Your Child.
Our Promise.
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This Nemours Annual Report offers an impression of our system designed to improve and maintain child health.

The images on the following pages capture our philosophy, our daily progress and our commitment to the families we serve.

Your Child. Our Promise.
8:09 a.m.

Tommy enjoys a wagon ride to see his doctor and other friends at AIDHC.
Our first benefactor, Alfred I. duPont, valued the world he knew and was grateful for his success in it. An innovator and inventor, he always looked for ways to make that world better. Mr. duPont challenged the status quo and sought to alleviate the suffering of those who could be helped by a hand up. He envisioned a world where all children received top-notch medical care, especially children disabled in some way. Nemours has embraced his intent to seek a higher standard of health not only through medical excellence, but also by finding ways to prevent the injuries and conditions limiting a child’s potential for a joyful, rewarding life.

With no pattern for a system to pursue child health, Nemours set out to establish a sustainable model of care and prevention. The first step, most needed at that time, was a hospital for crippled children. Established in 1940, the Alfred I. duPont Institute attracted international orthopedic leaders and forged a reputation worthy of its namesake.

The early pattern of care employed an integrated medical and health professional staff that created “world-class” standards of care. That pattern is a key ingredient of the Nemours system of care today and is the genesis of “the Nemours Way.”

Much has evolved since then. The hospital, renamed Nemours/Alfred I. duPont Hospital for Children, is a full-service, free-standing children’s hospital fully integrated with the Nemours Children’s Clinic locations throughout the Delaware Valley and Florida. Adhering to Nemours’ standard of care, plans for a new southern health campus continue to move forward with a similar focus encompassing subspecialty services with continuity of care.
united by an electronic medical record (EMR) system. Uniquely tying all parts of the entity, the Nemours EMR crosses specialties, locations, caregivers, referring physicians and soon, patients and families.

To date, Nemours has invested $1.8 billion to enable a higher standard of care for more than two million children in medical need. Our research, health and medical education initiatives have helped many millions more. Today’s efforts of continuous quality improvement ensure our relevance while avoiding complacency and entitlement.

The focus throughout Nemours is excellence, and every day we raise the bar a notch higher for the children we serve and all who follow. Whether through patient family satisfaction or consistently outstanding medical outcomes, 4,200 Nemours Associates are proud of doing “whatever it takes” to advance the health of children.

*It’s the Nemours Way.*
Your Child. Our System of Health.

Throughout the Nemours integrated system of health, we are committed to treating our patients as if they were our own children. Across geography and clinical subspecialties, from home to referring physician to hospital and back, Nemours is creating a continuum of service that effectively supports optimal quality. This means teams of employed physicians, scientists and other providers work together—along with families—to reach the best results efficiently and effectively.

The Nemours strategic plan for medical, service and operational excellence builds upon four overarching goals. Our aim is to give every patient and family a uniquely satisfying experience with Nemours through the execution of these goals:

- Care for every child as if they were our own;
- Be a leader in improving children’s health through our integrated system, becoming a pre-eminent voice for children;
- Be a great place to work; and
- Be effective stewards of all our assets, continually improving them to advance our Mission.

We are forever grateful to Alfred I. duPont for enabling Nemours to commit to such noble goals and appreciative of the camaraderie among Associates motivated to achieve them. To fulfill these goals, we developed a system-wide master plan including 25 sites in four states, anchored north and south by a health campus including a full-service children’s hospital. Driven by our academic commitment, Nemours’ research and teaching assure our methods remain cutting-edge.

By enhancing our medical services through a holistic approach to health and health care and employing non-traditional efforts, we’re building a new paradigm. Whether performing a life-saving transplant, bringing breakthrough research to the bedside, training the next generation of pediatric specialists or helping parents keep their kids healthier through advocacy and prevention programs, Nemours is raising the bar in child health.
2:30 a.m.

Andrew survived surgery for intestinal blockage and is monitored closely in the Newborn Intensive Care Unit at AIDHC.
Nemours Children’s Clinic, a multi-specialty pediatric medical practice, is one of the largest and most evolved models of its kind in the nation. Skilled and committed Associates use NemoursOne, our electronic medical record system that spans geography, specialty, professional and service teams, and functions as a vehicle to improve quality and results.

