Special Page 4 Feature

**Newborn Medicine Program at Children’s**
Caring for the youngest patients

**Colorectal Center**
Free bowel management workshop

**Children’s Heart Institute**
Innovative artificial valve shows promise

**Telemedicine Expands**
Eight rural hospitals participate
The SPRING 2014 issue of Pediatric INSIGHTS

In this issue of Pediatric INSIGHTS, learn how the UPMC Newborn Medicine Program helps our youngest patients get a healthy start to life with a specialized Pediatric and Neonatal Transport Team that brings premature babies to Children’s Hospital of Pittsburgh of UPMC’s Neonatal Intensive Care Unit for treatment.

In addition:

• An artificial heart valve developed by cardiothoracic surgeon Masahiro Yoshida, MD, PhD, shows promise as an alternative to pulmonary valves from human donors for pediatric patients with congenital heart defects.

• Children’s Hospital honors Albert Lexie, the shoeshine saint who raised more than $202,000 for Children’s Free Care Fund from his tips before his retirement in December 2013.

• The Children’s Tele-ED, Critical Care Transport, Tele-NICU and Tele-Education programs, in collaboration with the University of Pittsburgh Schools of the Health Sciences, expand telemedicine to eight rural hospitals in the region to enhance access to Children’s expertise during pediatric emergencies.

We welcome your feedback, thoughts, and story suggestions. Please share them with one of our physician liaisons, whose contact information you can find on page 3.
Managing Bowel Issues in Children
A free workshop for patients, parents, and caregivers

Do you know a child who suffers from constipation or fecal incontinence due to Hirschsprung’s disease, anorectal malformation, or spina bifida?

The Bowel Management Workshop presented by experts of the Colorectal Center for Children at Children’s Hospital of Pittsburgh of UPMC is designed to help patients and families better understand these issues and improve patients’ quality of life and social integration.

The one-day workshop is led by internationally renowned colorectal surgeon Luis De la Torre, MD, director of the Colorectal Center for Children. Following the workshop, Dr. De la Torre will see patients individually for further evaluation and consultation and to help patients and families better manage their condition. Diagnostic tests may also be performed to help determine the best treatment options.

Upcoming 2014 workshops are scheduled for May 9 and June 13 in the Plaza Building, located at Children’s main campus in the Lawrenceville section of Pittsburgh. Additional courses will be offered later in the year.

There is no fee for the workshop, however, the standard medical fees will apply for the clinic appointment with Dr. De la Torre and possible diagnostic tests, which in most cases may be covered by insurance.

The Colorectal Center for Children provides expert, multidisciplinary care for infants, children, and adolescents with mild to complex colorectal conditions. Specialists also provide a comprehensive diagnosis, appropriate treatment and, when necessary, an intestinal rehabilitation program based on numerous potential protocols, all under the supervision of the Colorectal Center’s team, to help the patient and family integrate into society and achieve the best possible quality of life. Staff will also help patients and families prepare for the challenges that may arise regarding puberty, sexual function, and child-bearing as they relate to some colorectal issues.

To refer a patient to the Bowel Management Workshop, please send an email to colorectalcenter@chp.edu or call the Colorectal Center for Children at 412-692-5150. For more information, visit www.chp.edu/bmw.
In the six years since cardiothoracic surgeon Masahiro Yoshida, MD, PhD, joined the Heart Institute at Children’s Hospital of Pittsburgh of UPMC, an innovative artificial heart valve he developed has continued to prove itself a worthy alternative to biologic heart valves.

In that time, nearly 90 of his pulmonary valve conduits have been placed into pediatric patients with congenital valve defects. Patients receiving the valve have shown greater freedom from events and conduit dysfunction than those implanted with homograft valves, biologic valves from human donors.

Dr. Yoshida recently shared the valve’s success with surgeons gathered at the 66th Annual Scientific Meeting of the Japanese Association for Thoracic Surgery in Sendai, Japan, the country where he originally conceived the valve concept.

Replacement valves are lifesavers for pediatric patients born with valve defects related to a number of congenital heart conditions, including tetralogy of Fallot with pulmonary atresia, truncus arteriosus, congenital aortic stenosis, transposition of the great arteries, and interrupted aortic arch with a ventricular septal defect.

An estimated 3,200 children are born each year with defects that may require multiple open heart surgeries from childhood to adulthood. In pediatric patients, especially the youngest, parts such as implanted valves and conduits need to be replaced with larger ones as the heart grows. Typically biologic valves are used as pulmonary valve replacements.

