Defining A New Era.

Children’s National is defining a new era in pediatric medicine...

An era where world-class care is available to all children, regardless of where they live, through a multidisciplinary team of pediatric experts.

An era where each child is not left behind in our healthcare system and has access to all immunizations.

An era of discovery of new treatments and cures to the world’s most devastating diseases.

An era where future pediatric healthcare providers are trained by world-renowned experts in their fields.

At Children’s National, the mix of world-class care, advocacy, research, and education creates miracles every day.

Defining a new era of futures for children regionally, nationally, and throughout the world.
Every day at Children’s National Medical Center, doctors, nurses, and staff play a significant role in the lives of patients and families in our region, around the country, and across the world. Our multidisciplinary team aims to transform children’s health by defining a new era in pediatric medicine.

It continues to be an exciting time at Children’s National. It has been one year since the opening of our Inpatient Tower, featuring private rooms and family-centered amenities. In August 2008, Children’s National opened new research space atop the main hospital, expanding our dedicated research space to 100,000 square feet. In the spring of 2009, we will open a new Neonatal Intensive Care Unit on the sixth floor of the Inpatient Tower, as well as new operating rooms on the second floor of the main hospital.

These physical changes, along with clinical and technological advances, such as a transition to electronic medical records, underscore our commitment to patient safety and quality care. In the past year, Children’s National was again recognized by U.S. News & World Report as one of the best pediatric hospitals in the country and by The Leapfrog Group as one of only seven children’s hospitals acknowledged for their commitment to quality and safety.

Several new talented physicians joined the faculty at Children’s National this past year. With these new recruits, approximately half of Children’s clinical division chiefs are research-intensive, as compared to less than a quarter only five years ago. Lawrence Jung, MD, chief of Rheumatology, has more than 20 years of experience researching and treating pediatric immunologic and rheumatologic diseases. Richard Levy, MD, associate chief of Anesthesiology and Pain Medicine, serves as director of Cardiac Anesthesia, managing the only dedicated team in the region. D. Ashley Hill, MD, chief of Pathology, joins Children’s National from St. Jude Children’s Research Hospital and is an expert in rare childhood lung tumors. Randall Burd, MD, chief of Trauma and Burn Services, will help expand our reach in Northern Virginia and promote our community-based research.

In these tough economic times, Children’s National must continue to fulfill our mission and accomplish our strategic goals and objectives. Although the healthcare industry has been relatively stable and has grown substantially over the last decade, we are not immune to the fall-out from today’s economic environment. We are taking prudent, common sense actions to protect Children’s National and our mission during these difficult times. We are committed to transforming children’s health and are working diligently to best position Children’s National as one of our nation’s premier pediatric medical centers. The need for Children’s National is greater than ever, especially for those children and families who depend on us as their safety net provider — the cornerstone of our mission.

We are excited to share some of this year’s major accomplishments with you.
Defining A New Era...
At Children’s National, the 48-bed Neonatal Intensive Care Unit (a Level IIIC, the highest distinction available by the American Academy of Pediatrics guidelines) is one of the region’s major neonatal referral centers for sick newborns and/or infants, admitting more than 700 patients per year. Nursing is integral to Children’s mission, practicing at the highest level of professional, ethical, clinical, and scientific standards in the delivery of individualized care.

Historically, Children’s NICU focused on recruiting nurses with critical care experience, in particular neonatal critical care expertise. The thought was that large numbers of new nurse graduates would be too difficult to train in this high-acuity setting. The NICU put this theory to the test and enhanced its new graduate NICU Internship and Fellowship Program.

Experienced staff nurses are the backbone of the unit and the program, and their willingness to engage the interns is contagious. “One of the highlights of my extended career here at Children’s is mentoring new nurses, watching them mature in their role and provide family-centered care,” said Deborah Adams, RN, BSN, who has 17 years of experience in the NICU.

