



For by Him all things were created ... and in Him all things hold TOGETHER.

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Colossians 1:16-17

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To continue the teaching and healing ministry of Jesus Christ.

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Loma Linda University Children's Hospital continues the healing ministry of Jesus Christ, focusing on the physical, mental, emotional and spiritual needs of children and their families. Through valued professionals, staff, community partners and friends, we seek to enhance the lives of our community's children by delivering on the promise of a healthier future today. Message from the Foundation

2016 Giving

Making an Impact Where it is Needed Most

Researcher Seeks Life-Saving Treatments for Oxygen-Starved Newborns

Pediatrician Gives Traumatized Kids a Fighting Chance

Loma Linda University Children's Hospital Physician Helps Discover the Key to Fighting Deadly Abdominal Disorder in Children

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Scott Perryman Senior Vice President and Administrator President, Foundation Loma Linda University Children's Hospital



Mary Ann Xavier Foundation Board Chair

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Thank you for making today bright for our children and for standing with us for their

best tomorrow.

Message from The the Foundation



For nearly 25 years, Loma Linda University Children's Hospital has been the provider of hope and healing to children and their families in the Inland Empire communities. This is our responsibility and our privilege and more than that, it is fundamental to our mission. Every day, our care team and staff seek to enhance the lives of the children by delivering on the promise of a healthier future today.

Loma Linda University Children's Hospital is the sole provider of advanced pediatric health care to one fourth of the landmass of California, and treats many thousands of young patients each year. We are also part of an academic health institution with vast medical and educational resources. These combined factors uniquely position Loma Linda University Children's Hospital to participate in and develop medical research techniques with farreaching and life-changing results.

The stories that you are about to read in our 2016 Annual Report capture the vision and passion of our medical professionals.

Our physicians aspire to more than healthy outcomes; they strive for the best outcomes so that children can go home whole and lead quality lives. Our teams dream of new and better ways to heal, driven by a passion to improve the lives of all children.

These people are the game-changers of Loma Linda University Children's Hospital, and together with the infrastructure that Loma Linda University Health provides, they can do amazing things when they have the support.

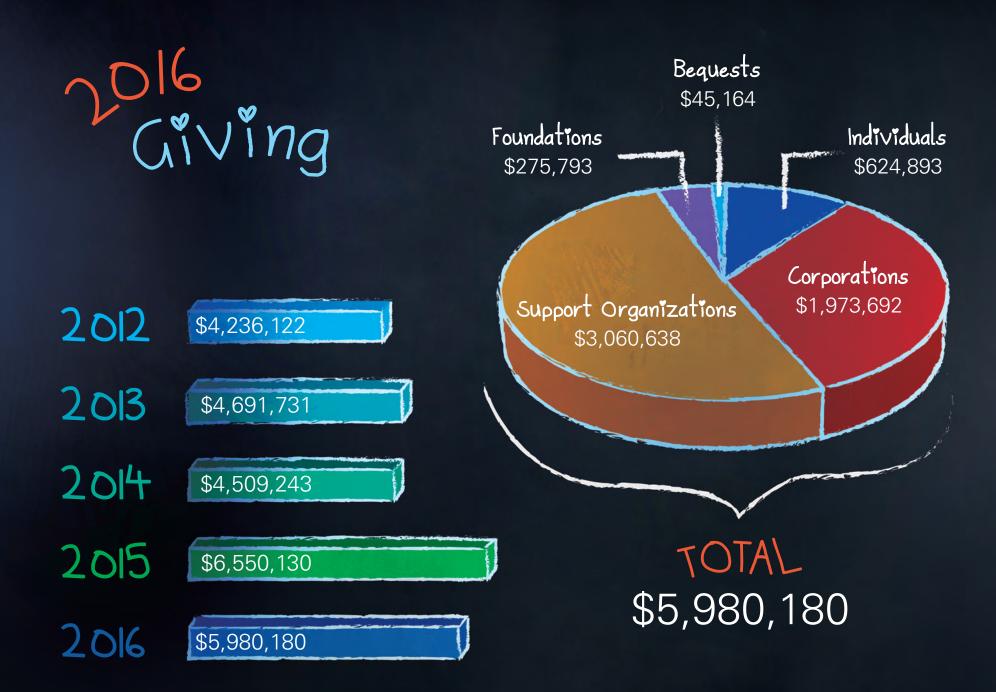
Thanks to your generosity, Loma Linda University Children's Hospital has that support. Because of the involvement of the community yesterday, today and tomorrow, Loma Linda University Children's Hospital continues to provide excellent care to thousands of children each year – through teaching, treatment and research.

