Born four months premature, boy exceeds all expectations

On their fifth wedding anniversary, Melissa and John Cavagnaro held their newborn baby boy Evan for the first time, and prepared to say goodbye. He had already been hospitalized for one month, following the passing of his twin brother, Ian, who also had severe complications following birth.

Born four months before their due date, Evan and Ian weighed just 1 pound, 4 ounces each, and needed intensive life support from Golisano Children’s Hospital’s Neonatal Intensive Care Unit (NICU). Evan made it through his first month, but then he developed necrotizing enterocolitis (NEC). The tissue in his intestines was dying, and chances were slim that he would survive. Fortunately, NEC was resolved with a lot of monitoring and antibiotic therapy, but Evan was not out of the woods yet. An ultrasound revealed a large abscess on Evan’s liver. Four ounces of fluid was drained from the abscess, leaving him at the fragile weight of just 1 pound. Despite his weakened state, Evan started improving. He left the NICU four months after he’d arrived, just after his original due date.

For a 23-weeker, Evan, now 6, is doing remarkably well. Cognitively, Evan is right where he should be for his age. He is doing well in school and has lots of friends. Evan does have cerebral palsy, which affects his growth and

Continued on page 15
Dear Friends —

Since the Meliora Dinner Celebration and the Golisano Children’s Hospital Gala back in October, the same words keep echoing in my head:
“Hearts, Minds, Kids, Cancer ...
Hearts, Minds, Kids, Cancer ...”

These are the areas of focus of the University of Rochester Medical Center’s Capital Campaign. We are a part of the University of Rochester that has a very special niche in the health care community, a very special constituency in the Greater Rochester region and beyond, and a very special place in the hearts of everyone we touch in every neighborhood of upstate New York. And we and the children and families we serve are proud and happy to be both integral to and unique within our University, our neighborhood, and our region. So what does this mean for Golisano Children’s Hospital?

HEARTS: Our Pediatric Heart Center functions on a regional model, providing surgical and medical services to children with congenital and childhood heart disease and their families from all over upstate New York and beyond. This means cardiologists, cardiac surgeons, interventionists, echocardiograms, electrocardiograms, electrophysiologists, expert nurses, cardiac critical care physicians, intensive care equipment and monitoring, pharmacists, radiologists, and social workers are all dedicated specifically to the needs of children and their families. We are working to raise endowment funds to help us recruit and retain the very best specialists, equipment funds to “outfit” our new hospital in the best way possible for children with heart disease, and education funds so we can train the best students, residents, and fellows to help us care for these patients and families. Our Pediatric Hypertension and Lipid program is aimed at helping us understand what we can do during childhood to prevent heart disease in adulthood, and we are determined to raise the funds needed to sustain this program until there is no such thing as heart disease or stroke.

MINDS: Golisano Children’s Hospital already houses one of the nation’s finest programs in Child Neurology and Neurosurgery. But the technology and professional staffing needs for caring for children with autism, traumatic brain injury, epilepsy, and stroke are changing so rapidly, even just staying in one place will require endowment funds to maintain current grant funding and health care payments. Our Neurodevelopmental and Behavioral Pediatrics program serves most of NY state, providing education and services, not just to patients and families, but to the schools and agencies and institutions around
us, too. So much of what we do cannot be billed for. And so much of what we hope to be able to do in the future depends critically upon the cutting-edge research we must continue to do despite shrinking public and private grant funds for research. Childhood mental health remains a neglected and common problem throughout the U.S., and keeping the country’s best experts here in Rochester to ensure that we provide services to children with depression, pervasive developmental disorders, and oppositional-defiant disorder means underwriting the costs of their care that are not covered through traditional channels.

KIDS: Honestly, this is everything we do and all we are about. “It’s the kids!” is our mantra, and we will shout it from any rooftop to which we have access! Especially the new rooftop we hope to begin building next summer! So many children in upstate NY are born prematurely or with complex congenital or genetic conditions. These children depend on our NICU for their survival and subsequent quality of life. So many children in upstate NY have Crohn’s disease or ulcerative colitis or kidney failure or sickle cell disease or diabetes or rheumatoid arthritis – chronic diseases for which there is currently no cure. These children depend on Golisano Children’s Hospital to stay as healthy as they can and to recover when they are sick. And they depend on our research and our supportive care services to give them hope that tomorrow will be better than today. We treat children with more transient things, too, like tonsillitis and appendicitis; and because no one can predict when these things will happen, our emergency department and surgeons and critical care staff must be ready at a moment’s notice to make it all better for these kids.

CANCER: No one wants to believe that children get cancer. But they do. And for children in this region with cancer, there is nowhere to turn except Golisano Children’s Hospital. We provide diagnostics, education, surgery, chemotherapy, radiation therapy, bone marrow transplantation, follow-up surveillance for recurrence, supportive care, and longterm survivor programs. These programs are a godsend for the present; but training and research are the future. We do it all, but we cannot sustain it without your help.