Everyone attends a course on precepting, and weekly meetings with preceptors, orientees, and educators help the group to carefully examine progress and plan for new experiences on the unit. “We take the approach that education takes a village,” said Tara Taylor, RN, MPH, NICU nurse manager. “Our experienced nurses brought such a wealth of knowledge to the effort that they made it look easy!”

Interns are carefully matched with preceptors based on preferred learning style. The program includes a mix of clinical and didactic learning sessions. Each specialty within the hospital is engaged in the training, which strengthens interdepartmental relationships and provides the new nurses with exposure to a wide-range of specialized skills.

Members of the NICU Parent Advisory Council speak about their firsthand experiences to further emphasize the importance of family-centered care.

The goal was to hire and retain 50 new staff nurses. The NICU exceeded this goal, successfully bringing on 62 new staff nurses. The NICU only uses Children’s staff nurses, and staff morale and engagement is high. Nurses are able to form relationships with each other early on, improving communication skills and teamwork.

Improved quality indicators, such as family satisfaction scores, will be included in the submission of Children’s Magnet application, which is the highest national and international recognition of an organization’s nurses. The NICU received the District of Columbia Hospital Association’s Patient Safety Award for its work in reducing bloodstream infections. The Magnet environment provides the support, education, and mentoring needed for nurses to reach their highest potential.

The nurses the NICU recruits and retains are the vision of optimal staffing and best practice for the future. In May 2009, Children’s National will define a new era in clinical excellence and family-centered care with the opening of a state-of-the-art 54-bed unit featuring private patient rooms and the latest technologies.
Imagine a world where every child has access to quality health care; a world where every child has access to vaccines that will help protect him from diseases. At Children's National, our mission is to extend quality health care beyond our hospital into the community.

Supported by the District of Columbia Department of Health and in partnership with District of Columbia Public School’s Immunization Task Force, community-based organizations, and Medicaid Managed Care Organizations and providers, Children’s immunization program is an integral part of the city’s collaborative efforts to ensure that all children are fully immunized.

The Preschool Immunization Program serves as a liaison between local Licensed Childhood Development Centers, Head Start programs, and the District of Columbia Department of Health Immunization Program to ensure compliance rates, records, and updates are sent to the District’s Immunization Registry. In 2007, through Dr. Bear’s Express mobile unit, the Children’s National team assessed 666 children and immunized 405 children.

It’s Wise to Immunize is an annual campaign to increase immunization awareness and compliance among families in Washington, DC. The It’s Wise to Immunize Hotline allows parents and/or guardians to speak with qualified nurses about their child’s immunization compliance, obtain an official immunization record, and link to a primary care provider to obtain a medical home. In 2007 the hotline received more than 100 calls. At the It’s Wise to Immunize Family Fun Day event in August, more than 120 District of Columbia Public School students were assessed and immunized, ensuring they could return to school and meet federal mandates.

Advocacy Highlights 2008:

- Developed an intra-institutional partnership with the Diana L. and Stephen A. Goldberg Center for Community Pediatric Health, the clinical arm of the initiative, to identify and implement best practices to improve preschool and school-age immunization rates. As a result, 4,223 individual records were assessed during sick and well-child visits and the Goldberg Center administered vaccinations. Approximately 11,755 vaccines were identified as due or overdue.
- Expanded the Community Education Program to include English and Spanish CPR, infant care, and baby-sitting classes taught by a certified community health educator or other certified health professionals.
- Secured Child Health Center Board funds to expand Dr. Bear’s Express, a mobile unit, to include oral healthcare evaluations.
This year featured some of Children’s greatest accomplishments in facility planning and upgrades. In November 2007, Children’s National opened three new floors of our state-of-the-art Inpatient Tower, featuring private patient rooms with bathrooms, internet access, laundry facilities, and other family-centered amenities.

The third floor houses the region’s only Pediatric Cardiac and Neuro Intensive Care Units, in addition to an enhanced Pediatric Intensive Care Unit. The ICUs feature the latest in technology, including mobile medical booms for 360-degree access around a patient, wireless communication, and personnel tracking for safety and efficiency.