While an attending surgeon at Kobe Children’s Hospital in Japan, Dr. Yoshida observed that biologic valves also tended to quickly calcify, necessitating surgical replacement sooner than would otherwise be required due to growth alone. That, as well as a scarcity of biologic valves in Japan, led to his inspiration for an alternative pulmonary valve.

Dr. Yoshida’s design uses stretchable polytetrafluoroethylene (PTFE) tubing for the conduit and 0.1 mm PTFE membrane for the valve leaflets. Each assembly is custom-made for the patient in the operating room at the time of surgery. PTFE is a strong, biologically inert material used in a wide range of vascular implants and also known as Gore-Tex® fabric when used in outerwear.

The current design is more sophisticated than Dr. Yoshida’s original and second-generation versions, which both used a bicuspid valve configuration. Today’s third-generation conduit, which features a fully functioning, asymmetric trileaflet valve, was refined using fluid dynamics computer simulation at Carnegie Mellon University (CMU). It is designed to reduce leakage flow from conduit bending, which slightly compresses the round tubular shape into an oval as a result of the child’s anatomical limitation.

With a valve more adaptable to the growing heart and reduced issues of calcification, the intervals between replacements can be expanded. Ultimately, Dr. Yoshida hopes to reduce the number of needed operations.

“We have been developing and modifying valve PTFE conduits for right ventricular outflow with the goal of reducing reoperations,” Dr. Yoshida says. “The evolution of our conduit has shown promising midterm results with improved leaflet mechanics and decreased conduit dysfunction. Especially among younger patients, those under age 2, the PTFE conduit has demonstrated significant advantages compared to homograft.”

Inspired by Dr. Yoshida’s innovation, three CMU graduates recently formed a startup near Pittsburgh to commercialize a product based on Dr. Yoshida’s concepts with a goal to reach more children in need. The company, known as Peca Labs, is expected to apply for an FDA Humanitarian Device Exemption to accelerate approval of the medical device in order to make products available as early as fall 2014. Peca Labs calls its product the Masa Valve in honor of its inventor, Dr. Yoshida.

LEFT: Pediatric patients benefit from the artificial heart valve developed by Masahiro Yoshida, MD, PhD.
Albert Lexie, the legendary shoeshiner who — one pair of shoes at a time, one tip at a time — raised more than $202,000 for Children’s Free Care Fund, put away the polish in December 2013.

Children’s held a retirement celebration for Albert on March 14, 2014. Albert’s customers — the administrators, nurses, physicians, and staff — thanked him for three decades of selfless giving.

Allegheny County Executive Rich Fitzgerald read a proclamation establishing “Albert Lexie Day,” and state Rep. Ted Harhai, whose district includes Albert’s hometown of Monessen, was there to wish Albert well.

Children’s will ensure that Albert’s legacy — a single individual using his unique skill for the betterment of thousands of children — lives on. Albert will be honored later this year with the inaugural Albert Lexie Hero Award. The award will be given annually to individuals or organizations whose volunteer efforts in support of Children’s embody Albert’s dedication.

Albert got his start fundraising for Children’s in 1981, when he and a friend decided to raise money for the hospital’s Free Care Fund and make a donation during the hospital’s annual telethon on KDKA-TV. Albert raised several hundred dollars, and made his donation to someone he admired very much, the late KDKA anchor, Patti Burns.
At 6:45 a.m. on Jan. 28, 2014, Tiffany’s fiancé and Ava’s dad, Jacob Orr, called for an ambulance. At 7 a.m., they arrived at Armstrong County Memorial Hospital. At 7:45 a.m., Ava was born via natural delivery, weighing just 4 lb. 8 oz. An hour after her birth, Children’s Hospital of Pittsburgh of UPMC’s Pediatric and Neonatal Transport Team attended to Ava as she was flown to Children’s Hospital’s Neonatal Intensive Care Unit (NICU) in Pittsburgh.

Any baby born prior to 37 weeks gestation is premature, says Melissa Riley, MD, a neonatologist in the UPMC Newborn Medicine Program, medical director of Neonatal Transport Services, and associate medical director of the NICU at Children’s. Babies born at 34 or 35 weeks are sometimes able to remain in their community hospitals, but babies born earlier often require transport to a NICU for specialty care.

Ava Orr made her entry into the world a little earlier than expected — eight weeks earlier, in fact. Ava’s mom, Tiffany Anderson, had a fairly typical pregnancy, until she experienced painful premature contractions.

ABOVE: Ava with her parents, Tiffany Anderson and Jacob Orr
Time to grow and develop

Although having a baby two months early was a frightening experience for Tiffany and Jacob, the family was fortunate that Ava’s course was uncomplicated and all of her issues were direct effects of prematurity, such as hypoglycemia, hyperbilirubinemia, apnea and bradycardia.

Intravenous fluids remediated the low glucose levels until Ava was able to receive an adequate amount of her mother’s breastmilk or a specialized formula for preterm babies. Since Ava had immature feeding skills, she required a temporary feeding tube until she was ready and mature enough to feed on her own. Newborn jaundice is more common among premature babies than babies who are full term. A preterm baby’s liver and enzymes are immature, causing bilirubin to be processed more slowly. Light phototherapy helps to break down the bilirubin in the skin, says Dr. Riley, and Ava required this treatment.

Suzanne Reitz, MD, of Children’s Community Pediatrics–Armstrong, determined the better course of action was to send Ava to the NICU at Children’s. “We automatically transfer neonates who are less than 32 to 34 weeks,” says Dr. Reitz. “We are a ‘normal newborn’ nursery and Children’s is much better equipped to deal with these infants.”

“Dr. Reitz and the Armstrong nursery staff did a fabulous job. Ava was stable for the first few hours but then began to have pauses in her breathing, called apneas, and drops in her heart rate, called bradycardias, both problems related to prematurity,” says Dr. Riley.

“I respect the skill and professionalism of the Transport Team. They responded promptly, and worked in close partnership with our medical staff. As a pediatrician, I especially appreciated the consideration and kindness they showed to our patient and her family,” says Dr. Reitz.

Above: "We couldn’t be happier with how everything turned out," says Ava’s mother, Tiffany Anderson (second from left) with Jacob Orr (left) and Melissa Riley, MD (right).

Webcam Connects Families With Newborns

Parents and family members can check in on their infants from anywhere in the world — as long as they have an Internet connection — thanks to a new camera system installed in the neonatal intensive care units (NICUs) at Children’s Hospital of Pittsburgh of UPMC and Magee-Womens Hospital of UPMC.

Children’s and Magee are two of only three hospitals in the state to implement this password-protected webcam system called NICVIEW, which gives families a virtual connection to their newborns. It allows family and friends, who are given a unique username and password, to log in and visit the baby.

“When a baby is hospitalized in the NICU, this can be a very frightening time for families and is even more difficult when they can’t be at the hospital with their baby,” says Beverly Brozanski, MD, medical director, Children’s NICU. “Being able to view their newborn is very reassuring and helps parents stay connected with the baby as well as the medical team.”

When Erin Hayes of Coraopolis delivered twin boys, Tristan and Maddox, at Magee, Tristan was transferred to Children’s for further evaluation while Maddox was still at Magee.

“With the help of NICVIEW, I could watch Tristan while I was still at Magee with Maddox. It gave me a huge sense of relief to know that I could just see him,” says Erin.

The cameras are mounted above the baby’s incubator, which provides families access to a live video stream that they can watch from a computer or mobile device at six appointed times throughout the day.

The Snee-Reinhardt Foundation provided funding for NICVIEW.

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The neurologic systems of premature babies also are immature and take time to finish developing, which can have myriad effects on a baby, including apnea and bradycardia. Sometimes premature infants forget to breathe or breathe so shallowly that the heart rate slows down, Dr. Riley says. Ava experienced this often as her body and systems continued to develop. “Sometimes she was able to recover on her own, and sometimes we’d have to intervene,” Dr. Riley adds.

In total, Ava and her family spent about three weeks at Children’s Hospital — three days in the NICU and the remainder of the time in the NICU’s step-down unit — while she continued to grow and develop. She was released from the hospital on Feb. 13.

At Ava’s follow-up appointment on Feb. 27, she had already gained a little more than a pound. “We couldn’t be happier with how everything turned out,” says Tiffany Anderson.

**Transport Team Moves Patients With Care**

When a pediatrician decides to send a baby or child to Children’s Hospital of Pittsburgh of UPMC, he or she calls the Pediatric and Neonatal Transport Team’s 24-hour hotline. The Transport Team is activated and travels to the hospital via ground or air to pick up the child.

In Ava’s case, Dr. Reitz was connected to the neonatologist on call, and the team made the short helicopter flight to Armstrong County Memorial Hospital to pick up Ava. More recently, the team traveled to Osaka, Japan, to bring a 13-month-old to Children’s.

When the Transport Team picks up a baby, they provide parents with the information they’ll need when they come to Children’s Hospital. The Transport Ticket, designed by the Transport Team, includes a map to Children’s and entitles the bearer to free parking for the first day at the hospital. The family presents the Transport Ticket upon arrival to Children’s where they are assisted with obtaining their name badges and taken to the child’s bedside.

Families of babies taken to the Neonatal Intensive Care Unit also receive information about the NICVIEW camera system, which allows individuals with a unique username and password to view their baby from any device that can connect to the Internet. Moms are also given information to help them provide the ever-important breastmilk for their babies.

Melissa Riley, MD, and Kathryn Felmet, MD, are co-medical directors of the Transport Team. Bradley Kuch, BS, RRT-NPS, FAARC, is the director. The team’s 24-hour hotline number is 412-692-5000.

**UPMC Newborn Medicine Program**

The UPMC Newborn Medicine Program provides comprehensive multidisciplinary state-of-the-art care for critically ill newborns throughout the Greater Pittsburgh area and beyond. Neonatal Intensive Care Units (NICUs) are located at Children’s Hospital of Pittsburgh of UPMC, Magee-Womens Hospital of UPMC, UPMC Mercy in Pittsburgh, and UPMC Hamot in Erie, Pa. In addition, the program provides multidisciplinary inpatient care at The Children’s Home & Lemieux Family Center in the Lawrenceville area of Pittsburgh. Emergency referrals, transport, transfer coordination, and consultation can be obtained 24 hours a day.

For emergency referrals, the Communications Center at Children’s Hospital, a pediatric emergency dispatch system, coordinates all interfacility transports and can be reached by calling 412-692-5000. For a consultation with a neonatologist, call Children’s Hospital at 412-692-5325.
Director of Pediatric Surgical Oncology Announced

Marcus Malek, MD, recently joined the Division of Pediatric General and Thoracic Surgery at Children’s Hospital of Pittsburgh of UPMC and also has been named director of Pediatric Surgical Oncology at Children’s Hospital. Dr. Malek is assistant professor of Surgery at the University of Pittsburgh School of Medicine.

As director of Pediatric Surgical Oncology, Dr. Malek will continue to build upon the already strong lines of communication between the Pediatric General and Thoracic Surgery and Pediatric Hematology/Oncology divisions. He will serve as Children’s regional surgical representative to the Children’s Oncology Group, which will bring the most cutting-edge surgical protocols to Children’s.

Dr. Malek recently completed a pediatric surgical oncology fellowship at Memorial Sloan Kettering Cancer Center, which armed him with techniques to approach the most difficult chest and abdominal tumors. Often, a complete resection in these cases can make a significant difference in patient outcome. At Children’s, he completed both a surgical research fellowship and a fellowship in Pediatric Surgery.

He will see patients at Children’s main campus in Lawrenceville and at Children’s South, Bethel Park. For referrals, please call the Division of Pulmonary Medicine, Allergy, and Immunology at 412-692-5630.

New Sleep Evaluation Center Co-Director Named

Hiren Muzumdar, MD, recently joined the Division of Pulmonary Medicine, Allergy, and Immunology at Children’s Hospital of Pittsburgh of UPMC and also has been named co-director of the hospital’s Pediatric Sleep Evaluation Center. Dr. Muzumdar is associate professor of Pediatrics at the University of Pittsburgh School of Medicine.

Dr. Muzumdar comes to Pittsburgh with his wife, Radhika Muzumdar, MD, newly appointed chief of the Division of Pediatric Endocrinology and Diabetes at Children’s Hospital. Previously he was at The Children’s Hospital at Montefiore, Bronx, N.Y., where he was director of the Technology Dependent Center, medical director of the Sleep Laboratory, and pulmonary and sleep physician for the Pediatric Bariatric Surgery Program.

Dr. Muzumdar has particular interest in patients with obstructive sleep apnea, care of technology-dependent children, and respiratory disturbances in children with Rett syndrome, a rare disorder affecting mostly girls. As co-director of the Pediatric Sleep Evaluation Center with Sangeeta Chakravorty, MD, he will emphasize the management of complex pulmonary issues such as airway problems, ventilator-dependent children, and children with hypoventilation.

He will see patients and do surgery at Children’s main campus in Lawrenceville and at Children’s South, Bethel Park. For referrals, please call the Division of Pulmonary Medicine, Allergy, and Immunology at 412-692-5630.