Friends, all of us hope sincerely that all of our kids and all of your kids will stay healthy forever and ever. But just in case, please help us build what you would want to have here in Rochester if you ever needed it.

With thanks and best wishes, Meliora,

Nina F. Schor, M.D., Ph.D.
Pediatrician-in-chief
Ronald McDonald House Charities (RMHC) staff and board members paraded into a staff meeting for University of Rochester Medical Center (URMC) social workers, showering the team with homemade cookies and balloons. Faces lit up and smiles abounded, as members of the RMHC announced that they would be presenting the 2012 Crystal Heart Award to the Pediatric Social Work Division at URMC’s Golisano Children’s Hospital during their annual Red Tie Gala on March 17.

The Crystal Heart Award honors an individual or group who has substantially improved the quality of life for children and families in the community, or has made an invaluable contribution to the mission of RMHC. RMHC, which provides housing and respite for families whose children are being treated at Golisano Children’s Hospital, works closely with the hospital’s pediatric social workers to identify families in need of housing accommodations. Social workers are there to make sure that a family’s basic needs are tended to while their child is hospitalized. In addition to connecting families with community resources, they provide families with emotional support, to help alleviate some of the stress that can come from having a child in the hospital.

Golisano Children’s Hospital’s senior pediatric social worker, Carla LeVant, LMSW, received a second award – the 2011 URMC Board Excellence Award in the Clinical category. LeVant was recognized for her dedication to transforming pediatric care to be more focused on patients and their families.
When the National Heart Lung and Blood Institute released the Integrated Guidelines for Cardiovascular Health and Risk Reduction in Children and Adolescents this fall, it relied heavily on a Golisano Children’s Hospital cardiologist to make it happen.

Rae-Ellen Kavey, M.D., M.P.H., professor of Pediatrics at the University of Rochester Medical Center, was coordinator for development of the guidelines and along with the members of the Expert Panel, has been involved in explaining the new recommendations to fellow pediatricians and to families.

“These are the first guidelines addressing all aspects of cardiovascular health in children that are based on an independent review of the scientific evidence. The recommendations come from that evidence review with several new and important recommendations,” Kavey said.

Kavey pointed out that the science review revealed a large body of evidence supporting the safety and effectiveness of a low fat diet in promoting cardiovascular health. One important study from Finland randomized children to a low saturated fat diet or to usual diet in infancy, and followed the children into their mid-teens. The children on the low saturated fat diet had lower LDL cholesterol, less obesity and lower blood pressure, all important cardiovascular benefits with no identified differences in growth or maturation. Evidence like this led to the guideline recommendation for a low saturated fat diet for all children 2-years-old and older. That means only fat free milk as the recommended beverage for all children – not whole, 2 percent or 1 percent – for children starting on their 2nd birthday.

Another issue the recommendations address in detail is primary hypertension in children. Pediatricians are not as accustomed to screening for hypertension in kids as primary care physicians are in adults, although there have been NHLBI guideline recommending this for many years. Here, the blood pressure checks are part of overall cardiovascular health assessment so parents need education on what is the norm for their children and what hypertension looks like in children.

“We need to not only measure blood pressure in our pediatric patients, we need to compare the results to the norms and show them to parents, just like we do with height, weight and BMI,” Kavey said. “Initial treatment for the vast majority of children with primary hypertension is lifestyle change. If we can catch children with blood pressure issues when they’re young, we may be able to prevent or lessen cardiovascular problems in adulthood.”

Many pediatricians have already made diabetes screening part of their routine care, but the guidelines underscored that practice. Children who are at risk for diabetes should be screened at 10 years of age. Risk factors include obesity plus two additional risk factors, including a parent with diabetes or being part of some racial/ethnic groups. The screening should be repeated every two years if the risk pattern is unchanged.

As for the new cholesterol screening, Kavey said she worries there was some information that did not get a lot of attention in the media. At 10, children are recommended to have a blood test for cholesterol screening, but don’t worry – it does not need to be a fasting sample. Kavey said the guidelines provide clear algorithms for diagnosis and treatment by age and by cholesterol level, and provide diet recommendations as the first stage of management.

“Even the kids with high numbers should try diet and exercise changes first,” Kavey said. Only those very rare children with extreme lipid elevations – triglycerides over 500 mg/dL or LDL cholesterol over 250 mg/dL – would need immediate referral to a specialist.
Five years ago today, at five minutes after midnight, I watched the delivery staff stuff a tiny stick doll into a bag. That was my baby. Twenty-three weeks and five minutes gestation. They took the package away, and told me they’d let me know more in 20 minutes. I was pretty sure what the news would be.

I went outside. The hospital was quiet. The city was surprisingly silent. The world slept as the staff struggled to keep alive a tiny thing that we’d already been warned probably wouldn’t live very long. It was 1 a.m., January 5, and it was 55 degrees. How odd, I thought, and how sadly memorable.

Twenty minutes became thirty, then forty, then an hour. Two hours after delivery I was approached by the delivery staff. I was told they had a difficult time, but Taylor was as good as could be. To me that meant she was comfortable, and still alive ... and that was all. There were no promises made, no inferences that she might be OK. I was led into that dimly lit beeping area I came to know as the NICU.

There inside the “incubator” was the tiniest human I’d ever seen. She already had a tiny knitted blanket in there, a gift from some soul who felt compassion for a tiny baby that probably wouldn’t make it. Taylor’s mother was asleep, exhausted from the ordeal. I, too, was exhausted, more from the understanding of what was likely to come than the late night itself. I went home and showered.

Six hours after that, I returned to the hospital and sat next to my baby in that plastic enclosure. Her face was covered with tape and tiny tubes ran from her face, her arm, her leg, her foot. She was dark; she was skinny. I could not hold her, I could not comfort her, I could not console her.

I'd seen the notes of thanks in the NICU waiting room. Gracious parents who celebrated the 1st, 2nd, even 8th birthday of their child born in the NICU. Babies who were born at 4 pounds, 3 pounds, even 2.2 pounds! But there were none from parents with babies like Taylor, born at 1.3 pounds. And there were notes of thanks, and memorial donations, from parents who'd enjoyed the three months, or five weeks, or two days that they had been afforded with their babies. I was quite certain that I’d soon be in the latter group.

I sat in that NICU, alone. I could see a glimmer of the cloud-obscured sunrise through the far window, though Taylor’s area was still enveloped in darkness, lit only by night lamps and the glow of overhead monitors displaying vital statistics. I did not sob or wail, but tears streamed down my face; I can still recall that the tears did not fall, but instead ran down my neck and soaked my shirt. It was so unfair, this tiny life allowed to come into our world, but with apparently little chance to experience it. I remember thinking,
I'd give anything to let this baby live. Everything I own, everything I do, everything I ever was. I'd had such a wonderful, comfortable life, with many privileged experiences and more than enough fine possessions — but none of that mattered now. If I could, I prayed, I would give it all just to see this tiny thing live for a week.

I begged God to let her live, though I know that he rarely answers our prayers as we'd wish. I didn't care if she suffered any of the ailments we'd been warned that very premature babies suffer. If she lived, I would care for her and love her no matter what ailments she suffered; and so I prayed, and begged, to just let her live. But I had to be realistic, the odds were against the hope.

As I wept, and appreciated every moment I had with my tiny daughter, I felt a hand on my back. I turned to look; was it a consolation, an understanding of my grief from a concerned doctor or nurse? It was friend from long ago whom I'd forgotten worked at the hospital. And she spoke to me, saying only, “It will be OK,” and walked off.

Taylor did live that day, as I'd prayed. And the next, and then we celebrated a week. Caring donations appeared; first a handmade blanket, then a knit cap to keep her head warm, and then tiny stuffed animals that were still bigger than Taylor – all from people I would never meet.

The NICU became my home, and my home became a place to visit and crash, exhausted. The hospital cafeteria became my kitchen. Up early to work, an afternoon visit to the NICU, back to work, again back to NICU and then finally a collapse into my bed to start again. Taylor's care was exemplary; Nurse Carol doted over her, giving her special attention; the giant of a man, Nurse Mark showed me with his strong, thick hands how to turn a 1.3 pound baby so she was comfortable. The entire staff knew us, and cared.

But, even two months later, nobody, hospital staff or even me, was willing to say she would survive. It was a grueling ordeal. Two steps forward, one step back. Even when I was interviewed for the Radiothon I could not declare that my baby would ever come home.

Yet, despite all the odds, despite the statistics and warning not to be too optimistic, Taylor did go home after three months. We brought home a loved, and to us, giant, baby weighing 4 pounds!

Now it's five years later. That itty bitty baby has grown to be a young lady. She's bigger than other kids her age, energetic, intelligent and inquisitive. She has no recollection of her early struggles, though her favorite photo is the large poster of herself in “the incubator.” She likes stuffed animals and princesses, but loves to play with turtles and snakes; she has her own bug collection. She has no fear (much to my concern), but after what she went through, what is there to fear?

As for me, I remember. All of it. The experience has burned into me a fabulous love, a celebration, if you will, of every child. And, an appreciation for those people, known to me or not, who made all the difference in the world.

So if you see any of those people today, tell them thanks for me. Let them know they gifted to me something that cannot be obtained from any job, investment, lottery, or king. Tell them that they did make a difference, and that everything they do for the families makes a difference. Let them know that whatever they do today, it is more important than anything else in the world.