The fourth floor is dedicated completely to the Center for Cancer and Blood Disorders, with an outpatient and inpatient unit. The Blood and Marrow Transplantation Unit exceeds quality standards with a separate air system, which provides the highest level of infection control for patients.

The fifth floor includes a Surgical Care Unit and an innovative Burn Unit, designed with input from local fire chiefs and featuring pain distraction therapies. The floor also includes a Neurology Unit with the latest in video EEG monitoring with wireless recording capabilities.

Children’s National continues to expand facilities in the main hospital location. In August 2008, Children’s Research Institute opened a new floor of dedicated research space on the top floors of the hospital. In March 2009, two additional operating rooms will open, expanding our surgical capabilities. In May 2009, Children’s National will open a new 54-bed Neonatal Intensive Care Unit.

Defining a New Era in Family-Centered Facilities

Children’s Center for Cancer and Blood Disorders in Northern Virginia

In June, Children’s opened a new center for pediatric hematology and oncology patients in the region. The renovated, brightly colored, family-friendly facility allows the team to expand its services to provide patients with world-class care in their community. The facility has expanded infusion bays, a family café, and an area for patients to participate in art therapy. The center has more than 12,000 patient visits each year and the center’s physicians, physician assistants, and nurse practitioners have more than 200 years collective experience in caring for these complex patients, from the moment of diagnosis.

Children's Center for Cancer and Blood Disorders in Northern Virginia

Renowned pediatric experts, as featured to the right, provide:

- Multidisciplinary clinics treating hematologic and oncologic disorders
- Immediate blood count and blood chemistry results through an on-site laboratory
- Medications for infusions for both hematologic and oncologic patients, distributed by an on-site pharmacist
- Regular well check-ups, sick visits, and outpatient followup care
- IV pain management for sickle cell disease and cancer-related pain
- Chemotherapy
- Bone marrow and spinal taps with sedation
- Blood and platelet transfusions
- Access to national experimental protocols
When you first meet 8-year-old Matthew Costis he will probably greet you with a joke. A stream of people comes in and out of Exam Room 11, not for an examination, but to visit with this young comedian. If you ask Matthew why so many people visit him, he will tell you they are coming to share in his good humor.

Matthew is so full of joy and life that you would never know he had surgery less than a year ago to remove part of a brain tumor. Since then he has been receiving additional therapy at Children's National through the Brain Tumor Institute.

“The moment we entered Children’s National we were greeted with doctors and nurses who truly cared about Matthew,” said Matthew’s father, Tom Costis. “Everything was happening so fast, but each doctor came and spoke to us about what was happening.”

In February 2008, Matthew began complaining about a severe headache and was vomiting frequently. His parents rushed him to the emergency department. The diagnosis was every parent’s worst fear—Matthew had a glioblastoma multiforme (GBM), one of the most aggressive types of brain tumors. Less than one in five people diagnosed with a GBM survives as long as two years after diagnosis.

Children’s Brain Tumor Institute is a multidisciplinary, internationally recognized collaboration that evaluates one of every 10 children in the United States with a brain tumor. By finding new treatments with fewer long-term effects, the team aspires to increase patients’ quality of life, as well as overall survival rates.

The Institute also boasts one of the most active clinical research programs in the country. As the only center in the region and one of only a handful in the country with access to Children’s Oncology Group’s Phase I trials, Pediatric Brain Tumor Consortium trials, and Neurofibromatosis Consortium clinical trials, Children’s National can offer patients access to the newest therapies.

Matthew’s treatment has included a combination of chemotherapy and radiation therapy as well as newly developed medications aimed at attacking tumor blood vessels.

Matthew receives treatment through a national clinical trial developed by Tobey MacDonald, MD. Roger J. Packer, MD, leads the Brain Tumor Institute (Both are pictured to the left). Matthew now comes to the Brain Tumor Clinic twice a week for an infusion of this new medication and he has had virtually no side effects.