Thank you for turning these dreams into reality.

Mary Sur Janer

Scott Perryman

Mary Ann Xavier



Making an Impact Where it is Needed Most

How the use of a smartphone may save a baby's life.

At Loma Linda University Children's Hospital (LLUCH), babies receive the best care possible as they are monitored from the time they are in utero, growing from the size of a seed, to a grape, to an apple, until birth. However, the care available to expectant mothers and their babies is not something found across the globe.

While doctors at LLUCH are dedicated to the patients here in the Inland Empire, they are also working to help a large portion of the world's population where health care is either not available at all, or available at only a very basic level.

Dr. Arlin Blood, director of research in the division of neonatology, has made it part of his mission to fill that gap through a research project in collaboration with RTI International and Duke University, with funding from the Bill and Melinda Gates Foundation.

"To monitor and care for a fetus, we rely on ultrasound technology to see what's going on inside a mother's womb," Blood says. "But in large areas of the world, such as rural Africa and India, such resources are not available. Premature births are potentially high in these areas, and these babies are likely not getting the treatment they need."

Since summer 2016, LLUCH has been one of three hospitals working on the SOLVE-GA (Smartphone Ophthalmoscope Lens Vascularity Estimated Gestational Age) research project. The other two hospitals are at the University of North Carolina at Chapel Hill and the University of Iowa.

"Premature babies need specialized care, but if we don't know how early the baby is, it is difficult to determine whether such care is needed," Blood says.

For example, Blood says that if a baby is born earlier than 28 or 29 weeks, the lungs are underdeveloped and they need special treatment to assist with breathing. Premature babies also have unique nutritional needs, he says.

According to Blood, the study looks at whether a picture of a newborn's eyes taken on a smartphone can help clinicians determine how prematurely the baby was born.

Blood explains that during the last trimester of development, babies have a network of blood vessels across the eye, which disappear gradually over time. "At around week 36 of gestation, these vessels are completely gone. So, the amount of blood vessels in the eye gives us some indication of what stage of development the baby is at."

Using a special lens that attaches to a smart phone camera, an ophthalmoscope, a photo of the eyes can be evaluated with special software that will determine the gestational age of a premature baby. Over the last year, those involved in the study, including Blood, have taken hundreds of photos of the eyes of neonates at various gestational ages in an effort to develop and perfect the software that could potentially save the lives of babies across the globe. "Our goal is to get photos from over 400 babies," Blood says.

According to Blood, the specialized device would be less expensive and ultimately easier to use than ultrasound.

"Compared to the tens of thousands of dollars it would cost to implement and operate ultrasound machines in these underserved areas of the world, the ophthalmoscope only costs about \$600, and it can be used with a smart phone application."

Blood and the team of researchers are hopeful the Bill and Melinda Gates Foundation would fund the implementation of the device in an effort to continue studying preterm births.

Blood affirms that "this study has the potential to make a large overall impact on the care of preterm infants where it is needed the most."



Researcher Seeks Life-Saving Treatments for Oxygen-Starved Newborns

Once-maligned molecule is now saving lives thanks to groundbreaking research.

A quick glance around the office of researcher Arlin Blood, PhD, reveals that the associate professor at Loma Linda University School of Medicine loves children. Family photos fill a large frame on one wall while paintings, created in the vivid style of very young artists, adorn the others.

"The long-term goal is to help newborns survive and thrive ..."

Blood is devoted to children professionally as well. For years, he has been investigating a molecular compound that prevents serious injury and even death in vulnerable newborns.

The intriguing journey of nitric oxide (NO), from evil villain to benevolent protector, began in the mid-1980s when most researchers thought of it as a poison. In the latter part of that decade, however, researchers discovered that the human body actually manufactures NO to help its more than 35 trillion cells function.

Almost overnight the once-maligned molecule attained heroic status. Not only did three prominent researchers win the Nobel Prize for their work with nitric oxide, but Science Magazine christened it 1992's "Molecule of the Year." Physicians soon discovered that precise doses of NO, administered into the airways of babies born with pulmonary hypertension, cause constricted blood vessels to relax and open up, allowing babies to breathe freely. Since the halflife of the gas in blood is about two thousandths of a second, it vanishes almost immediately. "You get a nice effect on the lungs without too much effect on the rest of the body," Blood says.

New research is leading to exciting discoveries about how body stores NO in reserves by converting it into two related compounds: nitrite and nitrate. Blood says these chemicals, once thought to be inactive byproducts of NO, are kept ready for use whenever needed.

Adults have bacteria in their mouths that convert nitrate — found in foods like leafy green vegetables and beets — into nitrite. The body can then convert nitrite back into NO. "Babies, however, lack these bacteria," Blood says. "As a result, their NO reservoirs are largely depleted."

He adds that although nitrate and nitrite are both beneficial, nitrite is the star. It lowers blood pressure, enhances exercise performance and, preclinical studies have found, protects against stroke, heart attack and other dangerous conditions. Blood is currently investigating nitrite's role in preventing brain damage and stroke due to oxygen deprivation during pregnancy and delivery. Neonatal encephalopathy, as the condition is known, is the leading cause of brain injury in newborns. Tragically, it affects thousands of infants annually and often results in death or long-term disorders such as epilepsy, learning disabilities and cerebral palsy.

Blood acknowledges that further studies on tissue samples are needed, but hopes his research will produce new options for protecting babies against brain damage, heart disease and stroke. "The long-term goal is to help newborns survive and thrive," he says.

Research is a slow, daunting process, but Blood is driven to do it. The art on his walls reminds him of why.

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Ariane Marie-Mitchell, MD, PhD, MPH

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Pediatrician Gives Traumatized Kids a Fighting Chance

Screening for adverse childhood experiences to prevent chronic diseases.

A Loma Linda University Children's Hospital pediatrician is working to level the playing field for traumatized kids.

Although adverse childhood experiences, also known as ACEs, are not a guarantee of poor health outcomes, they can increase the odds of poor health by between 200 to 400 percent. Ariane Marie-Mitchell, MD, PhD, MPH, a preventive care specialist, says children who experience three or more ACEs during their childhood are at increased risk for alcoholism, cancer, depression, diabetes, heart disease, illicit drug use, lung disorders, obesity, sexually transmitted diseases, smoking, stroke and suicide.

The goal of screening for ACEs in pediatric practice is to change the odds to help traumatized kids grow up into healthy, whole individuals. To do that, Marie-Mitchell instituted the use of a Whole Child Assessment tool to screen all patients in the outpatient pediatric clinic at SAC Health System in San Bernardino. She says more than 2,000 children have been screened to date.

The Whole-Child Assessment allows physicians to assess whether a child has been exposed to any of the 10 common categories of ACEs:

- Child emotional neglect
- Child physical abuse

- Child physical neglect
- Child psychological abuse
- Child sexual abuse
- Domestic violence
- Incarceration of a household member
- Mental illness in the household
- Single, divorced or separated parenting
- Substance abuse in the household

Marie-Mitchell and her research team are also examining the utility of a saliva test and other biomarkers to identify stress levels in at-risk children. "If you can identify biomarkers that show the child is under physiologic stress, then you have a metric to evaluate whether an intervention is helping the child grow up healthier," Marie-Mitchell said.

Physicians at SAC provide brief counseling and support to parents and, when needed, refer at-risk children and their families to local community resources. Marie-Mitchell is working with patients, providers and other community members to conduct research focused on determining which interventions can have the greatest success in reducing the damage of ACEs.

Baby Liane was brought for a checkup when she was two weeks old. She seemed

fine, so the primary care physician gave her parents advice about feeding and sleeping patterns and sent them home.

Three weeks later, her parents took Baby Liane to an urgent care center, concerned she was crying too much. After finding nothing of concern, the urgent care provider reassured the parents and sent them home.

The next week, Baby Liane was admitted to the hospital blind and brain damaged from being shaken. She also had multiple bone fractures.

Marie-Mitchell has two questions for Baby Liane's physicians. "Did any of the doctors who met with the family — from the obstetrician to the pediatricians in the primary care and urgent care offices screen for ACEs?" she asks. "And if they had, would Baby Liane be happier and healthier?"

The prevention of similar tragedies in the future requires cross-sectoral collaboration between clinics and community partners. To this end, Marie-Mitchell recently launched the ACEs Task Force of San Bernardino County and is working with officials of Riverside County Public Health to launch a similar initiative.

Marie-Mitchell hopes ACEs screening will soon be routinely practiced at every hospital and pediatric clinic in the world.



Loma Linda University Children's Hospital Physician Helps Discover the Key to Fighting Deadly Abdominal Disorder in Children

Gold standard testing procedure developed at LLUCH.

Seventeen years ago, the physician who would become one of the world's leading authorities on a deadly abdominal disorder had never heard of the condition.

During her pediatric fellowship, J. Chiaka Ejike, MD, director of the fellowship program in pediatric critical care medicine at LLUCH, encountered a patient who failed to respond to treatment for severe constipation. Ejike's mentor said the problem might be caused by abdominal compartment syndrome, or ACS. "I looked it up and found very little in the literature with regards to children," Ejike said.

ACS occurs when the abdomen becomes distended due to abdominal pressure from an infection, trauma or other causes. ACS patients may lose good lung and heart function and the ability to urinate. In extreme cases, physicians must surgically open the intestinal wall to relieve pressure in the abdominal space.

Before Ejike, there was no clear, reliable way to measure the pressure inside a pediatric patient's abdomen, which meant it was hard to recognize ACS in time to prevent permanent organ damage or even death.

After several tests, Ejike and her colleagues determined the right volume of saline

solution to introduce — through a tube placed in a child's bladder — to measure abdominal pressure. This led to the key discovery that ACS can occur at lower pressures in kids than in adults. Ejike published a paper in 2008 describing how to measure abdominal pressure and diagnose ACS in children.

Neither she nor co-authors, Khaled Bahjri, MD, MPH, and Mudit Mathur, MD, could have imagined the impact the paper would have. Since then, physicians around the world have been using this procedure to save lives. The paper was adopted by the World Society for the Abdominal Compartment and has become the gold standard, driving new international guidelines for monitoring abdominal pressures in children.

While the acclaim is nice, what matters to Ejike is that many children are alive today because of her research.

Fifteen-year-old Keely Proctor, a sophomore at Redlands High School, is one of them. Proctor was transported to LLUCH, where Ejike was a member of the pediatric intensive care unit team, after a 35-foot fall from a ski lift in second grade. The accident caused devastating injuries: one kidney was ruptured, she was hemorrhaging from the liver and other organs, and her spleen was cracked.

Proctor required multiple surgeries, and Ejike closely monitored her intra-abdominal pressure to assess for the development of tertiary ACS; a form of the disorder that can develop when a patient's abdominal wound is left open, as Proctor's was, to prevent pressures in the abdomen from rising to dangerous levels and causing damage to other internal organs. "We also monitored her intra-abdominal pressures after she was successfully closed," Ejike says.

Proctor doesn't remember her horrifying fall or the long days in the hospital. "All I remember is coloring in the playroom," she says. Today, despite chronic kidney disease, she doesn't have any pain. "I do have to drink a lot of water," she says.

Her mother, however, will never forget how Ejike fought to restore her daughter to health and wholeness.

"Dr. Ejike was amazing!" says Terry Proctor. "She was so forward thinking and aggressive. She is one of the huge reasons Keely is alive today."

Loma Linda University Children's Hospital

Juan Garcia, patient

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Gregory Aaen, MD

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When Multiple Sclerosis Attacks Children and Teens

Symptoms can start years ahead of a diagnosis.

Juan Garcia was 12 years old when the symptoms began.

At first, it was just blurry vision and eye pain. Then he started feeling exhausted much of the time. One day, he woke up completely numb on one side of his body. Later that day, he tripped and fell twice while running in PE class.

With youthful optimism, Garcia convinced himself it was only a passing phase. "I'm going to get better," he thought.

Five years and countless doctor visits later, he finally learned the cause of his strange symptoms: multiple sclerosis (MS). Unbeknown to Garcia, the chronic Fortunately, the Pediatric Multiple Sclerosis Center at Loma Linda University Children's Hospital — one of only 12 sites in the nation listed with the Network of Pediatric MS Centers and funded by the National Multiple Sclerosis Society — is located just 35 miles from Garcia's home in Oak Hills, California.

Gregory Aaen, MD, director of the center, told Garcia the disease usually strikes after puberty. He said symptoms can include weakness and fatigue; blurry vision and pain in one eye; numbness and tingling; poor concentration and memory; difficulty in walking, maintaining balance and controlling bodily functions; and seizures.

"Do not lose hope. Do not let the sickness take over your life. Never lose sight of what you want to do."

inflammatory and degenerative disease had been attacking his central nervous system for years, disrupting communication between his brain and body.

Garcia had thought MS was an adults-only disease, but he soon learned that between 8,000 and 10,000 children and teens in the United States have the disorder.

Aaen informed Garcia that treatment consists of injectable drugs, pills and intravenous infusions. "Most of the time, we use injections because they have been out for approximately 25 years, and published case studies show they are just

as efficient in children as adults," Aaen says.

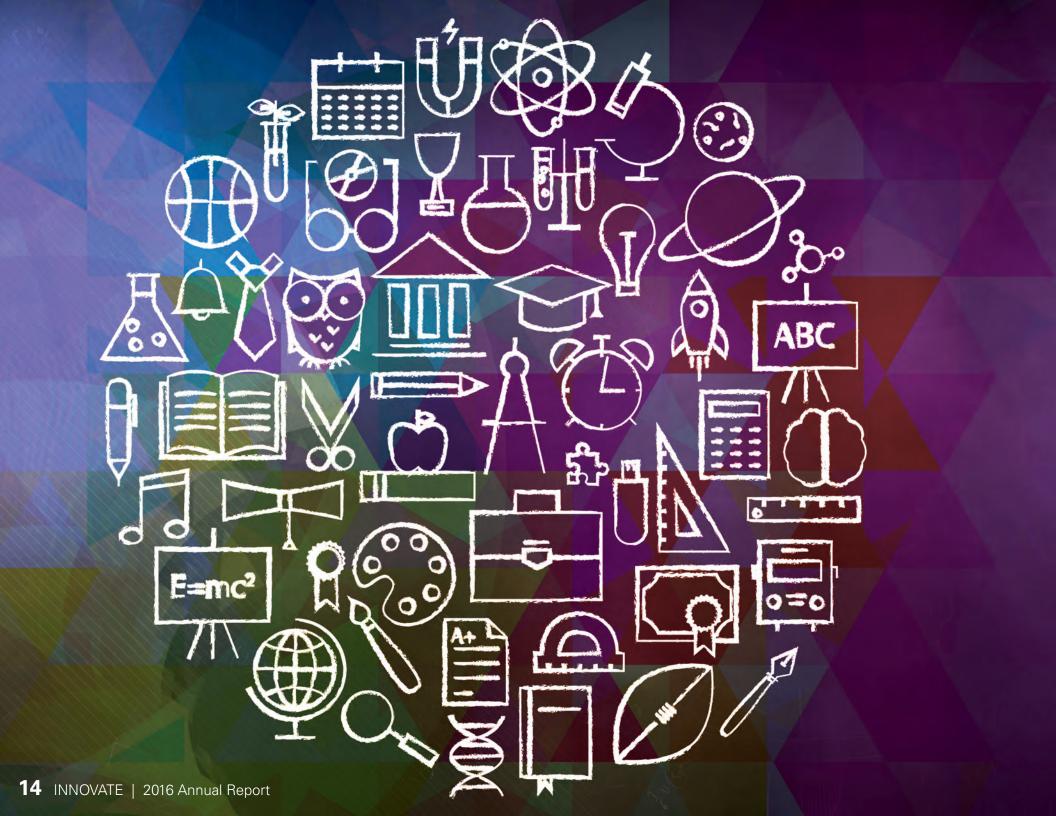
Garcia enrolled as a participant in a clinical trial that Aaen is conducting to find out if a new oral medication for adults works for teens as well. Although Aaen cautions that anecdotal testimony is insufficient to establish the effectiveness of a treatment by itself, Garcia says the drug is helping him a lot. He cites two family trips to Mexico as an example. After the first, he felt listless and exhausted for several weeks. But after the second — which occurred during the time he was on the medication from the clinical trial — Garcia felt just fine. "I stayed out late every night, hanging out with my friends," he says. "I still feel good!"

With the support of his family and Aaen's expert care, Garcia looks forward to the future. He recently entered a program to become a freight broker, a skill he will use in his family's trucking business and wants to study photography.

He has advice for young people with MS. "Do not lose hope. Do not let the sickness take over your life. Never lose sight of what you want to do."

Individuals interested in learning more about pediatric MS, please contact:

Gregory Aaen GAaen@llu.edu



Mitigating Burnout in Our Residents

Patient-centered communication can improve health of physicians.

Loma Linda University Children's Hospital prides itself on providing whole child care — treating the mind, body and spirit — to every patient. But while doctors keep busy with their patients, who is keeping busy taking care of them?

"The dynamics of whole person care are complex, but as physicians our ability to empathize with and understand our patients is critical," he says. "If we are burnt out then our willingness to do these things is low."

Doctors also need to take care of themselves and each other.

After finishing medical school, the next step for doctors is their residency program. For pediatricians, this is a three-year program, and it will be one of the most challenging stages in their life.

Pediatric residents work nine to 12-hour shifts, are often on 24-hour call every fourth night and depending on their rotations, shifts can be longer with fewer days off. Assistant professor of pediatrics, Albert Khait, MD, has been studying resident burnout since 2011. He says there is a lot of negativity around resident burnout, but it's something that should be taken seriously.

"If doctors are not happy, patient care can be affected and we need to avoid that," Khait says.

"Physician burnout can also lead to depression, medication error, patient dissatisfaction and a decrease in career enjoyment," Khait says. "What's worse, 400 physicians in the United States take their life each year," he says.

Research shows that 40 to 70 percent of pediatric residents in the United States are burnt out, and it peaks in the second year of residency when responsibilities and case severity intensify. "We are working to find solutions to decrease burnout at Loma Linda University Children's Hospital," Khait says.

Khait is part of a curriculum development team for a system of wellness through communication, known as the CLEAR Whole Person Care Model. Through connecting, listening, exploring, acknowledging, and responding and reflecting, physicians participate in workshops that teach how to use CLEAR in their clinical encounters. Since 2016, Khait and his team have been working on the study, "Mitigating Burnout in Residents via a Clinical Practice Tool," and he hopes to determine if patient-centered communication and building a better bond with the patient can improve the health of the physicians.

Khait and his team are teaching CLEAR as a tool for patient-centered communication. "My study's hypothesis is that CLEAR can be used as a shield or buffer to provide equanimity within an encounter, hence maintaining wellness in the provider."

Chad Vercio, MD, also involved in the study, says they hope utilizing the CLEAR model will impact burnout positively by helping physicians find meaning in their work.

"The dynamics of whole person care are complex, but as physicians our ability to empathize with and understand our patients is critical," he says. "If we are burnt out then our willingness to do these things is low."

Vercio finished his internal medicinepediatric residency in 2009 and agrees that resident burnout is a very real and common experience. "Residents and doctors alike are experiencing long work hours and busy seasons, and we are dealing with severely ill and dying patients," he says. "It's important to learn skills and find support to cope with the stressors that can burn us out.

(hampions for Children

Each year, patients at Loma Linda University Children's Hospital benefit from generous donations made by individuals, foundations, corporations and support organizations. A few very special corporations and support organizations have committed to host an annual fundraising event benefiting Children's Hospital with a gift of \$10,000 or more. In 2016 alone, these Champions for Children raised over \$850,000 helping to build a brighter future for our patients.

Walter's Automotive Group

Champion Since 1996 2016 Fundraiser:

• 21st Annual Walter's Children's Charity Classic

Farmer Boys Restaurants *Champion Since 2000* 2016 Fundraiser:

• 15th Annual "Give a Helping Hand" Benefit Drive

K-FROG 95.1 FM and 92.9 FM Champion Since 2002 2016 Fundraisers:

- 15th Annual Stater Bros. Charities K-Froggers for Kids Radiothon
- 14th Annual K-FROG Cares Golf Classic
- 14th Annual K-FROG Cares Concert

KOLA 99.9 FM

Champion Since 2003 2016 Fundraiser:

• Trans-Siberian Orchestra Benefit Concert

Stater Bros. Charities and Stater Bros. Markets *Champion Since 2003* 2016 Fundraiser:

• 15th Annual K-Froggers for Kids Radiothon

Quaid Harley-Davidson *Champion Since 2005* 2016 Fundraiser:

24th Annual Quaid Harley-Davidson Toy Run

Kannan Invitational Champion Since 2006 2016 Fundraiser:

• 11th Annual Kannan Invitational Golf Classic

Business Development Association of the Inland Empire *Champion since 2007* 2016 Fundraiser:

"Conquer the Rock" Golf Tournament

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Inland Empire 66ers Champion Since 2008 2016 Fundraiser:

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• 14th Annual 66ers Golf Tournament

Ontario Reign and Hope Reigns Foundation *Champion Since 2009* 2016 Fundraisers:

• Ontario Reign Jersey Auction and Loma Linda University Children's Hospital Night

Spirit of Children

Champion Since 2010 2016 Fundraiser:

• Spirit of Children In-Store Fundraiser

The Old Spaghetti Factory *Champion Since 2011* 2016 Fundraiser:

- 5th Annual The Old Spaghetti Factory Tip-A-Firefighter – Redlands
- 3rd Annual The Old Spaghetti Factory Tip-A-Firefighter – Rancho Mirage

Aflac and Macy's Champion Since 2012 2016 Fundraiser:

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• Aflac Holiday Ducks

Desert Thunder *Champion Since 2013* 2016 Fundraiser:

• Desert Thunder Motorcycle Rally and Car Show

Goldenvoice and KCAL 96.7 FM *Champion Since 2013* 2016 Fundraiser:

• Trans-Siberian Orchestra Benefit Concert

Inland Empire Enforcers

Champion Since 2013 2016 Fundraiser:

• Cops N Jocks Bowl

Corky's Restaurant & Bakery *Champion Since 2014* 2016 Fundraiser:

• Corky's Cookies 4 Cancer

Jersey Mike's Champion Since 2015 2016 Fundraiser:

• Combos for Kids

Mix 101.3 FM Champion Since 2015 2016 Fundraiser:

• 3rd Annual Mix 101.3 FM Radiothon and Auction



For more information on how your company can get involved, please contact:

Tiffany Hoekstra thoekstra@llu.edu | 909-558-5367

Loma Linda University Children's Hospital

Serving the Coachella Valley

Pictured: Big Hearts for Little Hearts Desert Guild and Indio Advisory Council



At Loma Linda University Health, we know that one of the keys to healing is meeting the needs of our community. That is why we have a team dedicated to serving the Coachella Valley. Our new pediatric outpatient pavilion will be offering specialty care services conveniently located in Indio, along with the SAC Health System which offers primary and specialty care to families. Join us as we serve the kids and families in our community with exceptional care.

Thank you to the Indio advisory council members who have provided significant support and direction from the beginning of this project.

Indio Advisory Council Members

Loni Bader and Jerry Argovitz Rhona Bader Stephanie Finmark Jill and Barry Golden Jessica Greene Norma and Ron Hare Jeanne and Lou Mace Wayne Pollard Dawn and Ken Rashid Andrea Rosenblatt Dale Rotner E. Jane and Morton Woolley Mary Ann and Frank Xavier

To learn more about how you can help support our new clinic, please contact:

Josh Zahid jnzahid@llu.edu | 909-558-5384



🔁 Loma Linda University Children's Hospital 🚺

Endowments and Donor-Advised Funds

Endowments ensure that the healing care offered by Loma Linda University Children's Hospital will be available to future generations of children. In addition, named endowments provide a lasting tribute to an individual or to a family's legacy of philanthropy. For more information about establishing a named endowment, please call the Loma Linda University Children's Hospital Foundation at 909-558-5370.

The James and Rowena Ramos Family Endowment

James and Rowena Ramos were inspired to provide for community children through an endowment at Loma Linda University Children's Hospital. Their inspiration grew from the care provided by the hospital for young members of their family, including granddaughters Summer Fawn and Shawnee Ramos, grandsons Tom Strongwind Ramos and Hawk Brown Ramos, and great-grandson Bryce Ekel. They were also guided by the examples provided by Rowena's son, Ken Ramirez, and her parents, Raoul and Martha Chacon.

The Raoul and Martha Chacon Family Endowment

The Chacon family believes in the future of our children. Family members have chosen to honor this belief through an endowment that provides life-saving and compassionate care at Loma Linda University Children's Hospital for the children of this community.

The A. Gary Anderson Family Foundation

Carrying out Mr. Anderson's legacy to meet community needs, the A. Gary Anderson Family Foundation has generously funded the A. Gary Anderson Playroom at Loma Linda University Children's Hospital. This playroom affords young patients the opportunity to interact with others and to enjoy diversionary play under the caring supervision of child life specialists.

The Jerry L. and Shirley N. Pettis Family Research and Operating Endowment

The Pettis Family Endowment provides funds for pediatric hematology and oncology research and clinical care at Loma Linda University Children's Hospital. In recognition of their generous contribution, the pediatric hematology/oncology and stem cell transplant wing of Children's Hospital was named in their honor in 2005.

