A Letter of Gratitude

To the Nursing Staff at the Goryeb Children’s Hospital,

I can’t tell you how terrific you all were when my daughter, Carolyn, was in for tests. It was a nightmare for us, but you were all caring and made it a little easier. One of the things I appreciated most was that all of the nurses, doctors, etc., talked to Carolyn about what they were going to do – blood pressure, temperature, etc. – and said they would tell her when it would hurt. She really trusted you. Carolyn thought you were all nice and pretty – she now wants to be a nurse. I always thought so highly of Morristown [Memorial] Hospital – now my opinion is even greater.

Thank you all again.

Laura Dagostino
Randolph, New Jersey

SPOTLIGHT ON Complementary Therapies
Philanthropy Funds Care for the Whole Child

The patient thrashing about was a 12-year-old boy with autism, Down’s syndrome and attention deficit hyperactivity disorder who was suffering from recurrent vomiting. To find the source of the boy’s stomach problems, the doctor and his team tried in vain to measure esophageal muscle contractions by inserting a tube through his nose and having him swallow it. With each attempt, the boy’s distress gathered more force.

“Every time we went to put the tube in his nose he went ballistic,” says Nader Youssef, MD, director of the Center for Pediatric Irritable Bowel and Motility Disorders at Goryeb Children’s Hospital. “We brought in a music therapist, and she saved the day. Initially, she strummed a guitar to his heartbeat and then played a therapeutic song to get him to relax. He focused intently on her, and we were able to complete the task in 30 minutes.”

The music therapist, Megan Calabro, says the music changed the tone of the room instantly, calming not only the boy but the nurses and doctors as well. “I saw the staff’s faces, and they were amazed,” says Ms. Calabro. “This child was not able to effectively interact and calm down, yet he immediately came into the music.”

While some may dismiss music therapy as a fringe service, all involved in the above encounter can testify what a crucial role the music played that day two years ago. It’s certainly a priority at Goryeb Children’s Hospital, where Ms. Calabro works in the Department of Child Life. Programs like this one set Goryeb apart from other children’s hospitals. Here, children get the best medical care and services to promote their whole well-being, such as relaxation techniques to reduce pain; talk therapy to lessen anxiety stemming from a chronic diagnosis; and education to learn how to better manage a chronic condition.

Many of these innovative strategies, however, are not covered by insurance and can become an added burden for families already reeling from medical bills. To keep these

“The problem with our medical care system is that insurance will pay to treat diabetes’ complications, but not for their prevention.”

—Dr. Harold Starkman

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Pediatric Ambassador Program

Braeden Reinoso

When your child is diagnosed with diabetes, it can turn your world upside down. Checking blood levels, administering shots, managing dietary restrictions, and ensuring everyone in your child’s life understands the “highs” and “lows” of diabetes and what to do can be overwhelming. According to the American Diabetes Association, about 176,500 people 20 years or younger have diabetes with approximately one in every 400 to 600 having type 1 diabetes.

Eleven-year-old Braeden Reinoso has been on a diabetes regimen since he was diagnosed at 18 months old. Though the warning signs can be difficult to spot for any parent, Pam Reinoso knew something was not right when her little boy refused to eat and only wanted to drink.

“He was very verbal at this age and kept declaring ‘no food, water Mommy,’” recalls Mrs. Reinoso. “When Braeden was diagnosed, I was extremely overwhelmed, frightened, and at a loss as to how we could proceed with a normal life. I worked over one-and-a-half hours away from home and, with a small child who needed constant monitoring and whose verbal and cognitive skills were not yet fully developed to understand the ‘highs’ and ‘lows’ of diabetes, I was in a panic.” Ten years ago, not many very young children were diagnosed with diabetes, and the experience on how to treat them was limited.

The next few years were spent chasing around a toddler and holding him down for shots or extra food. Waking up around the clock to check his glucose levels and constantly watching to make sure he didn’t have any severe episodes became part of the Reinosos’ daily routine. “Those months and years were a whirlwind of learning about diabetes, fearing its impact and putting together a protocol,” recalls Mrs. Reinoso.