If you'd like to support the incredible work done in the NICU, please call (585) 273-5948 or visit www.givetokids.urmc.edu.
Pediatrician-in-Chief edits two preeminent textbooks on pediatric health

Golisano Children’s Hospital faculty members are a prolific bunch, writing books and contributing chapters to the most important literature on child and adolescent health. In fact, as an editor, the pediatrician-in-chief helped two influential pediatric health textbooks move farther into the digital age as an editor of the latest editions. *Swaiman’s Pediatric Neurology: Principles and Practice*, published this month by Elsevier, added online components for the first time this edition, and the *Nelson Textbook of Pediatrics*, published by Elsevier earlier this year, added new searchable features to its online components.

Nina F. Schor, M.D., Ph.D., William H. Eilinger Chair of Pediatrics at the University of Rochester Medical Center (URMC) and pediatrician-in-chief of Golisano Children’s Hospital, is the first child neurologist to edit the *Nelson Textbook of Pediatrics*. She said it was an honor to edit the 19th edition, along with Robert M. Kliegman, M.D., chair of Pediatrics at the Medical College of Wisconsin; Bonita D. Stanton, M.D., chair of Pediatrics at the Wayne State University School of Medicine; and Joseph W. St. Geme III, M.D., chair of Pediatrics at Duke University School of Medicine.

“The origins of this textbook trace back to 1919, and it has become an invaluable resource for trainees and for practicing pediatricians,” Schor said. “In fact, some of the sections are so detailed that subspecialists use it routinely.”

The print edition of the textbook is 500 pages shorter than the last edition because some content has been moved online, accessible through a password given to every owner of the textbook. Schor said the online tools are extensive and invaluable, especially for quick reference.

“Being able to quickly show a family a picture of a heart with a congenital defect or to look up a medication dosage without having to leave and come back is really useful,” Schor said. “But so is being able to sit down with a cup of coffee while reading a couple of chapters of the print edition to fully understand something really complicated, like genetic metabolic diseases.”

Schor said the same philosophy goes for *Swaiman’s Pediatric Neurology*, which went online for the first time with its latest edition. *Swaiman’s Pediatric Neurology* is widely considered the gold standard in pediatric neurology. Schor edited the fifth edition, along with Kenneth Swaiman, M.D., professor emeritus of Pediatrics and Neurology at the University of Minnesota Medical School; Stephen Ashwal, M.D., chief of Child Neurology at Loma Linda University Medical Center; and Donna Ferriero, M.D., chair of the Department of Pediatrics at the University of California, San Francisco (UCSF), and physician-in-chief of UCSF Benioff Children’s Hospital.

In addition to providing the fully searchable text in an online version, the latest edition of *Swaiman’s Pediatric Neurology* covers new technologies in imaging and treatments and management of epilepsy.

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Make-A-Wish Foundation

There is no greater gift than seeing a child’s face light up when their biggest wish comes true. The Make-A-Wish Foundation of Metro New York and Western New York gives courageous children battling a life-threatening medical condition the chance to forget about their medical obstacles, to enjoy some time that is devoted entirely to fulfilling their dream.

“The Make-A-Wish Foundation’s impact is very significant because wishes give patients some silver lining when they’re going through difficult times,” said Carla LeVant, senior social worker at Golisano Children’s Hospital at the University of Rochester Medical Center.

LeVant and her fellow pediatric social workers help families connect with community services like the Make-A-Wish Foundation.

The Make-A-Wish Foundation has maintained a strong partnership with Golisano Children’s Hospital for nearly 20 years. During that time, they’ve helped make patients’ dreams come true, by granting a wide variety of wish experiences such as a visit to Walt Disney World Resort or to meet a celebrity. For example, one of our 2010 Miracle Kids Bridgette Merriman, who was diagnosed with stage four Hodgkin’s lymphoma in 2009, had an amazing time visiting the set of one of her favorite TV shows, “Dancing with the Stars,” with her family.

According to data presented from a survey conducted by the Make-A-Wish Foundation in conjunction with the TCC Group, a combined 89 percent of nurses, doctors, social workers and child life specialists surveyed say they believe that the wish experience can influence kids’ physical health. In addition, 74 percent of parents observed that the wish experience marked a turning point in their children’s response to treatment.

“Each wish gives a child a chance to choose and decide at a time when they may feel powerless. It is an experience to look forward to and allows them to focus on something other than illness and treatments. We are grateful to Golisano’s Children’s Hospital for considering us partners in their patient care,” said Tina Chaudhry, director of marketing and communications at the Make-A-Wish Foundation of Metro New York and Western New York.

With every wish the Make-A-Wish Foundation grants, the organization gives a child the inspiration and encouragement he or she needs to keep fighting. Golisano Children’s Hospital is grateful for the hope, strength and joy this organization continues to bring to the children and families treated here. To find out more about the Make-A-Wish Foundation of Metro New York and Western New York, visit www.wny.wish.org.
Community Spotlight

Team Taylor and Tim Milgate Golf Fundraisers changing up

Golisano Children’s Hospital at the University of Rochester Medical Center would not be what it is today without the support from people like you. We all have much to learn from Jennifer Brush and Deb Milgate-Moyer, two women who set out to make an extraordinary difference in the lives of sick and injured children. These community-minded go-getters have each built an incredibly successful fundraising event from the ground up. Now, the two are turning over a new leaf; wrapping up the events that have done so much good and embarking on new and exciting fundraising projects.

Moyer held the 12th and final Tim Milgate Golf Fundraiser in August. Her hard work certainly paid off. Moyer raised $20,000 at the final event, bringing the grand total of funds she has raised for Golisano Children’s Hospital to $245,000.

Brush will hold the 10th and final Taylor Brush Memorial Dinner Dance on Saturday, March 31. This impressive event, which draws hundreds of attendees every year, has donated more than $140,000 to the Neonatal Intensive Care Unit and Pediatric Social Care Unit at Golisano Children’s Hospital. For more on this year’s event, please call (585) 314-3014.

While these fantastic fundraisers are winding down, the work of these kind-hearted women is far from over. The pair is teaming up as Team TNT, to host a fundraiser in the fall. Please visit www.givetokids.urmc.edu and visit our events calendar for updates on this event and their bracelet sales initiative.

RazorSharks promotion a slam dunk for kids

From Sept. 29 to Dec. 31, the Rochester RazorSharks basketball team offered a special sports package to anyone who donated $100 to Golisano Children’s Hospital. The hospital would like to offer a big thank you to the RazorSharks for helping the hospital raise $27,400 from this generous promotion.

Flower sales blossom & grow for Golisano Children’s Hospital

For mothers who have lost a child, Mother’s Day might bring back painful memories. But to Heather VanDeMark and her mother, Joyce Amici, Mother’s Day is an opportunity to celebrate the precious month Heather’s daughter Julia spent as an inspiration to those that knew her. Julia faced severe heart complications when she was born in 2005. Though Julia sadly passed away a short time after she was born, her mother and grandmother wanted to show their appreciation for the care Julia received at Golisano Children’s Hospital.

Over the past five years, Heather and her mother have sold flowers around Mother’s Day and donated all proceeds to Golisano Children’s Hospital. Flowers for Julia has raised $8,300 for the hospital so far and Heather and her mom will start taking orders again in April. “We love doing it and know there’s no better place to donate our money,” Heather said. For more information or to place an order, please visit http://www.flowers4julia.com.
The Gelsomino Family
Philip C. and Beverly L. Gelsomino II have been long-time supporters of Gelsomino Children's Hospital. Their generous support of the renovations of the Pediatric Treatment Center in 2008 and the building of the Pediatric Surgical Suite completed in 2006 along with their commitment of the Pediatric Treatment Center in 2008 and the building of the Golisano Children's Hospital. Their generous support of the renovations of the NICU is another example of the generosity this couple continues to provide.

B&L Wholesale Supply Company
Don Tomeny, Art Finocchiaro and Bob Latour, owners of B&L Wholesale Supply Company continued with their generous support of the Children's Hospital when the three of them were moved by Jennifer Johnson Esposito's story of her daughter Grace. Together, the three gave a combined $100,000 at the Gala to support the new Neonatal Intensive Care Unit (NICU). This support is in addition to their already very generous annual gift via the very successful annual B&L Wholesale Supply golf tournament. Their tournament has raised over $1 million for the Children's Hospital since its inception 17 years ago.

Steve and Vicki Schultz
Steve and Vicki Schultz were as well moved by the very emotional story of Grace Esposito. So moved, in fact, that they decided to give $50,000 to help build the new NICU. Vicki is a former employee of the Children's Hospital's advancement team.

Ed Kauffman
Ed Kauffman has held an annual charity golf tournament for the past 14 years. He and his wife, Paula were inspired at the Gala to commit the expected $50,000 in proceeds for the NICU Fund-in-Need. Ed and Paula's daughter Samantha is a cancer survivor and has been assisting with the tournament planning each year.

Kim and Steve McCluski
Kim and Steve McCluski generously donated $25,000 for the NICU Fund-in-Need. Kim has been a member of the Gelsomino Children's Hospital board for many years and her husband, Steve, is a member of the Wilmot Cancer Center board. Kim is an active member of the Gala planning committee and is co-chair of the Community Fundraising Committee for the Children's Hospital. The McCluski's involvement began when their son Ryan was a patient at the Children's Hospital.

David and Kate Ackerman
Kate is a physician and researcher here at Gelsomino Children's Hospital. Through her work in the NICU she has seen the importance of supporting such an important facility, and she and her husband generously donated at the Gala.

All gifts count toward The Meliora Challenge: a University-wide fundraising campaign that was launched in October 2011 and runs through June 30, 2016.
J. Michael Smith and his wife Alice have always had a passion for giving back. Smith serves as co-chair of the fundraising campaign for Golisano Children’s Hospital at the University of Rochester Medical Center, and Alice has been a lifetime educator and volunteer. The Smiths have pledged to give more than $1 million to Golisano Children’s Hospital – one of the first large individual gifts to go toward the children’s hospital $100 million campaign.

The campaign is part of the University of Rochester Medical Center’s $650 million campaign and the overall $1.2 billion goal of The Meliora Challenge: The Campaign for the University of Rochester.

“Mike is truly a community leader. We’re honored to have him play such an important role in the campaign, and are thrilled about Mike and Alice’s very generous donation,” said Nina F. Schor, M.D., Ph.D., pediatrician-in-chief of Golisano Children’s Hospital and chair of Pediatrics at URMC.

Smith was compelled to start helping Golisano Children’s Hospital about five years ago, when friends of the hospital began introducing him to some of the hospital’s leaders, including Schor, Bradford C. Berk, M.D., Ph.D., CEO of URMC, and Elizabeth “Lissa” McAnarney, M.D., former pediatrician-in-chief of Golisano Children’s Hospital, who serves alongside Smith as co-chair of the children’s hospital campaign.

“That’s when the indoctrination began,” Smith joked. “I started learning about all the things that went on in Golisano Children’s Hospital and all the immense challenges the hospital was facing, despite the incredible difference the hospital was making for families not just in Rochester, but across the region too, from Batavia to Geneva and as far south as the Pennsylvania border. Because the Department of Pediatrics and its faculty serve every health care system and pediatric practice in the region, this was a great way for us to continue our efforts.”

Moved by the generosity he saw in his friends, such as hospital namesake B. Thomas Golisano, and impressed by the passion and dedication he saw in hospital leaders, Smith joined the children’s hospital board in 2006. In 2008, Smith and his wife served as honorary chairs for Golisano Children’s Hospital’s Gala. Smith’s company, The Cabot Group, also lent a great deal of support to the gala that year, serving as presenting sponsors, and the company committed to serve as presenting sponsors for the gala until 2017. Smith has also been part of the sponsorship committee for the hospital’s annual Golf Classic, and The Cabot Group has provided sponsorship for the golf fundraiser over the years as well. Those sponsorships, along with the gift toward the building, makes the Smiths’ commitment total $1.3 million.

Smith is proud to help lead the charge, as Golisano Children’s Hospital moves forward with plans to build a brand new hospital and enhance its pediatric programs to better serve the community.

“When I agreed to be co-chair of Golisano Children’s Hospital’s campaign, I knew that you really have to lead by example,” said Smith. “When you commit to really supporting something, you have to stand by it… and, really, when one thinks about it, what could possibly be more important and more rewarding than helping kids?”
Children’s Hospital Board Chair Donates $1m Toward Campaign

Mark Siewert, chair of the Golisano Children’s Hospital fundraising board, has committed to a $1 million gift toward the hospital’s campaign. Siewert and his wife, Marcia, are among the first individual donors to provide large gifts to the $100 million campaign, which will support both a new children’s hospital and major enhancements to pediatric programs.

“Not only is building the hospital important but each one of the programs is important,” said Siewert, former owner of Siewert Equipment Company. “You really have to build both at the same time. You have to ratchet them both up.”

Nina F. Schor, pediatrician-in-chief and the William H. Eilinger Chair of Pediatrics at the University of Rochester Medical Center, said donors like Siewert are forward-thinking and want to see the hospital succeed far into the future. Siewert is not only giving toward the new hospital; a large portion of his gift is also going toward all seven pediatric programs targeted for enhancements through the campaign.

“Mark and Marcia are part of a new wave of donors Golisano Children’s Hospital is embracing throughout this campaign. They are integral to the success of both the new building and the programs that will be housed within it,” Schor said. “They understand that we need to endow positions and programs to improve them but also to ensure they are there and of high quality for future generations of children.”

Siewert is in a special position to understand how important it is to have expert care in the Finger Lakes region. A decade ago, his son, Mark Daniel Siewert, was in need of those services. Following surgery, Mark Daniel spent eight months in the pediatric intensive care unit (PICU). Throughout that process, the Siewerts saw the dedication of the hospital’s physicians, nurses and staff. Siewert was compelled to join the hospital’s fundraising board while his son was still a patient. Ultimately, Mark Daniel lost his battle, but the couple felt the need to give back to the hospital that had tried so hard to save their son.

From the many, many nights the Siewerts spent in the PICU, they knew how much a bigger, more modern PICU was needed so they helped to raise money to build that unit, which opened in late 2004. When the hospital launched its effort to build the new Pediatric Surgical Suite, the Siewerts immediately saw the benefits of building in more space for family and for building the pre-surgical and post-surgical areas in a way that would allow parents to be with their children as much as possible throughout the process. That suite opened in 2006.

Siewert took over duties as board chair in June of 2010, and embracing his dual role as board chair and a campaign leader, which is underscored by this generous gift. He and Marcia are excited to help the hospital continue to improve its facilities and its programs.

“I love Rochester,” Siewert said. “Having a good children’s hospital is good for the city; it’s good for employment; it’s good for businesses.

“Employees don’t have to go out of town to find care for their children. If we had had to go to Pittsburgh or Cleveland or NYC – as I ran the business – I don’t know how I would have done that.”

The Siewerts named the hallway to the Pediatric Surgical Suite in memory of their son, Daniel.
Couple generasly donates half their life savings

Harold D. and Diane M. Osborne, both retired teachers, spent their lives working with children, so it’s no surprise why they donated to Golisano Children’s Hospital at the University of Rochester Medical Center. This doesn’t mean their generosity isn’t breathtaking.

The couple have committed $500,000 – half of their life savings – to start the Harold D. and Diane M. Osborne Family Endowed Fellowship in Pediatrics. The fund will support graduate medical students who are pursuing specialized training in pediatrics and have demonstrated financial need. Both medical residents and post-residency fellows are eligible for assistance. Their son, a doctor who completed his residency at URMC, recommended the hospital to them when they were looking for a place to give.

“He thought it would be helpful to train doctors and reach more lives that way,” Diane said. “We know how tough it is and how costly it is.”

Marc Misurewicz, director of major gifts, said the couple wants to do more than just give a check. “They have also volunteered to help. They want to be a part of the hospital and stay engaged,” he said. “They are humble, gracious, caring, retired teachers who wanted to support the children in our community.”

Harold said he and his wife wanted to find a way to give back, especially since they’ve felt so blessed. “We’ve spent our lives in education, and it’s successful in that it’s satisfying and we’ve been able to save and have good lives because of it,” he said. “We have four healthy kids and three healthy grandkids. Kids have been the focus of our lives, and now it’s our turn. We’ve been blessed, so it’s our turn to give back.”

2012 Golisano Children’s Hospital Telethon

Meet our Miracle Kids during the Telethon
Sunday, June 3, 10 a.m.–1 p.m. and 6:30–11 p.m.
on 10NBC

Golisano Children’s Hospital is the only hospital in the Rochester and Finger Lakes region devoted solely to the care of children. All donations made through the Telethon stay here to help children suffering from a variety of illnesses and injuries, and support many projects crucial for our children.
Upcoming Community Events

Mar. 24 – 5th Annual Keeping Hope Strong Lovin’ Cup, 300 Park Point Drive in Rochester. The Mitchell family will hold this great annual event with live music, raffles and more at a new location to celebrate their Miracle Kid, Mason Mitchell. For more information or to order tickets, please call (585) 703-6088.

Mar. 31 – Monte Carlo Night Eagle Vale Country Club. 2009 Miracle Makers Tops Friendly Markets will host its 6th annual Monte Carlo Night from 7 to 11 p.m. Tickets are $80 per couple or $45 per person and tend to sell out quickly. To order tickets, please contact Cheryl Colbert at (716) 374-2031 or Eric Czekanski at (585) 269-0369.

Apr. 28 – Talent for Tots and Teens 300 East River Road in Rochester. This annual show will take place at 5 p.m. Tickets can be purchased at the door for $12 each. To find out more, please contact Ms. Ida Wheeler at iwheeler@alumni.rochester.edu.

Mar. 31 – Dance Strong Competition 300 East River Road in Rochester. A youth dance competition will be held to benefit Golisano Children’s Hospital at noon. Tickets can be purchased at the door for $10 each and are free for children 5-years-old and younger. For more information, please contact Ms. Ida Wheeler at iwheeler@alumni.rochester.edu.

May 19 – 2nd annual Jordan’s Journey Benefit Dinner Red Fedele’s Brook House, 3590 W. Ridge Road in Rochester. For details, please contact Cheryl Foringer at cforinger@amica.com.

May 23 – Western New York’s Golfing for Kids Golf Tournament Terry Golf Course, Batavia. Breakfast and registration for this event, sponsored by Walmart and Sam’s Clubs will run from 9 to 10 a.m. with a shotgun start at 10 a.m. Dinner will immediately follow the day of golf. For more information, please call 585-273-5948.

Special Thanks
Many thanks to these and all generous supporters and event organizers that benefit Golisano Children’s Hospital!

- Thank you to the Passero and Yazwinski families for organizing another wildly successful 100 Innin Festival of Softball, which raised $15,260 in 2011. We appreciate all your hard work!
- The Genesee Valley Hunt Races helped to raise $5,000 for Golisano Children’s Hospital. Thank you to everyone involved with this great longstanding event.
- We greatly appreciate the incredible donation of $96,779 from Kohl’s to support the Kohl’s Pedal Patrol, a program administered through the Injury Free Coalition for Kids at Golisano Children’s Hospital.
- Thank you to Alexander Umiker for holding his Annual Lemonade Stand–Alexander raised $87.50 this year!
- The 7th annual Raytec Group Carnival of Caring generated a donation of $3,447 for Golisano Children’s Hospital – we cannot thank you enough for the support!
- Team Ali–Gaiters held their Music for Miracles event to benefit the Children’s Hospital and raised $1,341 – thank you very much!
- We appreciate the support from the 22nd Annual Ten Ugly Men Festival. The group recently donated $8,000 to support Pediatric Supportive Care Services and the Bright Eyes Pediatric Brain Tumor Research Fund.
- Thank you to Tony Wells, Pete Bothner, and the Nazareth College Athletic Department for hosting the Inaugural Onnie’s Classic Women’s Basketball Tournament in November. This first-time event raised $2,739 – thanks again!
- The 11th annual Rainbow Classic was wildly successful again this year. Thank you to Scott Barker, the Pasley family, the McCluski family and the entire Pittsford Central Schools community for raising $24,500 from this year’s Classic – we appreciate your continued support!
- The VanDeVoerde Family held a welcome home party for their son, Nathan, upon his return from the hospital, and along with family and friends helped raised $3,125 for Golisano Children’s Hospital – thank you very much!
- Our gratitude goes out to Ms. Ida Wheeler and her entire crew for holding the annual Holiday Showcase Dance Competition on Dec. 3. This year’s event raised $4,184 for the kids – thank you!
- Newlyweds Sean and Jenna McNamara donated $250 to the Clef and Craniofacial Center at Golisano Children’s Hospital as part of their wedding celebration. Thank you for this generous support!
- Thank you to Jennifer Cooper, Tracy Van Auker and everyone at the Gusto Restaurant for holding a Free Gift Wrapping Event. The $274 in tips raised from the event were donated to the Children’s Hospital.
- Auntie Anne’s Pretzels raised more than $3,200 during their Children’s Miracle Network Hospitals (CMNH) balloon sales in October. The three locations enthusiastically sold balloons in each of their locations at Eastview, Marketplace and Greece Ridge Malls to support the Children’s Hospital.
- The Credit Unions Cherry Blossom Run brought in $6,000 for the Children’s Hospital. This annual run takes place in Washington, D.C. each year. Special thanks to Summit Credit Union and Pittsford Federal Credit Union for their generous support of this event.
- Our three local Ace Hardware stores raised more than $2,800 during their annual CMNH balloon sales in October. Nationally, Ace served at the presenting sponsor of the CMNH Champions Program, in which our own Mason Mitchell was Champion for New York State. Locally, Meyers Hardware, who hosted the send-off party for Mason and his family, raised close to $900 in honor of Mason.
- Flower City Glass donated $3,000 to purchase a pediatric exam table for the Pediatric Intensive Care Unit.
- Each year, Advantage Federal Credit Union generously donates $25 for every double hit during the Red Wings home games. The credit union donated $3,075 to the Golisano Children’s Hospital through their Red Wings promotion.

If you are interested in hosting a fundraiser please contact Michael Fahy at: michael.fahy@rochester.edu or 585–276–5176.
Born Four Months Early

Continued from cover

fine motor skills, and he has retinopathy of prematurity or limited vision due to his early birth, but his mom said he has adapted so well, that it’s hard to tell that he is different from any other child. The Cavagnaros love their son very much, and are amazed at the progress he continues to make.

“We send the NICU team updates at Christmas, and we’ve been back to the NICU Wall of Miracles to show Evan where he has been...we’re so thankful and blessed that he’s come so far.”

Building a Brighter Future

Golisano Children’s Hospital at the University of Rochester Medical Center is poised to revolutionize care for kids like Evan and to help save the lives of babies like Ian. The hospital will focus on enhancing care, research and education in Neonatology during its fundraising campaign. Funds raised will help our neonatologists develop more specialized research and clinical programs.

Carl D’Angio, M.D., associate professor of Neonatology, was part of the NICU team that treated Evan and Ian as babies. “I am a doctor and a researcher,” said D’Angio. “In some ways, what I do in the NICU is for the Evans of this world and what I do in my research is for the Ians of this world. At Golisano Children’s Hospital, we provide the care that allows babies like Evan to survive and thrive and we do the cutting edge research that will someday allow babies like Ian to do so, as well.”

Funds raised will help the hospital’s neonatologists develop more specialized research and clinical programs focusing on lung and brain, two of the most potentially serious injuries for newborn babies. The Neonatal Lung Injury Prevention program would give our patients access to the most cutting-edge therapies available, and the creation a Neonatal Brain Injury and Neurological Disease program would continue our research and clinical programs to prevent abnormalities of brain development and brain injury.

Golisano Children’s Hospital plans on improving the physical space of the NICU as well, to provide more space and privacy for families, along with more opportunities for families to learn how to care for their fragile infants before being discharged. With your support, we can save more babies, get them home in the shortest time, and make sure they’re in the very best of health. For more on how to help, visit www.givetokids.urmc.edu or call (585) 273-948.