This report highlights unique elements of our integrated health system that contribute to advancing children’s health. Nemours/Alfred I. duPont Hospital for Children (AIDHC) is the northern anchor of our system, serving as a focal point for hospital and ambulatory integration with the Clinic practice within the Hospital as well as affiliate and satellite locations. Nemours recently received approval from the state of Florida to proceed with a similarly freestanding hospital on a health campus in Central Florida—providing the balancing southern anchor for delivering care and bringing health to children the Nemours Way.
“Our mission is to prevent, treat and eliminate pediatric disease to further our vision of a future free of disabling conditions. These are, indeed, lofty aspirations, but great dreams—fueled by passion and dedication—yield great accomplishment.”

David J. Bailey, MD, MBA
Nemours President & CEO

As a fully integrated health system, Nemours is addressing both health promotion and family-centered health care everywhere we serve children, whether in clinical facilities or in the community. Through strategic partnerships, knowledge sharing and advocacy, Nemours is providing a sharper focus on health issues and driving change to benefit the health of children.

The Nemours Way recognizes the need for patients and families to experience compassionate, family-centered care. We do this while maintaining our drive for exceptional results and patient safety through an evidence-based approach to medical care and health. Research and education benefit not only the talented individuals who grow with discovery and learning but also our patients through an improved process of care.

Vital Ingredients of our System

More than 4,200 Associates, including more than 420 employed physicians and other care subspecialists, share a unified commitment to the health of children. A nursing staff turnover rate of just 2.2 percent contrasts against the national benchmark of nine percent and is a measure of our dedication and experience to patients.
New neonatal and cardiac intensive care units at AIDHC provide expanded care capabilities and enhanced family amenities as we team with parents through diagnosis and treatment. The Hospital’s recognition as a Level II Trauma Center this year is another indication of our commitment to a full range of service.

A master plan for the design of facilities is underway which has already resulted in major renovations to the Nemours Children’s Clinic locations in Jacksonville and Orlando, Florida. The plan includes improvements and enhancements across the entire system. The southern dimension of the Nemours system of care will be the new health campus and new Nemours Children’s Hospital in Central Florida; our original northern flagship, AIDHC, will also receive major reconstruction to support the same level of medical leadership at that location. Our expansion of comprehensive pediatric subspecialty medical care, research, education and advocacy will enable Nemours to improve the lives of children everywhere.

With a major presence in Wilmington, Delaware and Jacksonville, Orlando and Pensacola, Florida, Nemours’ services have a far reach and significant impact. Our referring physicians are tied in by “NemoursLink,” part of the NemoursOne technology, to maintain a continuum of care for the referred patient. Nemours’ own system of primary care, Nemours Pediatrics, offers access and continuity of care for children throughout Delaware and in parts of the Delaware Valley.

Throughout the system in 2007, Nemours provided:

- More than 560,000 total outpatient visits annually;
- Approximately 250,000 unique patient visits;
- Nearly 51,000 surgical procedures; and
- Service to more than 95,000 new patients.
Your Child. Our Promise.
Coordinated Approach to Child Health (CATCH) Event
Nemours Health and Prevention Services
Dover, Delaware
Research and Education

At Nemours, the quality of medical care is enriched by translational research. More than 100 Nemours clinicians and 160 support staff including 20 doctoral-level center and lab directors work to further our biomedical research programs. Advances result from growing synergy among medical education, Nemours Clinical Management Program (NCMP) and Nemours Health and Prevention Services (NHPS).

By bringing together our systems’ research and specialty physicians, clinical data analysts and public health experts, Nemours can accelerate the pace of translating discoveries from the research bench to the bedside and exam room. Expediting the integration of research findings into service at Nemours means patients have access to superior care at a time when they need it most. Community-based initiatives to tackle societal issues such as childhood obesity have broad impact.

PedsEducation.org, Nemours’ own web-based continuing medical education program, offered at no charge to users, has grown significantly in scope and participation. The site has almost 6,000 registered users and has issued nearly 2,800 certificates.

Nemours Clinical Management Program

With such a broad demographic and diagnostic mix of data assimilated from 250,000 patients annually, NCMP analyzes and identifies critical data elements to help determine “best practices”—from commonalities in symptoms, demographics and treatment to superior outcomes—turning information into knowledge that optimizes the care for children with chronic and acute conditions.