Today Matthew is focusing on football, school, and his latest jokes. His motto is simple, “I listen to my doctors and just deal with it.” The Costis family is taking it one day at a time.

“We are grateful to be a part of this clinical trial,” said Matthew’s mother, pictured with Matthew. “The Brain Tumor Institute has given us hope.”

The Brain Tumor Institute is defining a new era in which children and their families can envision a future with children living full lives, free of cancer.
In 2008, Children's National recruited expert Clarivet Torres, MD, (pictured to the right) to lead a multidisciplinary intestinal rehabilitation effort as part of an Intestinal Rehabilitation Program (IRP), one of a few programs nationwide. Dr. Torres has extensive experience with liver and intestinal transplantation and is an internationally acknowledged leader in the management of children with intestinal failure, including short bowel syndrome. The program provides individualized, comprehensive medical, dietary, and surgical treatment with the goal of improving the long-term survival for these children. Pervazhi Mohan, MD, director of Hepatology, supports the program through the knowledge and management of complex liver disease.

The success of Dr. Torres’ program can be related mostly to a comprehensive medical and surgical approach and close follow-up by trained medical staff. The medical treatment of IRP patients focuses on an aggressive dietary management with very precise control of the metabolic balance as well as prompt and effective treatment of patient complications. Aggressive use of specialized enteral feeding programs by the experienced medical team helps to maintain good nutrition and hydration, which are important factors in long-term survival.

Anthony Sandler, MD, chief of General and Thoracic Surgery, who leads one of the most experienced and renowned pediatric surgery teams in the United States, plays a critical role in the IRP. Although the primary management of short bowel syndrome is medical, there are many circumstances where surgical intervention may offer great therapeutic benefits. Dr. Sandler performs two different complicated bowel lengthening surgeries at Children's National including the step-enteroplasty and Bianchi procedures.

Patients requiring intestinal rehabilitation often must stay at the hospital for an extended period of time. The program’s dedicated nurse specialist Pat Zavosky, RN, dietician Karen Hintze, RD, and Krystal Artis, PA, not only help with the treatment of patients, but coordinate the often difficult logistics of the family’s visit. Ongoing parent education and support are important components of the program.

Although it is challenging to successfully treat children with intestinal failure, newer data provide hope for a new era of more successful outcomes. Dr. Torres recently summarized her experience from the past year at Children's National—the survival rate of the patients was 97 percent. These data are dramatically better than those published in previous medical literature and provide real hope for an improved future for children with intestinal failure, including those with chronic liver disease.

“Through our research and treatment of children with short bowel syndrome and other disorders, I hope Children's can define a new era in pediatric intestinal rehabilitation,” says Dr. Torres.
Defining a New Era Across the Globe

Thanks to Children's Telemedicine Program, pediatric patients don't have to be physically located in our facilities to receive the expert care of Children's multidisciplinary team. Using telemedicine, Children's National collaborates with other organizations to define a new era of clinical care and health education by assisting physicians in providing the best possible care for their patients.

The team also provides second opinion consultations to confirm diagnoses and/or review a current treatment plan. To help train medical staff around the world, Children's National offers didactic lectures on a variety of topics, interdisciplinary team case discussions, and customized education in a focused clinical or surgical area.

Children's Telemedicine Program, directed by Molly Reyna, serves community hospitals, suburban health centers, inner-city health clinics, and international partners across a wide range of pediatric subspecialties, including neurology, cardiology, genetics, radiology, and general surgery. Distance learning initiatives are focused throughout the world, including Germany, Morocco, Uganda, Qatar, Kuwait, United Arab Emirates, and Iraq. Children's digital echocardiography laboratory enables physicians throughout the world to instantly send Children's nationally recognized pediatric cardiologists echocardiograms for review. The lab was one of the first digital echocardiography laboratories in the world and is one of the most advanced in the United States, performing more than 14,000 studies annually.

This past year, Children's National announced a partnership with organizations in Morocco to provide clinical support and share medical developments and health education. The new partnership expands Children's international reach, providing videoconferencing for live cases and distance education.

"This partnership with our colleagues in Morocco brings us closer to providing all children with the quality care they deserve, no matter where they live," said Craig Sable, MD, medical director of the telemedicine program (pictured to the left).

Telemedicine complements humanitarian efforts by the organization, including members of Children's National Heart Institute (CNHI) to improve access to life-saving cardiac surgery and interventional cardiac catheterization throughout the world. CNHI brings together pediatric cardiac surgeons, anesthesiologists, and dual-boarded cardiac intensivists to provide high-quality care. Dr. Sable leads medical missions to Uganda that focus on treatment of patients, education, and advancing the quality of care. His work is supported by the Samaritan’s Purse Children’s Heart Project, Larry King Cardiac Foundation, and many other generous donors. Nearly 100 children have received life-saving treatment and the goal of ultimately building a sustainable cardiac surgery center in Uganda is becoming a reality.

Children's Telemedicine Program is funded in part through the Mosaic Foundation, Intelsat, iDirect, Cisco, and Tandberg.

Children's National believes that children deserve the best quality care and cutting-edge technology, and is defining a new era where standards exceed expectations.
At Children’s National Medical Center, providing world-class care is more than the support we provide to each child and family we serve. Our leaders in pediatric medicine extend their knowledge beyond the realities of today’s medicine through research of innovative treatments that will tackle the complex disorders affecting children.

Children’s Research Institute’s (CRI) investigators are leading the way on harnessing one of medicine’s most promising innovations—using individualized molecular therapies (personalized medicine) for the potential treatment of common disorders.

In his study of Duchenne muscular dystrophy, world-renowned geneticist Eric Hoffman, PhD, director of the Center for Genetic Medicine Research at Children’s National, leads a team of scientists who work to uncover the similarities and differences among individuals born with the disease. These studies show how to target treatments to an individual by using genes. Children’s team identified a new treatment in animal models with Duchenne called “exon-skipping,” which systematically delivers a molecule-sized, specific drug that permits the muscle to “skip over” the genetic mutation that causes muscle deterioration in muscular dystrophy.

Defining a New Era in Pediatric Research

Children’s scientists apply these approaches to other disorders as well. The team identified genes that increase the likelihood for developing symptoms of metabolic syndrome, which are precursors to type 2 diabetes. Many of CRI’s scientists are now studying how targeted interventions, including increased exercise and diet, impact the disease.

Targeted molecular therapy is the hope for patients with brain tumors. Anthony Sandler, MD, chief of the Division of General and Thoracic Surgery, pioneered a vaccine that uses genetic material from a patient’s actual tumor to teach the immune system how to fight the tumor. Subsequently, Roger Packer, MD, senior vice president of the Center for Neuroscience and Behavioral Medicine, collaborates with Tobey MacDonald, MD, and Brian Rood, MD, to study genes and proteins that foster tumor growth and ways to control it.

Investigators also research pharmacogenetics—how a person’s genetics can impact the way his or her body processes medication. This means pinpointing the reasons why some children, such as those with sickle cell disease, are not helped by common pain-relieving medications.

Children’s National is a leader in personalized medicine, striving to solve some of the most complex mysteries in pediatric medicine, and define a new era in the treatment of childhood diseases.
For years, Diana and Stephen Goldberg have helped improve the lives of children as advocates and volunteers for Children's National. Seven years after giving $25 million to Children's National, longtime supporters Diana and Stephen Goldberg donated another $25 million. This combined $50 million commitment is the largest in the history of Children's National. The gift, in the form of a “challenge gift,” came as the hospital prepares to publicly launch its historic $500 million fundraising campaign.

The Goldbergs’ generosity has helped to pave the way for Children's National on its mission to transform pediatric health. In October 2006, the Goldbergs challenged the board members of Children's National to pledge or raise $25 million before December 31, 2007, and offered a $25 million matching gift if they could meet the goal. The volunteer Board of Directors and the Children’s National leadership team exceeded the Goldberg Challenge, raising more than $30 million. With the $25 million match, the challenge brought in more than $35 million that will support nearly 100 health areas and most divisions of the medical center.

“I can’t say enough about the ways Diana and Stephen have strengthened Children’s National as an institution,” said Edwin K. Zechman, Jr., president and chief executive officer of Children’s National. “They have always encouraged us to think big, so it was fitting that rather than making a traditional gift, they created a challenge that energized our board members. But more important, Diana and Stephen’s support is enabling more children and their families to have access to the best medical care in the world, and you can’t put a price tag on that.”

An integral component of the Goldbergs’ long-term partnership and commitment to Children’s National is their previous gift of more than $25 million for initiatives such as program expansion and creation of an endowment in the Diana L. and Stephen A. Goldberg Center for Community Pediatric Health, professorships designed to honor the best and brightest pediatric specialists, and other compelling projects throughout the organization.

In addition to their generous charitable support, the Goldbergs have been actively involved as leaders and advocates. Diana serves as chairman of the board of Safe Kids Worldwide and served as chairman of the board for Children’s National from 2002 to 2005. Her service also includes leadership on the boards of the Children’s Hospital Foundation, Children’s Hospital, and the Child Health Center Board, of which she was president from 1994 to 1996.

Children’s National is eternally grateful to Diana and Stephen for their commitment, and is proud to call them friends.

Patients Taylor, Erin, and Jade Buckles (pictured to the left) recognized the Goldbergs for their generosity at an event in their honor this fall. To learn more about Children's Hospital Foundation visit www.childrensnational.org/give.
My Hospital is Helping to Define my Future

By Jessica Gregory

As you can tell from this report, my hospital has accomplished many things during the past year. They have opened new facilities, developed new treatments, and even helped to train new doctors and nurses entering the field. These are just a few of the reasons why I like my hospital.

My name is Jessica Gregory and Children’s National Medical Center helped me to define what I can do. I am one of the 360,000 kids that Children’s National Medical Center treats each year. I may be 10 years old, but I have been a patient at Children’s National since the day I was born.

I was born with spina bifida, a birth defect, which means that I had an incompletely formed spinal cord and a hole in my back. An ambulance brought me to Children’s National to have surgery to close the hole. That was the first of many issues that I have faced over the years. I have had four surgeries and had problems with my legs (I had to wear braces and go to physical therapy). I had to learn to catheterize myself so that I could go to school like other kids my age.

I had a team of doctors and nurses, like orthopaedic surgeon Laura Tosi, MD (pictured to the right), urologist Hans Pohl, MD, and nurse Doris Carlson, RN, who told me not to be scared, but to make the best of my challenges. No one knew if I would be able to walk, run, or play without braces. My doctors kept encouraging me to dream of the future and work hard every day.

One day my physical therapist encouraged me to try a new form of therapy, kung fu. I started taking Little Ninja classes. Martial arts was not easy for me at the beginning and I would fall a lot, but I always got back up.

Today I can run and kick and I have a blue belt in kung fu. My doctors and nurses never gave up on me and always made me feel better.

I am proud of my hospital and everything it does to help kids like me.

“Jessica has transformed from a little baby girl with malformed feet and major problems with her bladder and bowels, to a happy energetic child that always sees the glass half-full.”

–Sheila Gregory (Jessica’s Mom)
Fiscal Year 2008 OPERATIONAL HIGHLIGHTS

SEPTEMBER
Children’s National is one of only eight children’s hospitals in the country named to The Leapfrog Group’s 2007 Top Hospitals list, based on results from the Leapfrog Hospital Quality and Safety Survey.

Children’s ECMO Program receives prestigious Center of Excellence recognition by the Extracorporeal Life Support Organization. Children’s program annually treats more than 60 pediatric and neonatal patients.

OCTOBER
Children’s National Medical Center and Washington Hospital Center announce the opening of a medical office in the United Arab Emirates (UAE). The new office, located in Abu Dhabi, will bring the expertise offered at the two Washington, DC-based hospitals to the citizens of the UAE and other Gulf countries.

NOVEMBER
On Sunday, November 18, 2007, Children’s National moves approximately 80 patients into its newest wing of the hospital—the Inpatient Tower. In just under eight hours, six units, including Critical Care, Heart and Kidney, Surgery, Hematology and Oncology, and Neurology and Orthopaedics, move patients to the new tower.
MARCH

The Washington Nationals Dream Foundation partners with Children’s National Medical Center to make the dreams of children and adolescents with diabetes come true. The Dream Foundation has pledged $2 million toward the creation of a Pediatric Diabetes Care Complex, a 6,500-square-foot area that will provide room for clinical treatment and educational studies about diabetes in children. The full cost of the complex is estimated at $5 million. Pictured is Fran Cogen, MD, director of Children’s Childhood and Adolescent Diabetes Program and Dmitri Young, a player from the Washington Nationals who has diabetes.

Children’s announces a partnership with organizations in Morocco that will enable clinicians in Washington, DC, to provide clinical support and share medical developments and health education via videoconferencing. The new partnership expands Children’s National’s international reach through the Telemedicine Program, providing videoconferencing for live cases and distance education, as well as providing access to medical records via a physician portal.

APRIL

Children’s Echocardiography Laboratory is nationally accredited by the Intersocietal Commission for the Accreditation of Echocardiography Laboratories (ICAEI) in pediatric echocardiography, pediatric transesophageal echocardiography, and fetal echocardiography. It is one of less than 25 labs across the country to receive such a distinction, and the only pediatric lab in the Washington region to receive accreditation within these areas of pediatrics.

MAY

Children’s National and Zayed Giving open a specialized pediatric mobile health clinic in the United Arab Emirates (UAE). The mobile clinic, stationed next to the Marina Mall in Abu Dhabi, provides medical treatment, educational programs, and screening services for children and their families.

Children’s National completes phase two of the Clinical Transformation Initiative, which transitions all inpatient units to electronic medical records, enhancing world-class care and quality outcomes through the use of best-practices in quality, safety, and work flow.

Children’s National is named a top hospital by U.S. News & World Report.
## Fiscal Year 2008 FINANCIAL HIGHLIGHTS

### ASSETS:

As of June 30, 2008  

<table>
<thead>
<tr>
<th>Description</th>
<th>$ in Thousands</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and short-term investments on hand as of June 30, 2007</td>
<td>60,166</td>
</tr>
<tr>
<td>Amounts owed by insurance companies, government agencies, patients, and other entities</td>
<td>113,448</td>
</tr>
<tr>
<td>Inventory on hand to meet the needs of our patients</td>
<td>3,340</td>
</tr>
<tr>
<td>Net value of property, plant, and equipment</td>
<td>320,770</td>
</tr>
<tr>
<td>Investments to be held longer than one year</td>
<td>136,440</td>
</tr>
<tr>
<td>Proceeds from the sale of bonds to pay for capital expansion, renovation, and equipment</td>
<td>280,051</td>
</tr>
<tr>
<td>Funds contributed over the years by our friends in the community to pay for specific projects</td>
<td>73,191</td>
</tr>
<tr>
<td>Other assets</td>
<td>135,543</td>
</tr>
</tbody>
</table>

Total assets, the strong financial base that ensures our ability to continue to care for sick children  

$1,122,949

### LIABILITIES:

As of June 30, 2008  

<table>
<thead>
<tr>
<th>Description</th>
<th>$ in Thousands</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amounts owed to vendors, employees, and other third parties as of June 30, 2007</td>
<td>215,950</td>
</tr>
<tr>
<td>Amounts borrowed to fund the projects and purchase the equipment needed to serve our patients, payments due within a year</td>
<td>6,001</td>
</tr>
<tr>
<td>Amounts borrowed to fund the projects and purchase the equipment needed to serve our patients, payments due in the future</td>
<td>427,261</td>
</tr>
</tbody>
</table>

