

# LEADERS IN *Care*

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SUMMER 2022

## Celebrating a Century of *Care*

Transforming  
kids' lives for  
100 years



**Shriners**  
Children's™

# 100 years

of Pediatric Specialty Care



Cal's Colt  
PATENTED MAY 1st, 1928

SPECIAL  
ANNIVERSARY  
ISSUE

Celebrating  
100  
YEARS

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# History of the First Shriners Hospital



**I**n 1920, when members of the Shriners fraternity officially made the momentous decision to establish a hospital to care for children with orthopedic difficulties, perhaps few envisioned a location as unassuming as Shreveport, Louisiana, to serve as home to the pivotal endeavor. While it was a well-established port and agricultural town at the time, Shreveport was essentially unknown on a national level. Even the local Shriner membership was relatively new, with the fledgling El Karubah Shriners receiving its charter in 1914.

But by mid-1921, when plans to build the first Shriners Hospital in St. Louis, Missouri, were stalled due to issues with land acquisition, Shreveport put itself on the map.

## **Making the case for Shreveport**

Upon learning of the plans for a system of hospitals, well-known businessman, civic leader and El Karubah Potentate (CEO) James Horace Rowland launched an aggressive campaign to bring a hospital to Shreveport. Rowland promptly began raising funds and secured the necessary land. He then enlisted the help of the Shreveport Medical Society

*Our Shreveport location opened in 1922 and is the reason we can celebrate 100 years of caring for kids in 2022. The story of Shreveport – and, by extension, our healthcare system – provides a great glimpse into our community back then.*

**In its first year, Shriners  
Children's Shreveport  
provided care to some  
480 children.**



# Plans for the first Shriners Hospital called for a 60-bed facility, separated into 30-bed boys' and girls' wards.



support and plans already underway, but also the potential for the Shreveport area to benefit greatly from oil and natural gas development over the years. Chaired by Sam Cochran of Dallas, Texas, the committee was impressed with the level of preparation by the Shreveport delegation. In September 1921, Rowland and the El Karubah Shriners were given the approval to proceed.

When reporting back to his constituents following the approval of Shreveport as the first host city, Rowland recalled significant competition among the potential host cities.

“While we had all hoped that Shreveport would be selected as the location ... there was tremendous pressure brought to bear by other cities, and there appeared to be little assurance that the town had a chance,” Rowland recalled in a 1921 newspaper interview. “I feel that the work done by El Karubah’s representatives ... was mainly instrumental in the adoption of the hospital plan as a whole.”

## Planning a special place for kids

With the path cleared for establishing a hospital in Shreveport, area Shriners turned their attention toward planning the new facility. The Shriners called upon Edward Frank Neild, a prominent local architect and founding father of El Karubah Shriners, to lead the design effort. Neild, who had previously contributed his talents to elaborate local landmarks including the Scottish Rite Cathedral, B’nai Zion Temple and Caddo Parish Courthouse, created an ornate design, drawing inspiration from the Scottish Rite Hospital in Atlanta. Neild would go on to have a prolific career, including being tapped by President (and Shriner) Harry S. Truman to provide consultation for both renovations to the White House and the design work for the Truman Library.

Plans for the first Shriners Hospital called for a 60-bed facility, separated into 30-bed boys' and girls' wards. The 5.9-acre plot of land at the corner of Kings Highway and Samford

in obtaining funding for a qualified orthopedic surgeon for one year of operation.

Joined by Shreveport Mayor L.E. Thomas and other El Karubah founding fathers, Rowland traveled to Atlanta to present his proposal to the Shriners committee overseeing the hospital initiative. Rowland laid out not only the strong local

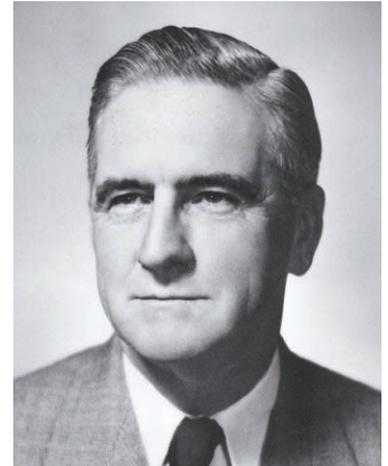
Avenue, secured by the El Karubah Shriners, would later be purchased by the Shriners at a cost of \$35,000 and donated to the hospital. Cost estimates for construction and equipment totaled about \$300,000.

In May of 1922, the cornerstone for the world’s first Shriners Hospital was placed during a ceremony with an audience including throngs of Shriners, friends and well-wishers. Officiated by Imperial Potentate (fraternity CEO) Ernest Cutts (Alee Shriners), the ceremony ensured the Shreveport facility’s legacy as the first Shriners Hospital and physically signaled the start of an ambitious and unprecedented effort to provide essential care to children in need.

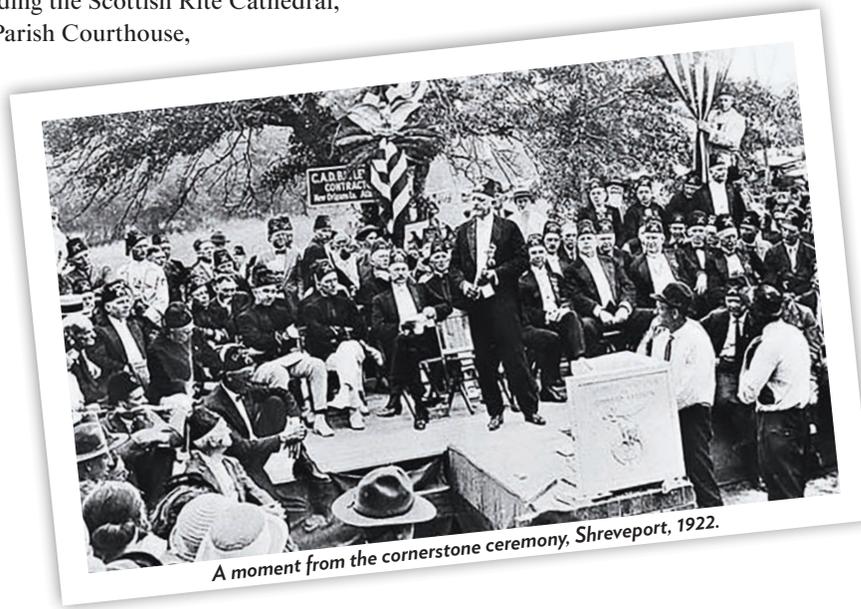
As construction of the Shreveport facility progressed throughout the summer of 1922, plans were also under development to immediately begin addressing the orthopedic needs of children throughout the region. Guy Caldwell, M.D., began scheduling appointments for children from his medical office in downtown Shreveport. Making good



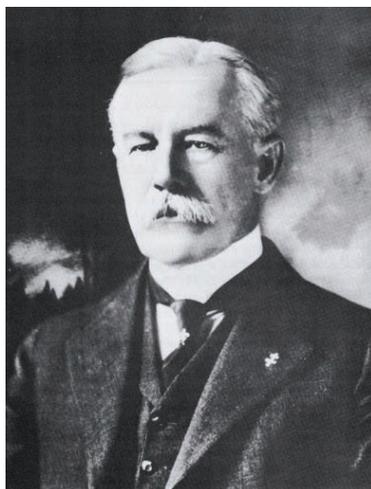
James Horace Rowland drove the effort to establish Shreveport as the home of the first Shriners Hospital.



Edward Frank Neild, acclaimed architect, designed the first hospital building.



A moment from the cornerstone ceremony, Shreveport, 1922.



Sam Cochran chaired the committee that approved the Shreveport Shriners Hospital.



Guy Caldwell, M.D., saw the first Shriners patients in his medical office in Shreveport.

on its earlier promise, the Shreveport Medical Society arranged Dr. Caldwell's services for the first year of the hospital's operations, a condition of the hospital coming to Shreveport.

### Making a difference in patients' lives

The first patient in the Shriners Hospitals health-care system was seen in Dr. Caldwell's downtown office on Sept. 16, 1922. The patient was Aileen, a 7-year-old girl from Gibsland, Louisiana, who was treated for clubfoot. From her first visit, Aileen developed a special relationship with the facility and returned on numerous occasions throughout her lifetime in support of Shriners Hospital.

In the months that followed, Shriners Children's Shreveport initiated in earnest its mission of providing excellent orthopedic care to children in need. By the dedication of the completed new facility on April 6, 1923, the hospital had already

established itself in the hearts of the Shreveport community.

"The Shriners Hospital ... is truthfully known as this city's greatest blessing," stated an editorial published in the *Shreveport Times* coinciding with the dedication. "For there could be no nobler work than the (helping) of little innocents who have no way of helping themselves."

Following the pomp and ceremony of dedicating their beloved and sought-after new hospital, Louisiana Shriners directed their focus toward meeting the needs of a challenging and diverse patient population. While primarily focusing on the devastating effects of polio on children, the first Shriners Hospital offered services for children

with congenital (present at birth) orthopedic conditions, as well as care for orthopedic injuries such as those acquired through hard labor on the region's farmland.

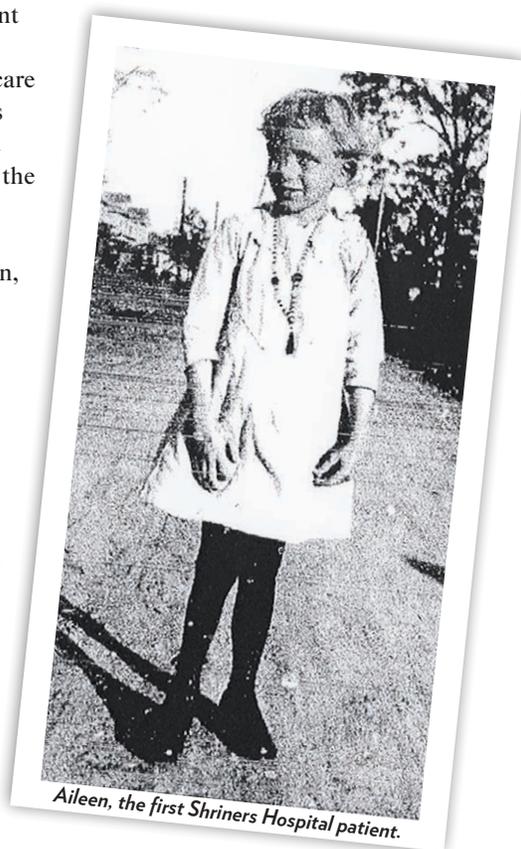
In the first years of the hospital's operation, patients had to satisfy three requirements to receive treatment: be age 14 or under, be indigent or otherwise unable to pay for services, and have a condition that could be treated by the medical staff of the facility. The preconditions were ultimately revised to include care for all children up to age 18 who could benefit from the services provided, regardless of financial status.

Rowland, whose efforts were largely credited with bringing the first Shriners Hospital to Shreveport, was named the first chairman of the hospital's Board of Governors. In keeping with his intimate involvement with the hospital, Rowland played a highly visible role in directing the hospital's efforts. In his 20 years as chairman, Rowland remained a fixture and paternal presence within the facility, earning the affectionate nickname "Daddy Rowland" among the hospital's young patients.

In its first year, Shriners Children's Shreveport provided care to some 480 children. Within five years, that number had expanded to over 1,000, with families traveling hundreds of miles via train, car, and even horse to give their children a chance at improving their lives via the Shriners' labor of love.

### A vision realized

One hundred years ago, Louisiana Shriners embraced the grand vision of leaders in the fraternity and made it their own, orchestrating a bold plan to bring life-changing orthopedic care to children throughout the South. That local vision for Shreveport was brought to life through the contributions of dedicated Shriners, experienced medical professionals, nurses and staff, and the enduring support of the Shreveport community. And it continues to this day at that venerable plot of land at the corner of Kings Highway and Samford Avenue. 🍷



Aileen, the first Shriners Hospital patient.

### Staff Views

**MERLENE JOSE, RN, BSN** | Care Management Manager | Hawai'i | 10 years of service

"We do not just provide care; we seek those who need care. I believe this next decade and the century beyond will bring heightened awareness of Shriners Children's and everything that we do for our communities."



# Dear Readers

I'M PLEASED to have this opportunity to share in this special edition celebrating Shriners Children's centennial anniversary.

One hundred years ago, the world was far different than it is today. Yet, some things remain the same – including our commitment to providing high-quality, customized care to our patients, regardless of the families' ability to pay. We also remain determined to respond to unmet medical needs of children, conduct groundbreaking medical research that will one day lead to new and improved medical treatments and offer outstanding educational opportunities for medical professionals.

Over the last century, Shriners Children's has given hope and healing to more than 1.5 million children all over the world. Our hospitals were the first to specifically treat children with burn injuries, and we offered the first programs in the U.S. designed for children with spinal cord injuries. We continue to add new

approaches and services as specialized pediatric medicine evolves. Our researchers and medical and clinical staff continue to create innovative medications, treatments and approaches that become the standard of care.

As we look toward our second hundred years, we know medical care and the way it is delivered will continue to change with the times. We also know that our patients and families will remain our first priority

and that we will continue to do all we can to ensure our patients discover that they can chase their dreams and have amazing futures.

Sincerely,  
Fran Farley, M.D.  
Chief Medical Officer  
Shriners Children's



**Over the last century, Shriners Children's has given hope and healing to more than 1.5 million children all over the world.**



AS WE MENTIONED in the spring edition, 2022 marks the 100th anniversary of Shriners Children's.

In this expanded edition of *Leaders in Care*, we are honoring and celebrating our healthcare system's incredible history of generosity, compassion, growth, exploration and innovation. We invite you to join us for a look back and a glimpse at where we are headed as we begin our second century of putting patients first and providing *The Most Amazing Care Anywhere*.

We are also celebrating the 150th anniversary of Shriners International, the fraternity that founded and continues to support Shriners Children's as its official philanthropy. We owe the fraternity – and its leaders in 1922 – a tremendous debt of gratitude and respect for their vision and commitment to providing quality pediatric specialty care to children, regardless of their families' ability to pay.

That is still our mission today. And as we look to the future, we are working to bring the next phase – Vision 2035 – to fruition. We intend to *Reach More Kids in More Places*.

We look forward to continuing to share this incredible journey of improving and transforming the lives of children and families – wherever they may live – with you.

Sincerely,  
Mel Bower  
Chief Marketing and Communications Officer  
Shriners Children's



**We are also celebrating the 150th anniversary of Shriners International.**



## Staff Views

**GUADALUPE ORTIZ** | Physical Therapist and Rehabilitation | Mexico | 32 years of service  
"I love the mission. I am grateful for many wonderful moments. Because of years of innovative techniques, I have seen many children smile, and I have seen firsthand remarkable improvements from when they arrive to when they are discharged. It gives me great satisfaction. I thank the Shriners for including the kids in Mexico in this great mission."



# Letters

Through the decades, patients have shared their experiences

## Letter from Corrie Lee Abington to her cousin Sara

Shreveport, Louisiana  
May 7, 1924

Dear Sara,

I got your letter yesterday and was so glad to hear from you. It is lonesome up here when you don't get letters, but I get some every day. I got five yesterday. I will be so glad to get the package you said you was going to send me. Especially the flowers. Mother brought me some lovely flowers Sunday. Some of the prettiest pansies I believe I ever saw. Mary Alice sent them. Miss Nina sent me a big bouquet of sweet peas from Sunday school. Auntie sent me some roses, and Billie Boy sent me some narcissus.

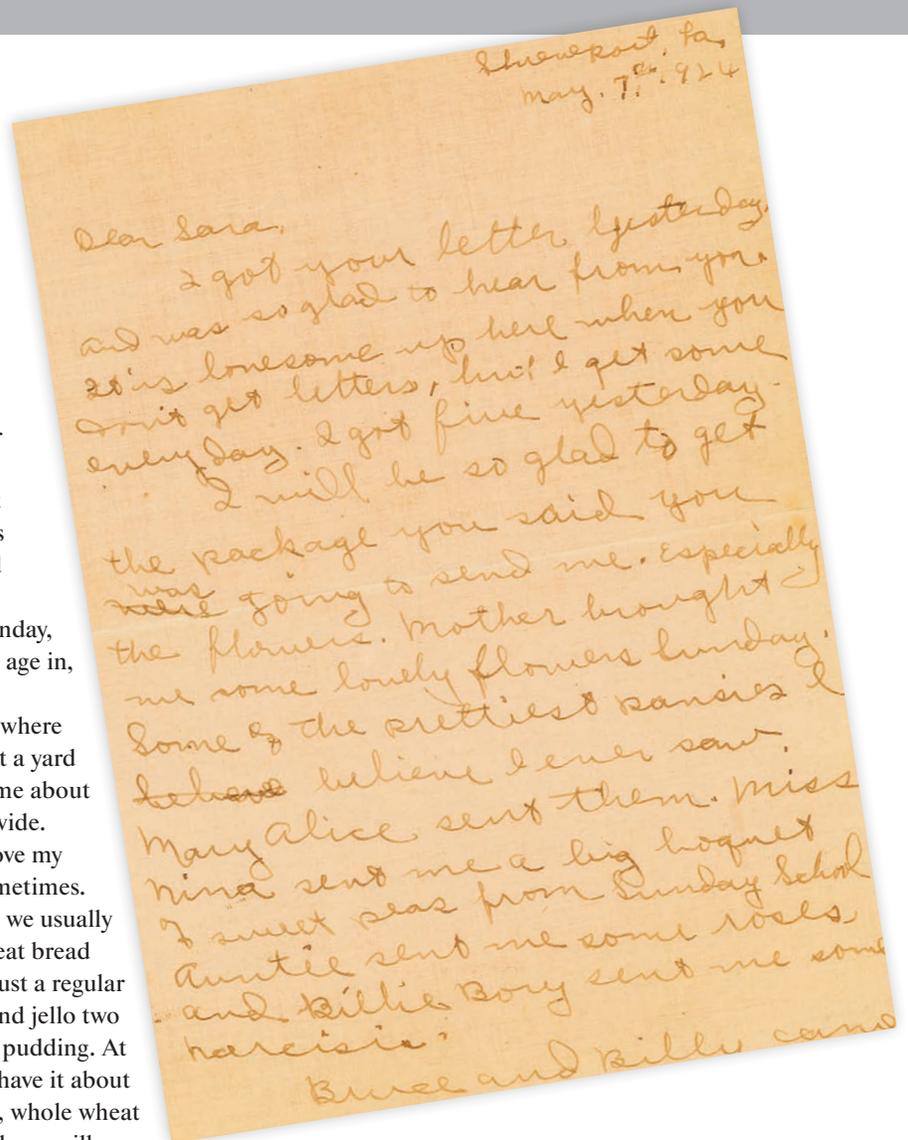
Bruce and Billy came with Mother and Daddy Sunday, but you know they won't let children under a certain age in, so I didn't get to see them.

There are so many things to tell you I don't know where to begin. First I will tell you about my bed. It is about a yard wide and two-and-one-half yards long. I am on a frame about the same length of the bed and about eleven inches wide. I am strapped at my shoulders and hips so I can't move my back. It gets so tiresome I don't know what to do sometimes.

Next I will tell you about the meals. For breakfast we usually have some kind of breakfast food, prunes, whole wheat bread toast and a cup of coco. For dinner we usually have just a regular dinner. We have ice cream for dessert twice a week and jello two or three times. Sometimes we have chocolate or rice pudding. At supper, it is what city people call tea, I suppose. We have it about 4:30 o'clock. It consists of a boiled egg, glass of milk, whole wheat bread, and canned apples, pears or some cereal. We have milk between breakfast and dinner, dinner and supper and after supper. That makes six glasses a day.

They have visiting hours twice a week on Weds. from 2:30 to 3:30. On Sun. from 2:30 to 4:30. Ward round comes twice a week Mon. and Sat. On ward round the doctors come around and look at you and tell you when you can go home.

Mother brought me a fountain pen Sunday. I sure am proud of it. It writes so nice and easy.



As there is no other news I will close. Tell Aunt Alice and those in your next letter I will write to them when I find time. I have so many letters to answer I don't have much time.

Lots of love, write when you have time.

Your cousin,  
Corrie Lee

### Staff Views

**VICKIE PAGEL** | Lead Cook | Spokane | 35 years of service

"I worked in the old Shriners Hospital and did tray service, and they would gather up to 15 inpatients together in the recreation room for lunch and dinner. Now we have room service where the kids call in their order and we deliver to their room."





# For the Children

Shriners Children's continuously looks for new ways to make a difference



*The Shriners fraternity made it a mission to provide care to children.*

## Origin in orthopedics

The need for pediatric orthopedic services throughout North America was substantial. In the early half of the 1900s, polio affected thousands of people annually in the United States alone. The disease, which causes paralysis and even death, primarily affected children, and Shriners Children's cared for many patients with the condition. In addition, help was needed to treat other conditions affecting the bones, joints and muscles.

Today, most Shriners Children's locations are staffed and equipped to handle virtually all pediatric orthopedic conditions. Commonly treated conditions include clubfoot, limb deficiencies and discrepancies, scoliosis, osteogenesis imperfecta (brittle bone disease) and sports injuries, as well as orthopedic difficulties associated with neuromuscular conditions, such as cerebral palsy and spina bifida.

We have a large full-time staff of experienced pediatric orthopedic surgeons, as well as a comprehensive team of physical, occupational, speech and other therapists. Our hospitals, outpatient centers and clinics provide exceptional orthopedic care that is recognized throughout the world.

## Moving into burn care

From 1950 to 1960, Shriners Children's funds increased rapidly. At the same time, admission waiting lists for new patients declined, due to the polio vaccine and other medical advancements. The members of Shriners International found themselves in a position to provide additional services to help children. A committee to identify other pediatric medical needs discovered that the only treatment center dedicated to burns in the U.S. was part of a military complex and did not specialize in treating children. In 1962, Shriners unanimously adopted a resolution to begin offering pediatric burn care services.

The healthcare system opened temporary units in Cincinnati, Ohio; Boston, Massachusetts; and Galveston, Texas, to meet the special needs of children with burn injuries while permanent quarters were created. The care provided at these hospitals and at the Shriners Children's location in Sacramento, California, which opened in 1997, gives thousands of children each year a greater chance of surviving all types of burn injuries. Today, patients with burns covering more than 90% of their body can not only survive, but they can also lead productive, fulfilling lives.

Our burn care hospitals provide critical, surgical and rehabilitative care to children with varying degrees of new and healed burns and related scarring. Services include reconstructive and restorative surgery. In addition, patients receive physical rehabilitative

**I**hroughout their history, members of the Shriners fraternity have been known for their generosity and deep desire to help people, particularly children. In the 1920s, when a polio epidemic raged, and many children needed medical care that wasn't available to them, the Shriners had the wisdom, vision and compassion to create a philanthropy that would help those children, and ultimately make a difference worldwide.

The plan was to help children with disabilities receive specialized orthopedic care, without cost to them, through multiple locations nationwide. Over the ensuing years, it became clear that these caring, generous men were dedicated to uncovering and meeting the unmet medical needs of children.

care. Multidisciplinary teams work closely with patients and families to provide support during each child's recovery and transition back to school and family life.

### Spinal cord injury rehabilitation

In the 1980s, Shriners Children's identified another need in pediatric care: rehabilitation for spinal cord injuries. Shriners Children's Philadelphia established the first spinal cord injury unit in the United States developed specifically for children and teenagers. In 1984, the Chicago and Northern California hospitals began offering spinal cord injury rehabilitation.

At Shriners Children's, an interdisciplinary team of surgeons and other physicians, therapists, therapeutic recreation specialists, psychologists, social workers and dietitians works together to provide individualized, comprehensive care plans. Custom care plans may include critical and intensive care; orthopedic, plastic and reconstructive surgery and neurosurgery; physical, occupational, recreation and speech therapy; psychosocial guidance and assistance; exercise-based wellness and fitness information; and experiential programs to encourage confidence and build independent living skills.

### Cleft lip and palate

Approximately 5,000 children are born each year with deformities of the upper lip and mouth, and comprehensive, long-term care for these children is often difficult to obtain. That's why Shriners Children's added cleft lip and palate care as an official service line in 2005.

At Shriners Children's, patients with a cleft lip and/or palate are treated by a multidisciplinary team to improve their appearance and their ability to eat, breathe and communicate. Each patient's unique treatment plan may include surgery, orthodontics, hearing, speech and psychological therapies, along with specialized support.

### Overall well-being

In addition to providing medical care, our care teams work with each patient and family to help them understand the complexities and implications of the child's medical condition. The staff takes the time to listen to patients and help them develop the confidence and self-esteem needed to overcome their challenges and move into the adult world successfully. It's something we call wrap-around care.

Due to the nature of many conditions treated at Shriners Children's, young patients often face a long road to recovery. Helping kids develop skills to adapt, as well as other more intangible inner strengths such as self-esteem and confidence, is part of the work and mission of Shriners Children's.

Child life specialists teach patients coping skills through play and learning, and they coordinate special events, holiday celebrations and other activities to make the hospital a fun and comfortable place.

## Special Expertise

- \* Shriners Children's has a long history of providing customized, quality orthotic and prosthetic (O&P) devices to children who need them. These devices give kids with missing limbs and other orthopedic difficulties the chance to play musical instruments, dance, play sports and be active participants in the world around them. Our O&P staff has a long history of setting industry standards and educating other O&P professionals.
- \* Shriners Children's is an internationally recognized leader in clinical motion analysis. The sophisticated technology of motion analysis is similar to that used to animate characters for films and video games. The technology used in motion analysis centers collects data that provides a complete picture of how muscles, joints and bones are interacting, which helps care teams correct problems more effectively and efficiently. (See page 12 for more details on this technology.)

What makes Shriners Children's unique are the seemingly unlimited efforts to improve the lives of patients and families. The dedication to meeting children's needs that has always been the hallmark of the Shriners organizations makes it possible for patients to dream big and accomplish more than they may have ever believed possible.

Shriners Children's also offers a variety of experiential programs that help patients develop psychosocial skills, ranging from camps to therapeutic horseback riding to skiing adventures. Some locations have also hosted specialized camps for patients with hand deficiencies, burns and spinal cord injuries. (See page 14 for more on wrap-around care.)

### Reaching more kids in more places

In recent years, the medical community has seen a shift toward providing more procedures on an outpatient basis. This, along with efforts to adjust to the rising cost of healthcare, prompted Shriners Children's to shift its emphasis toward same-day surgeries and to forge strategic relationships with local care providers that offer inpatient care, where appropriate.

These efforts allow Shriners Children's to provide excellent care more effectively and efficiently, and offer a greater ability to reach and serve more children.

In addition, while Shriners Children's has physical locations in the United States, Mexico and Canada, staff members share its compassion and expertise globally. They hold hundreds of outreach clinics annually, traveling around the world to provide care. 🌍

### Staff Views

**NADINE HENRY** | *Clinical Nurse* | Canada | 24 years of service

"Our mission has persevered through the joint efforts of all the Shriners temples and the hard work of the employees who manage to put smiles on patients' faces, reassure the parents and help them navigate their journey, whatever the degree of difficulty they're facing."



# Progress in Motion

Advancements in motion analysis technology through the years

**S**hriners Children's is an internationally recognized leader in clinical motion analysis. Our motion analysis centers complement our healthcare system's commitment to provide excellent care to children with orthopedic conditions, including those caused by neuromuscular problems, such as cerebral palsy. When we understand how a child with these diagnoses moves, we can help them move more efficiently, effortlessly and confidently.

## How motion analysis works

In the motion analysis centers, high-speed cameras, reflective markers, force platforms and muscle sensors work together to measure and record how a child is moving.

The collected data gives a complete picture of how a patient's muscles, joints and bones are interacting. This picture provides the understanding often needed to determine the best treatment recommendations for our patients. Additionally, the availability of pre- and post-operative data

*The centers were originally used only for gait analysis.*



*The technology in motion analysis centers measures and records how a child is moving.*

helps physicians refine and adjust surgical procedures to achieve even better outcomes in the future.

## The evolution of the centers

Shriners Children's has 14 motion analysis centers in the healthcare system. While the centers were originally used for gait (walking pattern) analysis to help guide surgical decisions and outcomes, motion analysis can now also be used to provide data for the following needs:

- **RETURN TO SPORTS TESTING:** Determining risk of ACL (anterior cruciate ligament) injury before and after surgery, as well as improving return to sport outcomes for other injuries
- **UPPER EXTREMITY BRACHIAL PLEXUS INJURIES:** Measuring the volume of space a patient can reach with their arm
- **SPINE/TRUNK MOBILITY:** Evaluating trunk flexibility before and after scoliosis surgery
- **FOOT MODELS:** Understanding the details of how muscles and bones in the foot move as a patient is walking

In 2021, 3,657 patients received motion analysis services during a total of 4,009 appointments.

"It has been great to see how the labs have evolved in the last 20 years," said Ross Chafetz, PT, Ph.D., D.P.T., MPH, corporate director of the motion analysis centers. "In the past, we completed very basic evaluations of how the patient walks. Our systems are



Motion analysis technology gives a complete picture of how a patient's body moves.

far more precise and sophisticated now. For example, rather than a general look at the patient's foot we can now break it down into several different segments. The increased detail gives us the ability to evaluate foot surgeries that we could not previously determine with this technology."

Chafetz also noted how exciting it is that motion analysis has branched out into other lines of service, such as helping surgeons determine when a posterior spine fusion versus vertebral body tethering is indicated, and for helping patients return to sports. "Motion analysis allows us to evaluate the patient's biomechanical form to prevent future injuries," he explained.

Shriners Children's has seven centers accredited by the Commission for Motion Laboratory Accreditation (CMLA), and by the end of 2022, we hope to have all 14 accredited – which would mean that 56% of all nationwide accredited labs would be at Shriners Children's facilities. Accreditation ensures the highest quality of care and sets the standard for research.

### The future of motion analysis

These evolving technologies will make the centers even more valuable to patient care in the future:

- Marker-less camera systems that accomplish similar evaluations with significantly less time and staff. "These systems are portable, suggesting that we can bring our lab into the community," Chafetz said. "For example, we could capture gait analysis in our Puerto Rico clinic. For sports, we could take the system to the high school to do injury prevention testing."
- Sensors that patients can wear in a suit throughout the day. "This will allow us to monitor joint motion and activity levels," explained Chafetz. "We can capture how a patient truly walks during the day rather than how they walk under laboratory conditions."
- Virtual reality and games to measure the outcomes of upper extremity surgeries. "With these games, a surgeon can determine whether the patient has a better ability to reach for objects in their immediate space," said Chafetz. 🎮

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## Motion Analysis & Research

In collaboration with Marquette University, Karen Kruger, Ph.D., our Chicago location's motion analysis center director, and Gerald Harris, Ph.D., director emeritus, have developed biplane fluoroscopy imaging. It's like a real-time X-ray consisting of thousands of images put together, resulting in a 3D video. In the past, they had access to limited research data, primarily from examinations, traditional

X-rays and MRIs. However, with this new approach, they can more effectively study areas such as foot deformities, the use of orthotics and long-term surgical results.

In addition, Chicago's Joe Krzak, Ph.D., PT, PCS, senior physical therapist, is developing machine-learning approaches to provide more advanced analysis. Machine learning uses artificial intelligence to analyze data, identify

patterns and make decisions with minimal human involvement. The data will rapidly advance what is known and understood about how to address mobility challenges.

With these partnerships and the collaborative research being done by Shriners Children's researchers and care providers, motion analysis data and evolving technology are guiding us toward a brighter future with countless new treatments and practices.

# A History of Excellence in Burn Care



Over decades of innovation in burn care, Shriners Children's has helped patients spread their wings.

**S**hriners Children's is noted worldwide as a leader in pediatric burn care. Since opening our three pediatric burn hospitals in the 1960s, our healthcare system has been at the forefront of innovative programs and treatment techniques that have both dramatically improved the survival rate for children with severe burns and enhanced their quality of life. Here's a history of how it happened.

## 1960s

In response to the growing awareness of a need for pediatric burn care, research and education, the Shriners organization's governing body passed a resolution in 1962 to build and operate hospitals specializing in pediatric burn care. The first one opened in 1966 in Galveston, Texas, followed by those in Cincinnati, Ohio, and Boston, Massachusetts, two years later. The establishment of these hospitals helped raise awareness of pediatric burn injuries and the need for appropriate care throughout the medical community.

## 1970s

Tremendous improvements in survival rates were made, particularly because of innovative research in excision, grafting and intravenous feeding. In addition, pressure garments that helped lessen scarring were developed. Shriners Children's Ohio pioneered skin banking – a precursor to future methods of tissue, bone and skin procurement. In addition, Shriners Children's worked with the United States Fire Administration and Consumer Product Safety Commission to identify burn prevention programs for schools and fire departments.

The Boston hospital also began the first school re-entry program to assist patients ready to return to their schools and communities.



*Advances in burn treatment have improved patients' lives.*

## 1980s

Outpatient clinics were added at the three burn hospitals to provide continued care after patients are discharged. Also, researchers at Shriners Children's discovered that early surgical excision and grafting reduces infections, shortens hospital stays and improves cosmetic outcomes for patients. Shriners Children's created Burn Awareness Week, a national education campaign, in an effort to raise public awareness and reduce the number of burn injuries in children.

## 1990s

Services were expanded at our burn hospitals. Care was made available for non-burn conditions such as port wine stains, congenital ear deformities and other complex wound and skin conditions. In addition, new programs were set up to help burn patients with psychological and social issues, including transitioning back to school and community.

In 1997, Shriners Children's Northern California opened in Sacramento to serve children with orthopedic conditions, burns and spinal cord injuries. The hospital has become the busiest pediatric burn center in the Western U.S.

## 2000-2020s

Shriners Children's continues to demonstrate and be recognized for its leadership in burn care.

All four burn care locations have had leaders who have served as president of the American Burn Association, and three of the facilities have hosted or co-hosted the World Burn Congress, an annual event of the Phoenix Society for Burn Survivors that brings together approximately 800 survivors and their families, caregivers, burn care professionals and firefighters to share experiences and support one another. 🧡

### Staff Views

**SHANNON KELLY** | Physical Therapist | Portland | 23 years of service

"We can get our kids home sooner. A length of stay for spinal fusion was generally 10 to 12 days, but now it can be as short as three to five days!"



Committed to Helping

# Kids Be Kids

The evolution of wrap-around care at Shriners Children's



*Shriners Children's prioritizes patients' overall well-being.*

Specialist Anne O’Gorman enters the clinic room and gently approaches the family. She’s taking it all in. Is the parent anxious? How is the child interacting with his surroundings? As she listens and observes, she reaches into her pocket – not for a medical instrument, but for a deck of cards. She is a child life specialist at Shriners Children’s New England. While playing might be part of the job, she in fact has an essential role, right alongside the physicians, nurses and parents.

“I’ve taught myself two card tricks to make patients laugh,” said O’Gorman. “Humor is a great coping tool.”

She’s one of many child life specialists, recreation therapists and care managers responsible for Shriners Children’s signature approach to care, which is affectionately known as wrap-around care. This child and family-centered focus supports social and emotional needs and enhances physical healing. Wrap-around care, which is sometimes explained as a concern for the overall well-being of our patients, is so successful it has become central to the system’s identity.

## A hallmark of care

Shriners Children’s provides superb medical care, but staff members also take pride in looking at additional ways they can enrich kids’ lives and help them on their journey through life.

Larissa Sims, a child life specialist for 29 years at Shriners Children’s Spokane, explains that child life specialists look at the child’s many needs related to their care.

“When children are treated at Shriners Children’s, we don’t just look at them in a medical or clinical way,” said Sims. “Wrap-around care originates from our mission: It’s who we are and what we all do.”

The wrap-around care approach helps the system stand apart from other health-care models.

“Shriners Children’s approach to most things, recreation therapy included, is unique from other systems,” said Laura Hollingshead, who has led recreation therapy at the Salt Lake City location for 22 years. “The focus on patients’ needs is exceptional. It’s what makes us special. We feel different because we are different, and I love it.”

## It's always been this way

It should come as no surprise that Shriners International – a fraternity founded on the principles of fun, fellowship and philanthropy – established a healthcare system known for its kindness and compassion. It was not enough to get children walking again after treatment for polio, unless they also walked away with some of their most cherished, lifelong memories.

Examples of infusing medical care with loving attention go back to Shriners Children's earliest days. In 1922, when the first hospital opened in Shreveport, Louisiana, the sound of children's laughter echoed throughout the halls. The hospital was known for its child-focused activities, such as a classroom to help children keep up with their studies, and Boy Scouts and Camp Fire Girls programs, to teach life skills and encourage a sense of adventure.

In the early years, most patients stayed for a year or more at the Chicago Shriners hospital, established in 1926. The hospital sought to create a family atmosphere. Between treatments, the distractions from healing were plentiful.

The Daughters of the Nile, a women's organization allied with the Shriners fraternity that founded the healthcare system, arranged parties for the children. The annual Christmas play not only afforded a festive opportunity for singing and acting, but it was also the only time boys and girls came together for socializing. Necessity led to more enrichment opportunities. It was difficult to retain a gardener during this time, so flowerbeds gave way to a vegetable garden, planted and tended by the patients, who quite literally enjoyed the fruits of their labor during evening meals.

In the 1930s, weekly movies became popular, and a patient's note from the 1960s in the Chicago hospital archives detailing Saturday nights as movie and candy night proves this tradition had staying power. To this day, Chicago patients enjoy movie night, only now they can stream movies in their own rooms.

## The power of listening

Wrap-around care starts with listening.

"Listening is number one," O'Gorman said. "In child life, we do an assessment, just as the doctor does. We assess the patient on their likes and dislikes, watch how the child



*A group of Boy Scouts works on a project in the Chicago hospital, circa the 1950s. Providing space for Scout gatherings was an early example of wrap-around care.*

interacts with others in play, notice what they are touching or not touching, and gauge whether they look scared or happy."

Listening is how our Salt Lake City location's staff identifies and meets unique needs. A simple question, "What are you going to be for Halloween?" led to staff in the wheelchair seating and mobility department creating a wheelchair costume clinic. Good listening also sparked Salt Lake City's special needs car seat clinic, when families mentioned how uncomfortable their child was in their vehicle without proper seating.

When O'Gorman heard that a patient's hospital stay would prevent her from attending her high school prom, she sprang into action transforming the teen's room into a *Starry, Starry Night*-themed prom. The dance was complete with her prom date, friends, family and school principals in attendance, and formal attire, of course.

## Play with purpose

Incorporating recreation and play into the medical setting helps kids cope and grow through their experiences at the hospital.

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However, Sims in Spokane is quick to point out that it is not all fun and games. “There’s a purpose behind activities and treatments that are individualized for each patient and family.”

She runs the hospital’s FutureFest Transition Group that helps teens tackle some of the challenges of moving into adulthood. She also leads Teen Group where teens with similar conditions get together weekly to discuss issues they’re facing.

### Beyond facility walls

Shriners Children’s signature wrap-around care has always extended beyond the walls of its physical buildings. Camp Achieve, for example, is a Twin Cities camp that helps patients with limb differences conquer their fears. Kids can rock climb, ride horseback, swim, ski and much more.

“We believe that challenges are what makes life interesting and overcoming them is what makes life meaningful,” said Maureen Johnston, recreation therapist. “The weeklong program gives campers a chance to push the limits of their physical and mental capabilities and reach new heights of excellence.”

“In the past 20 years, I can say with certainty that we have witnessed a growth in confidence and self-esteem in the children who have attended our camps,” said Johnston. “The increase in independence and leadership qualities that have emerged in these kids is truly astounding.”

### Predicting the future

Wrap-around care has changed since the early days.

“On the surface, recreation therapy at Shriners looks nothing like what it did when I first started,” said Hollingshead.

Nearly her entire focus was on the inpatients and, in most cases, their parents who



Patients at Camp Achieve can participate in fun activities like fishing.

were staying with them. Her focus has changed to an outpatient program, but her approach is the same.

“The patients still are my number one focus,” said Hollingshead. “Providing them a safe place to grow, to work on goals and create relationships is and will always be there.”

And the need is growing. “Our role has expanded so much that it’s difficult to be available for every patient who may need us, but we make sure each area has special toys to hand out when we can’t be there,” said O’Gorman. “I see such a difference in patient experiences when we get to be involved.”

While healthcare will inevitably keep changing, there is one constant: Our skilled specialists will know what to do.

“Thankfully a skillset in every recreation therapist’s toolbox is the ability to adapt,” said Hollingshead. Perhaps this was never tested as much as it was in 2020, during the onset of the COVID-19 pandemic.

“We’re involved in all areas of the hospital now,” said O’Gorman. “I get called into the outpatient department for blood draws, Botox, removal of casts and rehabilitation. These are things we are already doing, and I see us doing more.”

Pair that spirit of versatility and adaptability with a 100-year legacy of care, and you have a prescription for success for centuries to come. 🍷

### Staff Views

**KRISTEN L. CARROLL, M.D.** | Medical Director, Orthopedic Surgeon | Salt Lake City | 26 years of service  
 “One thing that has not changed is our dedication to not creating financial hardships on families who are already stressed by their child having a possible physical disability; that’s the model we should all be following. That’s the way everyone should be treated.”



# On a Mission to *Innovate*

Throughout its history, Shriners Children's has been a pioneer of progress



*Spine surgeon Purnendu Gupta, M.D., reviews Giana's X-ray after spinal fusion to correct scoliosis.*

Since first opening its doors in 1922, Shriners Children's has initiated innovative treatments to create better outcomes for patients across all of the healthcare system's pediatric specialties.

According to Shriners Children's Chief Medical Officer, Frances A. Farley, M.D., transformative changes in pediatric healthcare always start with the child.

"Because young patients are always at the center of our care, we're constantly looking for new, innovative ways to address that child's needs," she said. "It's incredibly gratifying to see the positive impact we can make for the rest of that child's life."

The commitment to innovation is driven by data, added Dr. Farley. "We're collecting information that demonstrates collaboration between clinical and research results in better outcomes, and that's what spurs innovation."

## **Orthopedics**

The impact of innovation is clearly evident in orthopedics, which encompasses a wide range of conditions including hip problems, scoliosis, limb deficiencies and discrepancies, neuromuscular

disorders such as cerebral palsy and even sports injuries. Advances in diagnosis often start with technology and interpretative data. One example of this is the innovative technology used in our motion analysis centers. In these centers, high-speed cameras, reflective markers and muscle sensors record and measure how a child moves, providing a more complete picture of how the muscles, joints and bones interact (see page 12 for more details).

Shriners Children's is also a pioneer in providing customized orthotics and prosthetics. Our Pediatric Orthotic and Prosthetic Services (POPS) teams create devices, sometimes in a matter of days, that make it possible for children with limb deficiencies or differences to participate in activities they enjoy, including playing musical instruments and sports, and have a better quality of life.

Our award-winning, internationally recognized physicians have also advanced treatment options for patients with scoliosis. For example, the medical team at Shriners Children's Philadelphia developed the vertebral body tethering surgical procedure. This treatment is an alternative to fusion surgery for certain patients. It helps correct scoliosis while allowing a more natural motion, unlike fusion surgeries.



Advances in burn care have led to increased survival rates in children with severe burns.

### Burn care

Shriners Children’s foundation of innovative diagnostics, treatment and rehabilitation expanded to pediatric burns in the 1960s. At the time, our hospitals offering care for burn injuries were established exclusively for burns and related conditions. Our physicians and care teams contributed to many of the significant advancements in acute and reconstructive burn care.

For example, Shriners Children’s pioneered a specialized nutrition plan to reduce muscle loss. Research scientists in the healthcare system also fostered advancements in determining how much fluid to give patients in the first few hours after a burn. Additionally, physicians developed the use of cultured skin substitutes to close acute wounds more quickly. Techniques that are now considered the standard of care in burn scar reconstruction were born out of research by Shriners Children’s staff.

“The survival rate of children who have significant burns has dramatically improved

thanks to the remarkable evolution in both the treatment and recovery phases,” said Dr. Farley. She added that Shriners Children’s commitment to a wrap-around care approach is rooted in studies and research into the emotional and psychological needs of children coping with injuries and other changes.

“We’re not just treating the physical injury,” she said, “but also providing emotional and psychological support that a child and their family needs to heal.”

### Spinal cord injury rehabilitation

In the 1980s, our organization began the nation’s first pediatric spinal cord injury rehabilitation programs for children and teens. These efforts provide a full spectrum of services, including tendon and nerve transfers that can sometimes bring back function and sensation, as well as a range of therapies and experiential programs to encourage confidence and independent living skills.

“With spinal cord injuries, it’s about obtaining and maintaining function,” Dr. Farley said. “We take a collaborative approach to create an individualized treatment plan so every child’s need is met. That may include music or pet therapy, school re-entry services or specialty camps.”

### Craniofacial conditions

Shriners Children’s also offers treatment for a variety of craniofacial disorders like cleft lip and palate. We entered this field because, although facial clefts are one of the most common birth defects in the United States, comprehensive care for these conditions was often difficult to find.

We are proud that multiple Shriners Children’s locations have American Cleft Palate and Craniofacial Association approved teams. Our plastic surgeons have undergone additional training to evaluate and treat craniofacial conditions. In some locations, we offer facial and dental imaging services and 3D surgical planning for more complex surgeries.

Since the effects of a cleft condition can be complicated, our multidisciplinary team includes audiology; ear, nose and throat surgeons; specialists in dentistry and orthodontics; and speech therapists. That team may follow the child from infancy through their teenage years, providing the right care at the right time.

And research into craniofacial disorders is now being done during the prenatal phase, including research of potential genetic factors that may impact craniofacial anomalies. “We’re investigating the genetic basis of how a face is formed so we can better understand when a cleft condition occurs,” Dr. Farley said.

The commitment to innovation 100 years ago still stands today because of Shriners Children’s unwavering goal: to change and improve the lives of children. We are facing the next 100 years with the same motivation to innovate and look forward to what the future brings. 🧠

### Staff Views

**TOMMIE HAZEN, CCLS, CIMT** | Child Life Supervisor | Shreveport | 29 years of service

“When patients stayed for many days without their parents, it gave us opportunities to share special moments with the children entrusted in our care. Beautiful, special and often once-in-a-lifetime experiences continue to happen here. It has been my privilege to share in both the struggles and special moments.”



# Leading

## the Way

100 years of leadership in pediatric orthopedics and prosthetics



**I**n the early 20th century, few hospitals existed to help children with disabling differences in the bones, muscles and joints. When the Shriners International men’s fraternity opened its first hospital in 1922, that began to change. As we mark a full century of serving children, here is a look back at how Shriners Children’s has led the way in orthopedic care and prosthetics.

*Becky Lynn Born, Certified Orthotist Prosthetist, has designed thousands of custom devices for patients in the Midwest.*

### **Pioneers in treating complicated conditions**

“I recall that nearly all the patients were children 10 to 12 years of age and were very badly deformed because they had never received any medical care,” wrote John McGilvray in his book, *The Shriners Finest Hour*, about the Shriners Hospital in San Francisco, which opened in 1923. McGilvray, who specialized in granite for construction projects, was one of the original planners of the Shriners healthcare system. He was also a building consultant on 17 of our locations and provided their cornerstones.



*Patients are able to do what they love because of prosthetic devices.*

At that time, patients often spent a year or more at what was then called Shriners Hospitals for Crippled Children, living in separate boys' and girls' wards, supervised by nurses who lived onsite. Among the conditions treated were "clubfeet, curved spines, tubercular spines and joints, infantile paralysis, and such diseases and deformities that come within the scope and province of orthopedic surgery," wrote McGilvray.

By 1932, Shriners hospitals had helped transform the lives of 35,000 children. A Shriners report at the time said, "The hospitals are equipped with every modern appliance for assisting skillful surgery." Hospitals had physiotherapy pools (a large portable bathtub) for aquatic therapy and iron lungs to help polio patients. In addition to providing clinical care, hospital staff brought joy and laughter to the patients through sports, play and acceptance. As much as possible, children enjoyed time outside on well-kept grounds.

Even in those early days, Shriners Children's provided custom braces at no cost to families. The brace makers were skilled craftsmen. One of them, August "Gus" Dreher, had a brace shop in the basement of the Chicago hospital. His family had made prosthetics

and orthotics as blacksmiths and leather workers in Germany, as far back as the 16th century. "We literally had a forge in the back of our (hospital) shop. They would take a chunk of metal and forge parts for braces," said Gus' grandson, Peter Dreher. "The prosthetic sockets were all done in wood and carved by hand."

The next decade brought the Great Depression, and the increasing incidences of poverty and malnutrition caused a rise in orthopedic-related diseases such as rickets, creating a nationwide demand for care. Physicians worked without pay, supporting themselves in private practice in the community, while seeking to advance orthopedic knowledge and treatment.

### **Shaping the study of pediatric orthopedics**

There were few medical residencies specializing in treating orthopedic conditions, so Shriners Children's physicians helped establish them. For instance, Shriners Children's St. Louis formed a partnership with the Washington University School of Medicine in 1924, which continues to this day. Physicians are faculty members at the medical school, and they share their time to provide care at Shriners Children's.

"The story of the development of pediatric orthopedics in North America cannot omit the enormous influence of the Shriners Hospitals for Crippled Children," writes the Pediatric Orthopaedic Society of North America (POSNA), in its online history. "The surgeons who have worked at these Shriners Hospitals have provided a huge experience in children's orthopedics."

When World War II brought staffing and budget shortages, Shriners Children's Chicago's Chief Surgeon, Harold Sofield, M.D., established the largest, most comprehensive orthopedic residency program in the U.S., in partnership with nearby Hines VA Hospital. J. Warren White, M.D., a well-respected chief surgeon at Shriners Children's Greenville in South Carolina, arranged an affiliated teaching program in children's orthopedics at Duke University, where hundreds of residents received specialized training in pediatric orthopedics.

The tradition of teaching continues to this day. "Over the years, the majority of pediatric orthopedic surgeons received at least part of their education and training at Shriners Children's," said Jerry G. Gantt,

current chairman of Shriners Children's Board of Trustees.

### Maintaining leadership status

In the 1950s, vaccines gradually eradicated polio in the U.S., and new antibiotics reduced the number of bone infections. Shriners Children's focus included conducting research to advance treatment and collaborating around specific conditions. Dr. Sofield developed the first surgically successful treatment for brittle bone disorders. Orthopedists from around the world visited to learn his technique. Dr. Sofield and other Shriners Children's orthopedists helped launch the Orthopedic Research and Education Foundation.

In 1969, Douglas McKay, M.D., of Shriners Children's Shreveport, hosted the first meeting of what became POSNA in a hotel room. Also included were Frank Stelling, M.D., chief surgeon at Shriners Children's Greenville, and Burr Curtis, M.D., a member of the Shriners Children's Medical Advisory Board. These names are among the many past and present physicians recognized as national and international leaders in their respective fields.

### Seeking innovation and progress

The 1960s and 70s brought new materials and new treatment possibilities. Shriners introduced halo traction and more complex anterior spine fusion surgeries thanks to better anesthesia and the development of implantable medical devices.

Better overall healthcare for children meant the average length of hospital stays decreased dramatically, but orthopedic injuries still often involved several weeks in the hospital. Jeffrey Ackman, M.D., began his career with Shriners Children's Chicago in June 1989. "We used to bring a child with a femur fracture into the hospital and put them in traction for several weeks until the fracture started healing. Then we'd put the child in a cast and send them home. That imposed a big burden on the family," Dr. Ackman said. "Someone had to take off work to stay with the child. They were

missing school. Now we're much more likely to do a surgery that allows the child to leave the hospital and heal at home."

The 1990s were a time of change and of continued innovation. Surgeries that once required long stays were now achieved with same-day surgery with the family heading home that same afternoon. This dramatic shift in medicine led some locations to begin to focus entirely on outpatient services a couple of decades later.

Medical innovations continued to be a hallmark of the Shriners healthcare system. For example, the Philadelphia Shriners Children's location was one of only seven sites in the world to pioneer titanium rib surgery in 1991, at the time, a groundbreaking technique to halt progression of scoliosis.

In 2015, Philadelphia Shriners surgeons Scott Kozin, M.D., and Dan Zlotolow, M.D., participated in the world's first pediatric hand transplant. The plastic surgery service at the Chicago location developed a 3D virtual surgical planning platform that is now used by doctors in other institutions. Recent advances at Shriners Children's in vertebral body tethering are changing the lives of patients with spine conditions.

Today Shriners Children's locations routinely treat more than 100 orthopedic conditions and care for more than 100,000 patients per year. Our care has expanded beyond our buildings and borders through telehealth and outreach clinics. Five of our locations that are affiliated with educational healthcare systems were rated in the top 50 pediatric orthopedic programs for 2021 in the United States by *U.S. News and World Report*.

As we begin our second century of caring for children with orthopedic conditions, we are guided by the same mission established in the beginning. Our patients are our first priority as we provide care, conduct research and offer education for medical professionals. 🧠



## The brace makers were skilled craftsmen.

One of them, August "Gus" Dreher, had a brace shop in the basement of the Chicago hospital. His family had made prosthetics and orthotics as blacksmiths and leather workers in Germany, as far back as the 16th century.



### Staff Views

**ALEXANDER VAN SPEYBROECK, M.D.** | *Director Pediatrics* | Southern California | 21 years of service  
"In utero repair of spina bifida has been a game changer. Fixing spina bifida in the mother's uterus has resulted in better developmental and orthopedic outcomes. These babies are often leaving the NICU without the need for any surgery, and they have a much better chance of being able to walk correctly."



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# Knowledge Is Power

A commitment to research leads Shriners Children's to groundbreaking advancements in care

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*The research program has expanded medical knowledge in several areas.*

**S**hriners Children’s is committed to conducting research that will improve both the quality of care and quality of life of children and families. What began more than 40 years ago as a small effort with a \$12,000 budget has become a strong, respected research program – especially in the areas of genetics and acquired musculoskeletal diseases, severe burns and spinal cord injuries – with a multimillion-dollar annual budget.

### Improving lives by expanding knowledge

Shriners Children’s is committed to investing in clinically useful research and increasing the total body of medical knowledge. Although research conducted at our healthcare facilities primarily benefits children, it ultimately impacts people of all ages.

Researchers at Shriners Children’s have contributed to the following:

- Development of artificial skin and improved wound-healing techniques for severe burns
- Development of effective treatments for X-linked hypophosphatemia and osteogenesis imperfecta (OI)
- Refining the use of functional electrical stimulation to help some children with spinal cord injuries, as well as those with cerebral palsy, to stand, walk and use their hands more effectively
- Discovery that a mutation in the gene for fibrillin is responsible for Marfan syndrome
- Discovery of a protein (which has been named the biomarker CXM) that mirrors the child’s rate of bone growth. By using the biomarker CXM, physicians are able to quickly predict the rate of the child’s growth, and they can immediately make decisions about the medical care plan for their patients.
- Improving the survival rate and quality of life of persons with severe burns
- Development of a treatment for OI that involves infusion therapy and has become a standard of care

### Continuing the work

Our research team continues to improve the care we provide. The scientific discoveries in our laboratories lead to new, effective medical treatments. Today, our researchers are breaking ground in some of the most innovative areas of health care, including genetics and motion analysis. This work advances our ability to provide precision care and allows us to develop more effective, personalized treatment plans for our patients. 🧬



### In 2022, our research team will manage the following:

- 26** large-scale basic research and 23 large-scale clinical research grants
- 13** developmental grants
- 4** request-for-proposal projects
- 7** seed grants with Georgia Institute of Technology
- 11** special shared facilities
- 6** research fellowships, as well as multiple administrative awards

*Shriners Children’s is committed to investing in research.*

### Staff Views

**CLAYTON COLLINS, BSN, RN, CPN** | *Clinical Education Coordinator* | Texas | 12 years of service  
 “In the 1960s, a public health crisis emerged: Pediatric burns were prevalent and outcomes poor. The Shriners answered this call and have helped thousands of children with burn injuries ever since through quality care, research and education initiatives. I am especially impressed with our ability to remodel burn scars and improve functional outcomes using a surgical laser.”



# Head of the Class

Shriners Children's mission to share knowledge means helping more kids worldwide



Shriners Children's is dedicated to providing the most amazing medical care possible to kids around the world. An important component of that is found in the second part of our mission statement: providing educational opportunities for medical professionals. Through this effort, we help ensure that more children get the care they need, regardless of where they are.

## Partners in education

Shriners Children's is committed to providing quality educational opportunities for our physicians and other healthcare professionals. We maintain relationships with several major educational institutions, helping us to foster an academic environment committed to providing high-quality education for medical staff and excellent care to patients. In addition, Shriners Children's medical teams help educate health professionals around the world, so that more children may be helped closer to where they live.

Over the years, thousands of physicians have received residency education or post-graduate fellowships at Shriners Children's hospitals. Our renowned physicians and clinicians work to ensure that we pass on best practices, working side by side with fellows to prepare them for a specialty practice in pediatric care. In addition, our facilities offer training programs for medical professionals and students, including nurses, social workers, therapists, prosthetists and radiologists. Many Shriners Children's locations with in-house orthotics and prosthetics capabilities work with their local colleges to provide educational programs for students.

We offer opportunities in a variety of specialties to help medical professionals continue their education, enhance their knowledge, hone their skills and enrich their careers through lectures, seminars, workshops, and a physician podcast series focused on current best practices, innovative medical treatments and research. Physicians from many of our locations often speak at conferences, attend grand rounds and participate in staff in-services.

## Leading by example

Shriners Children's regularly hosts conferences and seminars, and its leaders often present at educational events in the U.S. and abroad. For example, staff from

our Chicago and Philadelphia locations initiated the Howard H. Steel Conference on Pediatric Spinal Cord Injury, a meeting designed to educate clinicians and researchers on evidence-based practice for pediatric spinal cord injury rehabilitation, as well as new treatments and innovations.

In addition, burn care teams participate in annual conferences, such as the American Burn Association's (ABA's) annual meeting and the World Burn Congress. The healthcare system has also been a major participant in the Frank Stelling Pediatric Orthopedic Lectureship, the Carroll Larson Conference and the annual meeting of the Pediatric Orthopaedic Society of North America (POSNA). Physicians from across the globe attend these and other educational events, which allows Shriners Children's medical staff to share their knowledge and expertise with the larger medical community.

For decades, Shriners Children's medical teams have shared their expertise by participating in conferences at local levels, serving the healthcare industry in leadership capacities and training other medical professionals in their core disciplines.

Many of our medical staff are also leaders in associations dedicated to their respective fields of medical practice. Hospital physicians have been deeply involved in POSNA, ABA, the Arthrogyposis Multiplex Congenita Support organization, the American Society for Surgery of the Hand, the American Spinal Injury Association, the Scoliosis Research Society and other leading pediatric healthcare organizations for professionals.

While Shriners Children's has locations in three countries, the system has global reach and impact. Many of our physicians and clinicians routinely travel around the world to provide medical care and share their expertise with local medical communities. Physicians from across the globe also visit Shriners Children's to observe and learn about the latest treatments for orthopedic conditions, burn injuries, spinal cord injuries and craniofacial conditions. 🌐

## Many Shriners Children's locations with in-house **orthotics and prosthetics** capabilities work with their local colleges to provide educational opportunities for students.



*Shriners Children's professional teams share their expertise at conferences and annual meetings.*



### Staff Views

**DONNA LANDES** | Appointment Coordinator | Greenville | 43 years of service

"Many of our families have the resources to go anywhere for treatment. I feel we are chosen not only for the expertise, but also for the love and dedication each employee shows with the patients and their families they come in contact with. This dedication has persevered and not changed over 100 years."



# LEADERS IN care

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Shriners Children's™

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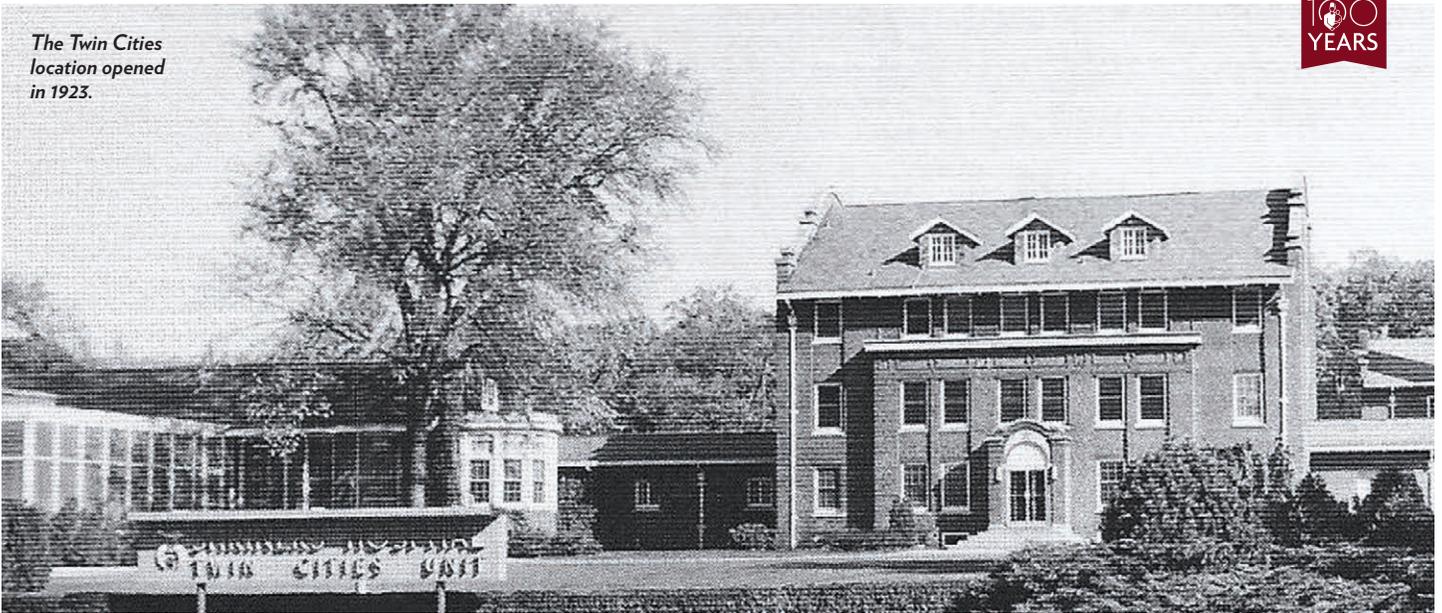
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The Twin Cities location opened in 1923.



## LOCATIONS



- ★ Orthopedics
- Burns
- ✕ Spinal cord injury
- Cleft lip and palate
- ⊕ Outpatient care only; necessary inpatient care provided at an affiliated facility

## Staff Views

**TONY LEWGOOD** | Senior Corporate Administrator | Lexington | 27 years of service

“We truly provide the most amazing care anywhere, the highest quality pediatric orthopedics, burn care, treatment for spinal cord injuries and more. Our Vision 2035 says it all. We want to see more kids, in more places, with less cost. That’s an important mission.”