Through our unique and extensive pediatric data warehouse, collected EMR data assists clinical researchers, physicians and information scientists in developing and refining the most effective protocols to treat children. Many of Nemours’ standards of care have led to the development of tools and techniques proven to make diagnosis and treatment of complex conditions more effective and improve patient care and results.

Nemours Health and Prevention Services

NHPS is a pioneering, systematic approach to community-based efforts for wellness and prevention. In Delaware, the program is leading communities toward an ambitious goal of being home to the nation’s healthiest children while teaching good nutrition, exercise and other habits for lifelong health.
“At NHPS, we produce and share knowledge as well as the most effective tools to help children lead healthier lives. We reached nearly 100,000 Delaware children this year promoting healthy eating and physical activity to stem obesity.”

Debbie I. Chang, MPH, Senior Vice President and Executive Director, Nemours Health and Prevention Services

NHPS was directly involved in activities affecting almost half of Delaware’s children through a unique multifaceted approach combating the “epidemic” of obesity.

Nemours BrightStart! Dyslexia Initiative

Nemours BrightStart! is an initiative identifying children at risk for dyslexia before they enter kindergarten and providing free intervention services to prepare them for school. Pediatric brain science specialists, researchers and early learning experts from Nemours pioneered this highly successful program in Jacksonville. Ultimately, hundreds of children are better prepared to succeed in school and eventually as productive citizens of our community.

Nemours Children’s Health Media | KidsHealth.org

Led by physicians, the one-of-a-kind Nemours Center for Children’s Health Media produces magazines, books, videos and the award-winning KidsHealth.org web site, all of which provide holistic child and family health content to pediatric practitioners, educators, families and children.

KidsHealth.org is the world’s most-visited web site for health advice and received more than 140 million visitors in 2007—a 22 percent increase over 2006. KidsHealth.org is also the most awarded online site about children’s health and its content has been licensed to more than 40 children’s hospitals and the U.S. Department of Health and Human Services.
Austin arrives with mom to receive special attention and care in Pensacola.

Reception Lobby
Nemours Children’s Clinic
Pensacola, Florida
Nemours provides direct care and treatment for a quarter million children each year, many with multiple medical needs. We help millions more through our community programs and health information. These numbers, while impressive, are the byproduct of an intricate health system dedicated to the well-being of every child in our care.

Nemours is proud to set the highest goals for patient family satisfaction and quality. We believe combining elements of a multispecialty pediatric physician practice group with highly skilled, caring inpatient service, education and prevention will prove best suited to the delivery of optimal health for each child and family we touch.

In this report, we focus on five subspecialty areas within Nemours that are among the best available anywhere. They all focus on service quality, providing a compassionate, personalized and informed experience. Their expertise is reassuring to parents who know they are receiving not just the knowledge and proficiency of one location, but the collective consciousness of a system of care with a support team of thousands.

The areas of excellence captured in this section demonstrate our expanded commitment to tackle difficult medical conditions seriously threatening the health of a child. Our prescription is simple: the love of a family, the skill of caring teams, plus our individual and collective passion to ensure each child has the best chance possible. The formula works when facing a frightening bout with cancer, a deformity or injury to the musculoskeletal system, congenital facial and ENT problems, difficult urological issues, or a heart in need of mending.
Nemours Cardiac Center provides community outreach services to diagnose and treat patients even younger than Jamie by providing cardiology support at affiliated community hospitals. Jamie fared well in an early catheterization procedure and is obviously thriving at a recent check-up.
A healing system for the tiniest hearts

The internationally renowned team with the Nemours Cardiac Center at Nemours/Alfred I. duPont Hospital for Children (AIDHC) is celebrating 10 years of specially designed service to infants and children with heart disease.

The Center’s team of professionals works tirelessly for every child and is convinced that virtually all forms of childhood heart disease—even the most complicated—can be treated and that early intervention achieves the best outcome.

This group of pediatric experts includes cardiac surgery, cardiology, anesthesiology and critical care, all solely dedicated to the vigorous pursuit of the best care possible for patients. They collaborate every day with a dedicated team of nurses, technicians and social workers to offer the most up-to-date and holistic care available to children.

The Center consists of a 10-bed cardiac intensive care unit, a 16-bed step-down unit, a state-of-the-art digital cardiac catheterization and electrophysiology suite and a dedicated operating room.
Partnering with Families

Parents of the patients are an active and crucial part of the healing process and have access to in-house accommodations within the Center allowing them to more fully participate in the treatment of their children.

To help parents cope with the stress of cardiac illnesses and support hope, the Center employs a psychologist and social worker. The one-on-one emotional support assists families with seemingly overwhelming responsibilities.

A “hybrid procedure” (open-heart surgery with catheterization) has become common for complex cases. Catheterization-assisted procedures have replaced—in many cases—open-heart or open-chest surgery. The process improves the outlook for scores of children with congenital heart disease and minimizes their discomfort and hospital stay. Only a handful of centers in the U.S. offer these procedures. In 2007, the Center performed approximately 275 catheterization procedures and 300 cardiac surgeries.

As the Center reaches beyond its 10th anniversary, its “alumni” have grown in number and in the variety of complex medical challenges they have survived.
CHILDREN CARED FOR THROUGH CARDIAC SERVICES IN 2007:
12,359 patients received 11,998 outpatient services in the Delaware Valley, and almost 600 inpatient procedures.
In Florida (Pensacola), 4,373 patients received 5,032 services.
Carolyn’s Story

Before she was born, Carolyn’s parents knew her early days would be traumatic because a prenatal screening detected abnormalities. The family visited the Nemours Cardiac Center where physicians identified structural heart disease and talked about what it could mean for Carolyn’s future.

Within hours of birth, Carolyn came to AIDHC where the family faced a difficult choice between two ways to repair her tiny heart. The first, a single ventricle management, treats the heart as if there were only one pumping chamber. While complicated, the procedure is more predictable. The other option was a complete repair that had a higher risk, but might give Carolyn a more normal life. After hearing both possibilities and the associated risks and benefits, her parents chose option two.

Requiring technically demanding surgery during the infant’s first week of life, the choice was really three operations in one to separate the right side from the left side of her heart.

Thankfully, Carolyn recovered beautifully and is now an 18-month-old toddler with a normal life.

“This model achieves great teamwork, better than national benchmark outcomes and patient satisfaction in the 97th-99th percentile for ‘overall assessment’ by parents.”

Christian Pizarro, MD, Nemours Cardiac Center Director
Nemours/Alfred I. duPont Hospital for Children, Wilmington, Delaware
(L to R) Christian Pizarro, MD, cardiac surgeon and Nemours Cardiac Center Director, Samuel Gidding, MD, AIDHC Chief of Cardiology, and Russell Raphaely, MD, anesthesiologist and Nemours Cardiac Center Co-Director, assure all patients receive excellent care.
In 2007, our specialists treated almost 5,000 children with oncology or hematology conditions. Above, Chafisya seems unconcerned about the drama of her treatment at AIDHC.
Research improves cancer treatment, results

The diagnosis of a childhood cancer is one of the most frightening moments any parent can imagine. The fear and trepidation can be overwhelming. But the medical services at Nemours often allay those fears and replace them with hope and encouragement, as our success rates are among the best in the nation.

Many of the children seen by our specialists literally receive a new chance at life. The underlying belief that each child deserves the best care humanly possible is a major contributing factor to our success.

Nemours research plays a direct role in the treatment of childhood cancers. Translational and outcomes research accelerates the implementation of new treatments, helping children fight their illness with the newest weapons available.
The Pediatric Blood and Bone Marrow Transplant (BBMT) program in Jacksonville, Florida, is a collaboration with Wolfson Children’s Hospital and Mayo Clinic Jacksonville. The combined program provides life-saving transplants to Florida patients battling a variety of diseases including brain and solid tumors, Hodgkin’s disease, non-Hodgkins lymphoma, childhood leukemia, Ewing’s sarcoma and neuroblastoma as well as sickle cell and aplastic anemia.

The BBMT program at Nemours/Alfred I. duPont Hospital for Children (AIDHC) reopened in 2007 and holds great promise for our patients, like Zoe (see p.26), by increasing the types of transplants the team can perform. The staff is developing protocols and techniques that minimize failure or relapse to the original disease.

The Nemours Center for Childhood Cancer Research (NCCCR) opened this past year as Nemours Biomedical Research’s newest Center of Excellence. The new Center builds upon the strengths of several Nemours research laboratories and programs to benefit our patients and others similarly affected.

The Center’s goals are to lay the groundwork for a well-integrated system, using multiple approaches, to produce more effective, less toxic treatments and better patient management for childhood cancers. Working closely with Nemours clinicians, the Center’s new methods will be applied in a timely way to improve care for children with neuroblastoma, leukemia, brain tumors and other cancers.
CHILDREN CARED FOR IN HEMATOLOGY/ONCOLOGY IN 2007:

In the Delaware Valley, 1,472 children benefited from 4,720 outpatient services; and in Florida, 3,100 children with 12,881 services for a total served by Nemours of 4,572 children and 17,601 outpatient services.
Zoe’s Story

Zoe, a four-year-old with acute myelogenous leukemia (AML), was under the care of Christopher Frantz, MD, Chief of Hematology/Oncology at AIDHC. But chemotherapy did not resolve Zoe’s illness. Fortunately, her 15-year-old sister was a bone marrow match, so Dr. Frantz quickly scheduled Zoe’s transplant.

Zoe, however, had other plans. A one-day delay in her treatment was arranged so she could be Cinderella for Halloween. Her favorite nurse, Ben Sheets, BSN, RN, surprised her dressed as Prince Charming complete with “glass” slipper in hand.

Anders Kolb, MD, Director of the Nemours BBMT program, worked with Dr. Frantz and Zoe in a successful transplant and continues to help through follow-up treatments.
“For a cancer patient not responding to existing therapies, the promise of new therapy lies in research and we’re excited about what Nemours will be able to do for children. Our greatest hope is understanding the underlying cause of childhood cancers in order to develop new therapies.”

Vicky Funanage, PhD, Director of Nemours Biomedical Research

The implications are vast. Specifically, research findings could mean better cancer detection and treatment providing new potential targets for therapy. The NCCCR will unite all cancer research efforts enterprise-wide, across all disciplines, integrating patient care, new drug discoveries, clinical trials and health prevention as well as clinical management experts, researchers and physicians.

E. Anders Kolb, MD, Director of the Blood and Bone Marrow Transplant program at AIDHC, checks on a patient’s follow-up treatment results with Jennifer McGowan, RN.
It may seem that patient Courtney and Catherine Swanson, MS, CCC-SLP/CCC-A, are practicing the “O” sound during speech language therapy. Actually, Courtney’s tiara had just fallen off of her head surprising them both.
Unparalleled expertise. Life-changing results.

The Division of Pediatric Otolaryngology/Head and Neck Surgery, Communications Sciences and Pediatric Facial Plastic Surgery at Nemours Children’s Clinic, Jacksonville, may be one of the largest pediatric subspecialty groups of its kind in the country. The division (better known as “ENT” for ear, nose and throat), led by Gary Josephson, MD, has grown to 40 team members, including world-renowned surgeons and specialists who use their individual and collective knowledge and skills to deliver comprehensive, cutting-edge care.

With the expertise of fellowship-trained physicians, audiologists and speech pathologists, the division’s team approach allows for rapid diagnosis and the most advanced techniques to manage and address childhood ENT diseases and conditions—from the common to the very rare.

Thanks to an integrated system of care, access to all ENT services is under one roof. And, since many patients suffer with congenital anomalies, this exceptional connectedness provides continuity of care unequalled at other institutions.

Dr. Josephson believes that by improving processes, Nemours will decrease the cost of medical care and improve outcomes for the infants and children we treat. The ENT unit includes an extensive repertoire of services to treat common, chronic ENT problems and the rarest of otolaryngological conditions.
Breakthrough Treatment

Nemours’ Cochlear Implant Program uses an integrated multidisciplinary approach to evaluate and manage treatment of children with severe to profound deafness who elect to have an implant. Often referred to as a bionic ear, the cochlear implant is the only medical invention available that can restore a lost sense. Experts from all related fields—audiology, speech pathology, education of the deaf, genetics, psychology and auditory therapy—team up to treat each patient with the utmost care.

“There is great potential for success in a team approach to the very young child born with multiple ENT problems. Nemours’ effort to bring unique services to this community has given us the extraordinary opportunity to build a remarkable team of pediatric specialists. Nowhere else does this capacity exist in the southeastern United States, and it is rarely approached in the nation.”

Gary Josephson, MD, Division Chief of Otolaryngology/Head and Neck Surgery and Communication Sciences, Nemours Children’s Clinic, Jacksonville

Saswata Roy, MD, introduced the unique surgery of mandibular lengthening through distraction osteogenesis to Nemours. Few institutions offer this surgery due to its complexity. The customized surgery requires a team of players—anesthesiology, audiology, intensive care, genetics, speech pathology and various therapies. The end result enables newborns suffering from Pierre Robin sequence to better breathe, swallow and eat on their own, within days of surgery. Few procedures have a more profound impact on a newborn throughout life than mandibular lengthening.
2:05 p.m. Dr. Gary Josephson performs endoscopic sinus surgery using computer image navigation.
Loree holds her daughter, Kendall, while discussing her recovery from mandibular lengthening surgery performed by Saswata Roy, MD, in Jacksonville.
Advanced treatment for all-too-common conditions

Cleft Lip/Palate

A fairly common birth defect in the U.S., cleft lip/palate occurs in approximately one of every 750 births. Nemours surgeons have performed hundreds of cleft lip/palate corrective surgeries. Nemours’ multidisciplinary approach is suited to dealing with cleft disorders, as there are often accompanying problems involving speech, hearing and teeth.

Language, Hearing and Balance Disorders

The expanded ability to treat language, hearing and balance disorders at an early age means reducing the odds of chronic conditions later. Nemours’ Speech Language Pathology team, for example, provides evaluation and treatment for children with communication or feeding disorders. Therapy to address problems ranging from articulation disorder, autism and social communication to voice disorders, can help even the youngest of patients. Children are offered the newest advances in audiological treatment, surgical techniques and hearing devices that allow many children to avoid the social and educational impairment that can result from hearing loss.

Courtney’s Story

On the day she was born, Courtney failed a hearing test conducted by Nemours. She failed the test again before leaving the hospital. After more tests at Nemours Children’s Clinic in Jacksonville, her parents received the stunning news that Courtney was profoundly deaf. When hearing aids didn’t work, the family went back to Nemours to explore the option of cochlear implants.

At just one year old, Courtney received her right implant. A year later, she received her left. Courtney, now three years old, continues therapy at Nemours. She’s made so much progress that her mother, Debbie, notes, “You would never know she’s deaf.”
William Mackenzie, MD, Chair of Orthopedics at Nemours/Alfred I. duPont Hospital for Children in Wilmington, Delaware, enthusiastically greets a familiar patient.
A tradition of leadership

Nemours has long played a distinguished role as a leader in the field of orthopedics. Initially devoted exclusively to children’s orthopedics, the Alfred I. duPont Institute was started by giants of the developing field. Now known as Nemours/Alfred I. duPont Hospital for Children (AIDHC), the Hospital has a strong reputation permeating the entire Nemours system.

As one of 10 “Leading Children’s Orthopedic Fellowship Training Centers,” Nemours collaborates across the miles through commonalities and modern technology to unify patient care and develop best practices.*

Skilled Associates in orthopedics are committed to provide every patient family a uniquely satisfying experience whether a child is born with abnormal bones, joints or muscles or develops problems as a result of disease or injury.

* According to the History, Geneology and Evolution of Children’s Orthopaedics in North America published by the Pediatric Orthopaedic Society of North America in 2006, the Nemours program is counted as one of the 10 “leading children’s orthopaedic fellowship training centers.”
Collaboration for a Standard of Care

Scoliosis (curvature of the spine) is one of the more common conditions treated at Nemours and one that recently benefited from a system-wide focus by orthopedic surgeons from all locations coordinated by Nemours Clinical Management Program (NCMP). Led by Wilmington surgeon Suken Shah, MD, and Jacksonville surgeon Kevin Neal, MD, the team reviewed experience data and literature to develop and recommend new standards of care for scoliosis surgery.

Dealing with issues of intra-operative neuromonitoring and blood loss, the standards outline evidence-based methods that offer more consistent, improved results to patients. They also assist in the early detection of potential problems while reducing the rate of neurological disease.

“Nemours’ integrated system of care brings our surgeons together from several sites offering a collaborative spirit that can’t be matched. Our standard of care study through NCMP connected all Nemours orthopedic surgeons treating children and adolescents with scoliosis to analyze processes and results to improve care for our patients.”

R. Jay Cummings, MD, