Blythedale Children’s Hospital is pleased to welcome Scott M. Klein, MD, MHSA, as its new Chief Medical Officer and Chief of Pediatrics.

Dr. Klein previously served as Vice Chairman of Clinical Services, Associate Medical Director and Director of the Pediatric Critical Care Unit during his ten years at Maimonides Infant’s and Children’s Hospital in Brooklyn. For the past two years, he served as Chief Medical Officer for Hospice and Palliative Care at the Visiting Nurse Service of New York.

“Blythedale is at a very exciting point in its history, and we are thrilled to welcome Scott Klein on board,” said Blythedale President & CEO Larry Levine. “Dr. Klein brings a unique skill set and understanding of the delivery of pediatric specialty care that will enable us to set the standard for how care is delivered to medically fragile children. He brings a high level of compassion and a deep understanding of what it takes to work with some of the New York metropolitan area’s most vulnerable patients.”

Board certified in Pediatrics, Pediatric Critical Care Medicine and Pediatric Hospice and Palliative Care Medicine, Klein views himself as a strong advocate for children and their families as they face difficult medical situations.

“The children we care for at Blythedale are the most medically fragile patients – children with severe respiratory conditions, congenital heart ailments, traumatic brain injuries, severe burns and a host of other injuries or illnesses,” Klein said. “Both they and their families are facing a very difficult path. It is our responsibility to deliver the highest levels of quality healthcare and medical rehabilitation services to help them recover as best and as quickly as possible and look forward to the lives ahead of them.”

“It’s so important to make sure (they) are able to have the best opportunities and experiences in difficult situations,” he said. “Blythedale offers a very positive, optimistic environment, where we can help parents find

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At Blythedale, he joins a dedicated team of board-certified physicians, nurses and therapists with wide-ranging pediatric expertise.

Dr. Klein also cited Blythedale’s new inpatient building, that opened in 2011, as one of several reasons Blythedale appealed to him.

“We have an opportunity to truly differentiate Blythedale from other pediatric providers,” he said. “Blythedale is a unique provider of complex pediatric medical care. That’s very different from a skilled nursing facility.”

Dr. Joelle Mast, PhD, MD, who previously served as Chief Medical Officer, has assumed a new position as Blythedale’s Chief Science Officer, responsible for expanding the hospital’s research program into a nationally-recognized research institute, focused solely on medically fragile children.

“Dr. Mast has played a vital role in Blythedale’s growth over the last two decades,” said Levine. “As we continue to expand our research capabilities, we are very fortunate that she will be leading our research team and overseeing projects that can have a tremendous impact on the lives of medically fragile children.”

Dr. Klein expressed enthusiasm for joining a team dedicated to setting the standard on how pediatric care is delivered.

“People want to know how to do it the Blythedale way,” he said. “We have a wonderful opportunity to look at how healthcare is delivered and affect the way that care is delivered to children, and share what we’ve learned with clinicians at other facilities.”

Klein notes that the current economic climate has forced all hospitals to take a critical look at how healthcare is delivered.

“There are certainly challenges related to healthcare financing that we all are grappling with” he said. “It’s not a matter of stopping or rationing care, but rather offering quality care in a cost-effective and efficient way.”

As Blythedale looks to the future of children’s healthcare with a close eye on how it can best serve the unique needs of children with complex medical conditions, Dr. Klein looks forward to the role he will play in advancing the Hospital’s mission.

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**Blythedale’s Top Services**

- Respiratory Care and Ventilator Weaning - Blythedale is widely recognized as a national center of excellence due to the Hospital’s extraordinary success in weaning fragile infants and children from the technology previously needed to sustain their lives.
- Traumatic and Acquired Brain Injury - Blythedale is a longtime leader in the treatment of brain injury, including Traumatic Brain Injury (TBI) and Acquired Brain Injury (ABI) from various conditions (such as meningitis, encephalitis, tumor, stroke) and post-infectious causes.
- Pre- and Post-Organ Transplants - Blythedale has cared for children pre- and post-organ transplant for many years. The new “positive pressure” isolation rooms allow us to care for children with compromised immune systems even sooner after treatment.
- High Tech Nutritional Support and Feeding Therapy - Blythedale has extensive experience in weaning infants and children from parenteral feeding or tube feeding, and decreasing dependence on tube feedings.
- Burn and Wound Care - Our specialized burn rehabilitation teams provide acute comprehensive inpatient burn rehabilitation and wound care to children who are admitted from regional tertiary care centers.
- Complicated Trauma/Post- Surgical Orthopedics - Blythedale is one of the nation’s leading providers of comprehensive pediatric rehabilitation services.
- Spinal Cord Disorders - Blythedale’s interdisciplinary team specializes in the management of acute spinal cord injury, acute and inflammatory polyneuropathies, and other spinal cord disorders.
- Complicated Pain Syndromes - Blythedale’s interdisciplinary team helps children maximize function, minimize disability and improve coping skills.
- Childhood Cancers - Blythedale’s 24-hour staff of pediatric specialists support the medical and rehabilitative recovery of children with all types of cancer.
- Genetic and Neuromuscular Disorders - Each child’s team works collaboratively to identify goals to improve mobility, foster independence, and address the medical needs of children with rare and complex conditions.

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High-Flow Oxygen Therapy Helps Micro-preemies Breathe a Little Easier

With a growing trend toward using non-invasive ventilation options, and less traching, Blythedale Children’s Hospital’s departments of Pediatric Pulmonology and Respiratory Therapy are ahead of the curve in bringing technology developed for adults to the pediatric population.

For premature infants with respiratory distress syndrome, Blythedale clinicians are finding one of the newer methods of delivering oxygen-enriched air, high-flow nasal cannula therapy, to be highly effective.

“In the respiratory world, the technology is improving every day,” explained Director of Respiratory Therapy Dawn VanSickle. “That said, there is still little specifically designed for the complex needs of these babies who are born at 23 or 24 weeks gestation.”

VanSickle and Blythedale Chief of Pediatric Pulmonology Dr. Milicent Mitchell have modified use of the technology to best suit Blythedale’s fragile population of premature babies, admitted to the Hospital’s Infant and Toddler Unit as soon as their condition has stabilized enough for transport.

“We are in a unique position to be able to provide this extremely high level of care to infants with highly complex needs,” said Dr. Mitchell.

“We are fortunate to have the state-of-the-art medical technology and monitoring equipment, paired with the clinical expertise that you don’t find in all facilities that provide medical care to children.”

Monitoring these babies requires round-the-clock medical care. Blythedale provides 24/7 pulmonary and respiratory coverage by board certified pediatricians and 20 full-time pediatric respiratory therapists.

Blythedale physicians and respiratory therapists work closely with the Hospital’s Admissions team to plan for appropriate candidates for this treatment method. Likewise, discharge planning includes detailed coordination with homecare providers.

“At Blythedale, we have social workers and discharge planning nurses with extensive knowledge of the resources and support needed by families of medically fragile babies to get these children reunited with their families safely,” said Director of Social Work and Care Coordination Susan Murray. “It is extremely important to us to teach our families to be both competent and confident in caring for their children, and we plan for as much support in the home as necessary.”

PROFESSIONAL PROFILE

Scott M. Klein, M.D., M.H.S.A.

Dr. Klein is Blythedale’s new Chief Medical Officer and Chief of Pediatrics.

He is Board Certified in Pediatrics, Pediatric Critical Care, and Pediatric Hospice and Palliative Medicine.

Dr. Klein received his medical degree from the Medical College of Pennsylvania, which is now Drexel University College of Medicine. He also received a Masters of Health Services Administration from University of Michigan School of Public Health.

Dr. Klein is an Assistant Professor of Pediatrics at SUNY Downstate School of Medicine.
Robotic Therapy and tDCS Studies at Blythedale

by Joelle Mast, Ph.D., M.D. Chief Science Officer

Research continues to be a top priority at Blythedale. Our robust Research program is a natural outgrowth of our commitment to children and our culture of innovative clinical and multi-disciplinary care.

Last year, Blythedale’s Research Task Force identified short and longer term goals, including the vitally important ongoing development of collaborations with other universities and organizations. To that end, the Research team identified 39 ideas for future study, and is targeting a “top ten” list which includes studies on Balance Master intervention, urinary tract infection treatment, the use of nebulized medication to control drooling in infants, and feeding frequency in children with long-term feeding issues.

Robotic research continues at Blythedale, with two collaborative studies involving MIT, Riley Children’s Hospital, Rancho Los Amigos, and New York Medical College. In addition, Blythedale has also begun preparation of an exciting new study to be done in collaboration with Columbia, Cornell and Burke. This promising new line of research uses transcranial direct current stimulation (tDCS) and will be started this year. tDCS is a non-invasive, painless tool that has been used to stimulate brain activity in a variety of conditions, including: Parkinson’s, stroke, and sleep disorders. A very small amount of current applied to the scalp will change the underlying brain for up to 90 minutes.

Brain injury leads to suppression of activity in the area injured. This is due to the injury, as well as inhibition from the unimpaired brain. It is as if the unimpaired side says to the injured side, “Okay, you are not doing this right. Be quiet and I will take over.” tDCS can be used to normalize activity by exciting the injured area and by suppressing the inhibition from the impaired side. tDCS has led to improved mobility after stroke in adults. It has also been shown to help with re-learning.

Positive outcomes in pediatrics have been reported in very small studies. We feel it may enhance the gains that we are seeing in our robotic studies. If this is true, then tDCS can be used to enhance many other therapeutic interventions.

Dr. Mehmet Oz Serves as Master of Ceremonies

Dr. Mehmet Oz, acclaimed heart surgeon and host of The Dr. Oz Show, served as emcee of Blythedale’s Annual Spring Event, held at Chelsea Piers in April.

During his opening remarks, Dr. Oz spoke of the important role Blythedale plays in the practice of medicine in the United States, and what separates a pediatric specialty hospital from other children’s care providers.

“Your ventilator weaning program became the gold standard of excellence when you opened it 15 years ago,” said Dr. Oz. “At the time, no one thought this was really something that could be done.”

“You have given rise to centers like yours across the nation,” he said. “You are not only changing the lives of the kids you are touching today, but countless others who benefit from those who have taken lessons from what you do.”

Blythedale President & CEO Larry Levine was humbled by his remarks. “It was a great honor to have Dr. Oz join us, and share his expertise with our guests,” he said. “It was indeed wonderful to hear him speak so highly of Blythedale.”
Germ-zapping Robot Joins Blythedale’s Staff

As hospitals everywhere continue to wage war against increasingly drug-resistant pathogens, Blythedale is pleased to welcome a new member to its Department of Infection Control. Affectionately nicknamed DOATI, short for Destroyer Of All Things Infectious, the Hospital’s new Xenex robot uses pulsed ultraviolet light to safely destroy harmful bacteria, viruses, fungi, and even bacterial spores. The system has been proven to be effective against even the most dangerous pathogens, including Clostridium difficile (C. diff), norovirus, influenza, and staph bacteria, including methicillin-resistant staphylococcus aureus, better known as MRSA.

The Xenex system can disinfect a room in minutes and is easily portable, allowing it to be used throughout the inpatient hospital in patient rooms, classrooms and lounge areas.

“This can be accomplished by multiple means, one being the disinfection process. Although our infection rates are very low, we are always looking to decrease them. DOATI not only enhances our already rigorous cleaning and disinfection process, but helps make us even more proactive in preventing infections.”

Because the Xenex robot uses UV light, it is able to reach every surface in the room, and it does not leave a chemical residue. To disinfect a room after the Hospital’s standard cleaning procedures are complete, a specially trained technician wheels the robot into the room, positions it beside the bed, begins the automated sequence, and then leaves the room. The sequence is complete in five minutes, and the room is safe to re-enter immediately.

Blythedale is the second hospital in the New York metropolitan region to use a Xenex robot, and one of only two freestanding children’s hospitals in the country to have one.

Poetry Therapist John Fox Helps Patients Find Their Voice

In an event coordinated through Blythedale’s Child Life department, internationally recognized poetry therapist John Fox was on site for three days running small group sessions and visiting with patients bedside. Fox, a process-oriented therapist, strives to empower people to give a voice to their experience. Poetry therapy is described as the intentional use of poetry and other forms of literature for healing and personal growth.

According to Child Life Coordinator Lisa Levinson, poetry therapy is a natural extension of the Child Life philosophy to provide creative outlets to process emotions and foster self-esteem. “John’s process melds perfectly with ours. We are all about creating the ‘right space’, an environment of support, letting each person feel ‘heard’ and validated, all while promoting acceptance.”

“Writing allows us to discover how vulnerabilities and strengths can coexist, even thrive together,” said Fox. “Poems can give voice to what is raw and wounded in your life and that honesty can bolster and guide you through rough times.”
Nicole began her junior year at Greenwich High School with much to look forward to. An honors student and tri-varsity athlete, the vivacious teen was looking forward to learning to drive and prepping for college. A diagnosis of leukemia was not in the plans. Nonetheless, when she received the news on September 10th, her mother says the tears she shed in the doctor’s office would be the last ones she would cry over her diagnosis.

Nicole bravely began an aggressive round of chemotherapy within the week, and 16 days later developed sepsis and nearly lost her life. While in a medically induced coma, the teen suffered two strokes on the right and left hemispheres of her brain, affecting her motor skills and speech. Once stabilized, Nicole was transferred to Blythedale’s Traumatic Brain Injury Unit in late October for intensive rehabilitation and medical management of her complex condition. Upon arrival, Nicole was extremely weak and unable to move any of her extremities, nor hold up her head meaning she couldn’t do anything independently. She also required a nasogastric tube for feeding.

“When she was admitted, Nicole was still emerging from an acquired brain injury due to the stroke, she required maximum assistance for all her activities of daily living, and she was still undergoing chemotherapy,” said Dr. Kathy Silverman, Coordinating Pediatrician for the Pediatric, Adolescent and TBI Units. “Her needs were complex, and her treatment plan included being followed closely by the brain injury team and intensive therapy.”

Working tirelessly with her physiatrist and therapists, Nicole quickly gained enough strength to sit up, stand, and ultimately begin walking again.

“I thought the best motivator was using her love for field hockey and lacrosse because this incorporated so much of what we needed to work on... increasing her overall strength and endurance, balance, weight bearing and shifting,” said her physical therapist, Maureen Carroll. “And because of the strokes, we also used a lot of cognitive activities like dual task (a motor activity plus a cognitive activity).”

By December she was playing lacrosse and field hockey with her physical and occupational therapists in Blythedale’s Therapy Village. According to her enthusiastic medical team, her progress is unprecedented.

“Blythedale has a strong interdisciplinary team with each member of the team being expert at what they do,” said Dr. Silverman. “We are well equipped to manage patients with acute rehabilitation needs and complex medical issues.”

What was initially projected to be a five or six-month inpatient stay quickly turned to discussion surrounding discharge at the two-month mark. On January 3rd, and with her cancer in remission, Nicole was well enough to return home. She returned to Blythedale for a few weeks for follow-up physical and speech therapy, and continues to receive chemotherapy.

“It is hard for people to comprehend the full extent of what Nicole has been through in such a short time. Only those at Blythedale who lived minute to minute with us, who took this child who literally couldn’t do anything and made her whole, who started as strangers and became a life-long part of our extended family, truly know how grateful we are to have our daughter back,” said Nicole’s mother, Michele. “If Nicole is a miracle, it is only because she had miracle workers.”

Today, Nicole is back on the athletic field, training with her teammates in preparation for her senior year, and preparing to apply to colleges.
TEACHING AND TRAINING

Training the Next Generation of Clinicians

Education is an important component of Blythedale’s mission. Serving as a training ground for the next generation of pediatric specialists, more than 100 colleges and universities rely on Blythedale to provide clinical training to scores of professional students in wide-ranging fields.

Thirty-seven medical residents and fellows spent at least a portion of their residencies at Blythedale in 2012. These physicians were graduates from the leading medical schools in the U.S. and abroad, and completed rotations in Rehabilitation Medicine, Orthopedics, Pulmonology and Psychiatry.

In addition to providing clinical training experiences for 175 nursing students in 2012, the Hospital provided more than 50 clinical internship opportunities to students in a variety of departments, including Respiratory, Physical, Occupational and Speech Therapy, as well as Social Work and Child Life.

This year, we have added medical students from New York University who select a rotation in Children with Special Needs.

Uniformly, we receive high praise from students on their clinical experience at Blythedale and for the excellent teaching provided by our clinical staff.

Blythedale Trains First Responders in Pediatric Care

Earlier this year, Blythedale Children’s Hospital, in coordination with the Westchester Regional EMS Office, Westchester County DES, and NYS EMS for Children, offered a special pediatric CME series to first responders of the Westchester EMS region.

Courses tackled subjects vital to first responders, including Traumatic Brain Injury, Autism, Technology and Care of the Infant or Child, and Child Abuse/Neglect. The subject matter was presented by clinical experts from Blythedale Children’s Hospital, including physicians, nurses, therapists and other clinical experts.

“We are proud to partner with Westchester County Department of Emergency Services in providing this educational series to first responders,” said Blythedale Children’s Hospital Chief Quality Officer Lois Allen. “It affords us the opportunity to share our wide-ranging expertise, as well as to give back to the community in a way that can benefit a broad pediatric population.”

For information on future training opportunities, please contact Lois Allen at (914) 592-7555, ext. 71470, or lallen@blythedale.org.

REFERRAL INFORMATION

To make a referral, please contact:
Theresa King, R.N.
Director of Clinical Outreach
tking@blythedale.org
914-831-2431
Pager: 877-325-6394

To schedule a parent tour, please contact:
Susan Murray, L.C.S.W.
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Blythedale Celebrates Nursing Recognition

Blythedale recognized more than 210 nurses and nursing assistants during National Nurses Week in May.

Blythedale’s highly trained nursing staff was praised for their extraordinary skill, commitment and compassion during a reception held at the Hospital.

“As Blythedale continues to care for some of the region’s most medically fragile infants and children, we are deeply appreciative of our Nursing staff, that continues to rise to the challenge with grace and enthusiasm,” said Blythedale President & CEO Larry Levine.

Pictured above: Chief Medical Officer & Chief of Pediatrics Scott M. Klein, MD, MHSA, Chief Nursing Officer Jill Wegener, MSN, RN, Nursing Director Infant & Toddler Unit Kimberly Everett, RN, BSN, Chief Operating Officer Maureen Desimone, RN, and President & CEO Larry Levine.