The Ken Ramirez Family Endowment

The Ramirez family is dedicated to the eradication of childhood diabetes. This endowment was founded by Ken Ramirez and is supported by members of the extended Ramirez family. Annual proceeds support treatment and education provided to Inland Empire children by the Pediatric Diabetes Center at Loma Linda University Children's Hospital.

The James W. Totman Pediatric Cancer Research Endowment

A longtime resident of the Inland Empire, James W. Totman built a successful general contracting business building homes, apartment complexes and commercial buildings. Mr. Totman established a trust that provides an endowment for ongoing pediatric cancer research at Loma Linda University Children's Hospital.

The Coral and Richard Tegley Memorial Endowed Education Fund

In remembrance of his wife, a long-standing member of the pediatric critical care nursing team at Loma Linda University Children's Hospital, Richard Tegley established this fund to provide greater knowledge to other critical care nurses through educational conference opportunities.

Shawnee's Smile

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Tommy and Maria Ramos were inspired by their youngest daughter, Shawnee, to establish a resource at Loma Linda University Children's Hospital to help families of children born with a cleft palate or cleft lip.

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Loma Linda University Children's Hospital

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Woolley-Pettis Endowed Chair for Pediatric Research

The Big Hearts for Little Hearts Desert Guild launched the Woolley-Pettis Endowment Fund to support pediatric research and teaching at LLUCH in honor of E. Jane Woolley, MD, and The Honorable Shirley N. Pettis-Thompson: two visionary women who established the Desert Guild through their passion and desire to help children.

For more information regarding the Woolley-Pettis Endowed Chair, visit lluch.org/wp.



Membership in the Heritage Society is extended to anyone who includes a charitable gift to Loma Linda University, Loma Linda University Medical Center or Loma Linda University Children's Hospital as part of an estate plan. Through their generosity, members ensure the future of these institutions.

In recognition of their support, members are included in special celebrations and important occasions, and receive regular updates from organizational leadership. In addition, members receive publications that provide updates regarding educational, clinical, research and service activities on campus. Most importantly, members are an integral part of the University, Medical Center and Children's Hospital family and have the satisfaction of knowing that they are making a significant difference in advancing Loma Linda University Health's mission.

Members of the Heritage Society can be assured that information relating to their gifts and estate plans will be kept confidential. The only information made pubic will be the names of members who elect to be included on the Heritage Society Donor Wall. In no case will the financial details of gifts be disclosed.

> To become a Heritage Society member or for more information, please contact:

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Loma Linda University Health Office of Planned Giving PO Box 2000, Loma Linda, CA 92354 909-558-4553

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Giving to Loma Linda University Children's Hospital is a special way to honor or remember someone close to you, while also bringing hope to children in our care. Tribute donors can establish a Shining Star Fund in the name of their loved one. As well as paying special tribute, a Shining Star Fund provides an everlasting way to honor or remember someone.

Anyone may contribute to a Shining Star Fund at any time or to acknowledge a loss, birthday, anniversary or other special occasion. Gifts to Shining Star Funds are used to further the mission of the Children's Hospital and help ensure the availability of critical health care services for the children.

All Shining Star funds are acknowledged in the Loma Linda University Children's Hospital Foundation Annual Report. When contributions to a Shining Star Fund reach \$2,500 or more, a celestial star will be named for the honored individual. Shining Star Funds that have received contributions of \$5,000 or more will be included on the Shining Star Donor Wall located in the Children's Hospital.

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Blartsfor Hearts Searts Juli LITTLE AULLDS

Loma Linda University Children's Hospital Foundation is privileged to have an association of volunteer guilds whose events and activities raise funds and bring awareness to help meet the health care needs of community children.

In addition, Guild members help brighten the lives of hospitalized children through fun and diversionary activities. Together, the Desert Guild, Loma Linda Guild, Riverside Guild and Temecula Valley Guild include more than 50 plus board members and 400 members from across the Inland Empire and Coachella Valley.

During their 2015-2016 season, Big Hearts for Little Hearts Guilds hosted 12 fundraising events, 14 patient diversionary events and collectively raised over \$325,000 to ensure critical medical care for the sick children at LLUCH.

lluch.org/guilds

For more information on the Guilds, please contact:

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