In 2001, the Reinosos were referred to the Goryeb Children’s Hospital where Harold Starkman, MD, had put another young patient on an insulin pump and would do so for Braeden. Over the years, the Reinosos have seen endocrinologists, nutritionists and staff at the Child Development Center. “The Goryeb Children’s Hospital has really stepped up to the plate bringing in services to help families with very young children,” says Mrs. Reinoso. “It is extremely child friendly and a pleasant place to visit.”

“The BD Diabetes Center has education classes, social workers, nutritionists, support groups, lists of resources, including babysitters and parent-to-parent help, and other tools that help ease the burden of a disease that requires 24/7 awareness.”

—Pam Reinoso

While Braeden is limited in how far he can be from medical care or a parent, he leads a relatively normal life, taking tennis and trumpet lessons and participating in summer camp programs.

In addition to having a host of doctors and nurses in his court, Braeden has had the love and support of his parents and older brother, Loren. Having such a close relationship with his little brother and knowing as much about diabetes as Braeden, Loren got involved with the Hoop-A-Paluza fundraiser this past fall through the Morristown Memorial Health Foundation. He sent letters to all the friends and family he thought might contribute, helped “design” his website and kept in contact with donors through email. On the day of the event, Loren’s skill at the free throw line raised approximately $1,700. This funding can help to broaden the services available to patients of the BD Diabetes Center, like Braeden, for years to come.

NEW DOCS on the BLOCK

Clinical programs at Goryeb Children’s Hospital continue to grow with the recruitment of new subspecialists to the Department of Pediatrics. Recently, Susan Saleeb, MD, a pediatric cardiologist, joined the Children’s Heart Center. Dr. Saleeb completed a four-year pediatric cardiology fellowship at Children’s Hospital, Boston, and has particular interest in fetal cardiology and resident education. She has expanded the fetal cardiology service with evaluations now conducted at both Morristown Memorial and Overlook campuses, allowing for parental education, preparation and surgical consultation as needed with the collaboration of our perinatology and neonatology colleagues at Atlantic Health and cardiovascular surgical colleagues at Children’s Hospital of New York.
programs afloat, Morristown Memorial must turn to outside sources. This development marks a new age of philanthropy, where psycho-social services are funded by donors to complement medical treatments.

“If donors funded a child life specialist or another music therapist, I cannot tell you how many children it would help,” says Lisa Ciarrocca, child life manager at Atlantic Health. “The hospital has been as generous as it can be already, but there’s just not enough money to grow the program.”

Mrs. Ciarrocca oversees Ms. Calabro as well as three child life specialists who work in the inpatient units, helping kids manage their anxiety and fears. If funds allowed, Mrs. Ciarrocca would hire another child life specialist, increase her staff’s time in the emergency department and expand the program to outpatient units.

At Dr. Youssef’s center, one of only 10 nationwide that offers specialized testing for children suffering from rare disorders of bowel function, he not only uses music therapy, but he also sends his patients to Atlantic Rehabilitation Institute to learn meditation, guided imagery and massage to manage chronic pain. Rarely covered by insurance, these services were initially funded through a grant. Now, the center must find new funding because the out-of-pocket expense deters families from seeking this clinically proven help.

Like Dr. Youssef, Joel Rosh, MD, director of pediatric gastroenterology at Goryeb, believes in a holistic approach to medical care. In fact, he wants every one of the 500 pediatric patients at the Pediatric Inflammatory Bowel Disease (IBD) Center to undergo therapy sessions with a team specifically trained to deal with these diseases. IBD causes inflammation of the gastrointestinal tract and is most commonly divided into two sub-types: Crohn’s disease and ulcerative colitis. Patients with IBD can suffer from embarrassing episodes, such as frequent diarrhea, stomach cramps and even loss of bowel control.

Dr. Rosh has identified a team of psychiatrists, psychotherapists and social workers who have been very helpful in working with his patients and their families. Children, he says, need help dealing with social situations, like what to tell friends and teachers, as well as how to deal with anxiety surrounding IBD.

“It’s the wrong model of medicine to diagnose a chronic medical condition and expect the patient to know how to handle it,” says Dr. Rosh. “If a kid wants to go skiing, you don’t take him to the top of the mountain, abandon him and say, ‘Go ski.’ You give him lessons. It’s the same with the diagnosis of a chronic medical condition: You don’t say, ‘OK, go have Crohn’s.’ You have to give training to patients and parents about what it means and how to deal with it.”

Because insurance rarely pays for psycho-social support, all too many of the patients that he refers are not seeking the needed therapy. “We fail every single patient who doesn’t get help,” he says. “But for many there’s no other way to pay for this except through philanthropy.”

That’s the route Harold Starkman, MD, is taking as director of the BD Diabetes Center for Children and Adolescents at Goryeb, which sees over 1,200 patients and their families annually. He’s seeking funds to start a Diabetes High Risk Intervention Program geared to children and adolescents, often underprivileged, with type 1 and type 2 diabetes.

“This group accounts for 90 percent of hospital readmissions and is at risk for early mortality; many die by age 40.”

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—Dr. Joel Rosh

he says. “Diabetes requires a complex medical regimen, and many don’t have the proper family support. We need to empower families to take charge of a child’s diabetes care.”

In the program, families, caregivers and patients will attend weekend retreats to learn about diabetes management and improve family communication and problem-solving skills. Next, a BD Center staff member will visit a patient’s home to provide an assessment, treatment goals and interventions tailored to the family. The BD Center will also help families interpret blood sugar readings and adjust their regimen.

While the BD Center has secured some initial funding, more is needed to start the program this fall. “The problem with our medical care system is that insurance will pay to treat diabetes’ complications, but not for their prevention,” he says. “We need effective preventative treatment programs, especially for those at high risk. It’s an investment in our kids’ future.”

To help fund complementary services, please call Geraldine Kling or Noelle Deihl-Harteveld at 973-593-2431.
Many people give of their time, talent and treasure to put a smile on a child’s face at the Goryeb Children’s Hospital. Listed below is a sampling of the many donors who give to make life better for children and families who rely on us for help.

The New Jersey Youth Chorus raised over $2,300 for the BD Diabetes Center for Children and Adolescents at Goryeb during their winter concert at the Community Theatre at Mayo Performing Arts Center in Morristown. More than 100 choristers, from almost 40 towns in six counties of New Jersey, performed during the two-hour concert.

Victoria Heskett hosted an informational tea at her home this winter, attracting more than 40 women who wanted to learn more about Goryeb. Mrs. Heskett’s guests donated gift cards, arts and crafts, and toys for the Gagnon Pediatric Emergency Center’s Treasure Chest.

Discover the Smile Foundation made a donation of “hug pillows” in honor of Timothy Chen, MD, a radiation oncologist at the Carol G. Simon Cancer Center. The hug pillows are designed to help ease children’s experiences in the hospital and provide a positive memory of the people who touched their lives during a hospital stay.

The beautifully refurbished Goryeb lobby has come about through the tireless efforts of Marge and Joe Goryeb, Dave and Jill Farris, and a team of hospital staff. The Goryeb’s also donated a statue of a boy and a girl reading, and the Farris’s donated an outdoor fountain that is scheduled to be installed this spring.

The staff at Morristown Memorial’s Children’s Corner, the day care center for children of hospital employees, built two benches for the Goryeb Children’s Hospital garden in March. Guided by artists from Jumpstart, an arts consulting firm, 30 staff built and decorated the benches with hand-painted flowers, frogs and trains hoping to brighten patient visits. The materials were funded by Joe and Jeanne Goryeb.

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If you are interested in hosting an event or promotion to benefit Goryeb Children’s Hospital at Morristown Memorial Hospital, please contact Eileen Heltzer, director of annual giving, at 973-593-2412 or eileen.heltzer@atlantagealth.org.