The difference between what we own (our assets) and what we owe (our liabilities), representing the community's interest in Children's National Medical Center  

473,737

Our current liabilities, plus the community's interest, equals our total assets  

$1,122,949
Fiscal Year 2008 STATISTICS AT A GLANCE

Revenue Total: $686,046,000

- Gross Patient Services Revenue: $1,241,332,000
  - Net Patient Revenues: 46% $572,054,000
  - Deductions from Gross Revenue: 54% $669,278,000

Expense Total: $677,450,000

- Other Revenues: 10% $65,979,000
- Donations: 7% $48,013,000
- Supplies & Others: 26% $178,353,000
- Interest & Depreciation: 6% $37,738,000
- Professional Liability Insurance: 4% $28,467,000

SOURCES OF INCOME FOR DELIVERING QUALITY HEALTHCARE SERVICES TO OUR COMMUNITY COME FROM:

As of June 30, 2008 $ in Thousands

- Services provided for inpatients and outpatients, including physician care, diagnostic and therapeutic procedures, nursing care, and room and board: 1,241,332
- Because government and other insurance carriers do not pay the total charges on the care delivered, we did not collect: (-618,736)
- Because we provide care to the indigent and children with families unable to pay their full bill, we did not collect: (-50,542)
- We received additional income from other sources, including research grants and other programs sponsored by outside support: 72,510
- The use of restricted gifts to support operations: 22,723
- Contributions from our friends in the community who understand and support our mission to care for children: 25,290
- Reduction of the value of the reserved funds from community and other outside support: (-6,531)

Total income available to care for the children who need our special services: $686,046

FROM OUR INCOME WE PAID FOR:

Salary and benefits for our medical, professional, and support staffs: $432,892
Operating supplies and services: 190,865
Depreciation and interest on plant and equipment: 37,738
Professional liability insurance: 28,467

Total expenses required to meet the needs of serving our patients and mission: $689,962

Excess of available income over expenses incurred in support of our mission: ($3,916)
Defining a New Era in Philanthropy

Children’s National Medical Center is home to some of the most renowned medical professionals who are providing world-class care and paving the way to transform children’s health and define a new era in pediatric health care everyday. Children’s National is looking to the future to discover innovative therapies, treatments, and cures for children who are sick, injured, or battling a disease. As a world-class organization, we not only meet the immediate needs of children, but work to achieve our dream to free families and children from the devastating effects of disease and sickness.

“One of the most impressive facets of this institution is how many people are dreaming of a better life for children,” said Peter Holbrook, MD, chief medical officer. “They are seeking permanent solutions to problems affecting children and are striving to reach as many children as possible throughout the world.

“Together, with the community and our generous donors, we are dreaming of ways to ensure that all children will grow up reaching their full potential. That’s what Children’s National is all about. We would love to have anyone who shares our vision to come and dream with us and help us realize those dreams for children everywhere.”

The Children’s Hospital Foundation raises money to help Children’s National make dreams a reality for children in the nation’s capital, across the country, and around the world. The generosity of individual donors, corporations, and community organizations makes it possible for experts at Children’s National Medical Center to tackle the health needs of children today and lead the way to tomorrow’s cures. To learn how you can make a difference, visit www.childrensnational.org/give.
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Crosstex Associates present a check for $807,150 to Children's National.
Funds were raised through Crosstex's Children's Miracle Network Fund.

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Mr. and Mrs. John M. Devaney and Ms. Deborah A. Reagan present a check for $607,150 to Children's National. Funds were raised through Crosstex’s Children’s Miracle Network Fund.
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Children’s National recognizes estate distributions received during the 2008 fiscal year, July 1, 2007 to June 30, 2008

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