes programs and services in: bone tumor, cancer genetic counseling, childhood cancer prevention, comprehensive long-term cancer follow-up, clinical trials in experimental therapeutics, hemophilia and thrombosis center, sickle cell disease, immunology, neuro-oncology, patient and family support, and stem cell transplantation.



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