Division of Pediatric Endocrinology Gets Chief

Radhika Muzumdar, MD, has been named chief of the Division of Pediatric Endocrinology at Children’s Hospital of Pittsburgh of UPMC and associate professor of Pediatrics and Cell Biology at the University of Pittsburgh School of Medicine. She comes to Pittsburgh from Albert Einstein College of Medicine and The Children’s Hospital at Montefiore in Bronx, N.Y.

Dr. Muzumdar brings to Children’s expertise in basic research in endocrinology and is supported by National Institutes of Health (NIH) R01 funding as the principal investigator for her seminal research on the role of insulin-like growth factors and novel peptides that regulate glucose homeostasis during aging. Dr. Muzumdar is a member of the Society for Pediatric Research and has been elected to leadership roles in national and international subspecialty societies.

She has been recognized for her teaching abilities and mentoring in clinical medicine and biomedical research and will lead Children’s NIH T32 fellowship training grant.

Dorothy Becker, MBBCh, who served as chief from 1996 through 2013, remains on the faculty of the division and is focusing on her internationally renowned research on Type 1 diabetes.

Dr. Muzumdar will see patients at Children’s main campus in Lawrenceville. To refer a patient, please call the Division of Pediatric Endocrinology at 412-692-5170.

Announcing NEW MEDICAL STAFF

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Jon Watchko, MD, UPMC Newborn Medicine Program and professor of Pediatrics at the University of Pittsburgh School of Medicine, had a first author paper in the *New England Journal of Medicine*, titled “Bilirubin-Induced Neurological Damage: Mechanisms and Management Approaches.” The paper appeared in the Nov. 21, 2013 issue.

Ian Pollack, MD (left), chief, Division of Pediatric Neurosurgery and Walter Dandy Professor of Neurosurgery at the University of Pittsburgh School of Medicine, was keynote speaker at the Pediatric Neuro-Oncology Symposium sponsored by the MD Anderson Children’s Cancer Hospital in collaboration with Children’s Memorial Hermann Hospital in February 2014. His keynote lecture was “Vaccine Therapy for Childhood Gliomas.” He also moderated the Neurosurgery Session and gave a second lecture on “Neurosurgical Approaches in Children with Brain Tumors.” Ashok Panigrahy, MD (right), chief, Department of Pediatric Radiology and associate professor of Radiology at the University of Pittsburgh School of Medicine, lectured on “Advanced Brain Tumor Imaging in Children.” Drs. Pollack and Panigrahy are part of the Brain Care Institute at Children’s Hospital.

Paul Szabolcs, MD, chief, Division of Blood and Marrow Transplantation and Cellular Therapies and professor of Pediatrics and Immunology at the University of Pittsburgh School of Medicine, chaired the (PEDS) Emerging Issues in Cord Blood Transplantation Session at the 2014 BMT Tandem Meeting in Grapevine, Texas. During the Pediatric BMT Program Session, he gave a presentation titled “How and When to Use Serotherapy After Cord Blood Transplantation.” He also presented “Immune Recovery in Pediatric Transplant Recipients” in a session about emerging concepts in immune reconstitution.

Mark Vander Lugt, MD, Division of Blood and Marrow Transplantation and Cellular Therapies and assistant professor of Pediatrics at the University of Pittsburgh School of Medicine, presented at the 2014 BMT Tandem Meeting in Grapevine, Texas. His presentation, part of the Best Pediatric Abstracts Session, was titled “Reduced Intensity Conditioning Regimen Combined With Single Unit Cord Blood Transplantation Is Effective and Safe for Children With Inherited Metabolic Disorders and Combined Immunodeficiency Diseases.”

Juan Celedón, MD, DrPH, chief, Division of Pulmonary Medicine, Allergy, and Immunology and professor of Medicine at the University of Pittsburgh School of Medicine, recently received the Claude Lenfant Award for Outstanding Contributions in Asthma from Interasma, the Asthma Global Association. Interasma is an international health organization focused on all aspects of asthma that bridges the gap between academia and clinical practice.

Kyle Soltys, MD, abdominal transplant surgeon, Hillman Center for Pediatric Transplantation at Children’s Hospital of Pittsburgh of UPMC, received the 2014 Tribute to Excellence Award from the American Liver Foundation, Allegheny Division, at an event on March 7, 2014, for his dedication to providing care for pediatric patients who have liver disease and acute liver failure. He is a Region 2 Review Board representative and is actively involved in Studies in Pediatric Liver Transplantation, an international registry of pediatric liver transplantation, and the Intestinal Transplantation Society.

Amy Cashdollar, RN, MSN, clinical director, Heart Institute, Dialysis and Infusion Centers, Ambulatory Quality and Patient Safety, received the 2014 Mary Ann Scully Excellence in Nursing Award at the Pittsburgh Heart Ball on Feb. 22, 2014. Presented by the American Heart Association, Allegheny Division, the award recognizes her accomplishments during more than two decades in cardiovascular nursing.
Children's Expands Telemedicine Program for Pediatric Emergencies

When a child ends up in an emergency room at one of Pennsylvania's rural hospitals, every second counts. The emergency doctor has a tough decision to make — treat the child there with limited pediatric expertise or send him or her to Children's Hospital of Pittsburgh of UPMC, often hundreds of miles from home.

Children's Tele-ED, Critical Care Transport, Tele-NICU, and Tele-Education programs, in collaboration with the University of Pittsburgh Schools of the Health Sciences, utilize telemedicine to make the decision easier. The joint program, called "Optimizing Utilization and Rural Emergency Access for Children," or OUTREACH, was launched in 2013 to make telemedicine more effective in pediatric emergencies.

The OUTREACH program has grown to eight rural hospitals today, including:
- Armstrong County Memorial Hospital in Kittanning, Armstrong County
- Cole Memorial Hospital in Coudersport, Potter County
- Somerset Hospital in Somerset, Somerset County (services start July 2014)
- Uniontown Hospital in Uniontown, Fayette County
- UPMC Northwest in Seneca, Venango County
- UPMC Horizon in Farrell, Mercer County
- UPMC Altoona in Altoona, Blair County (services start July 2014)
- The Washington Hospital in Washington, Washington County

“Our goal is to reduce unnecessary transfers while providing the same level of world-class service using telemedicine that our patients receive when they come directly to the Children's campus,” says Harun Rashid, vice president of Global Health Services and chief information officer at Children's Hospital.

In 2013, 64 percent of Children's Tele-ED consults resulted in the patient being discharged from his or her community hospital.

According to Marlene Wurst-Smith, MD, FAAP, a pediatrician located in Coudersport, Pa., the first pediatric patient at Cole Memorial to be evaluated by an emergency room provider at Children's Hospital by telemedicine was discharged to his own home. "Our patient was relieved to not have to travel four and a half hours to Pittsburgh, and I was reassured that his presenting complaint did not require further work-up,” she says.

The OUTREACH project is paid for with a nearly $1 million grant from the U.S. Department of Health and Human Services Health Resources and Services Administration. It is designed to address critical deficiencies in pediatric emergency care reported in the Institute of Medicine's "Emergency Care for Children: Growing Pains."

For more information, contact Perry Ankney, director, Regional Telemedicine Services, at 412-692-6771 or perry.ankney@chp.edu.

Pediatric Hem/Onc Society Accomplishments

Children's Hospital physician is ASPHO’s president

A. Kim Ritchey, MD, is coming to the end of his two-year term as president of the American Society of Pediatric Hematology/Oncology (ASPHO). The society’s mission is to promote optimal care of children and adolescents with blood disorders and cancer.

Recent accomplishments of the ASPHO under Dr. Ritchey’s leadership include:

- Partnering with the American Academy of Pediatrics to create a subspecialty-specific advocacy agenda for the pediatric hematology/oncology community
- Growing ASPHO awareness, outreach, and membership in Latin America
- Establishing a professional mentoring program for pediatric hematologists/oncologists who are early in their careers

Dr. Ritchey will continue to serve on ASPHO’s board and executive committee as immediate past president. He is former chief of the Division of Pediatric Hematology/Oncology at Children's Hospital and currently is vice-chair of Clinical Affairs in the Department of Pediatrics at the University of Pittsburgh School of Medicine.

Save the Date

Third Annual Adolescent Health Research Symposium

Ethical Considerations in Adolescent Health Research

Thursday, May 22, 2014
8 a.m. to 2 p.m. (poster session 12:30 to 2 p.m.)

Contact Elizabeth Miller, MD, PhD, with questions at 412-692-8504 or elizabeth.miller@chp.edu.
No matter where your patients are in the tristate region, Children's Hospital of Pittsburgh of UPMC is their children’s hospital. From Altoona to Zelienople and all points in between, Children's Hospital has the medical and surgical subspecialists and individualized, family-centered care your patients and their families have come to rely on. Visit www.chp.edu.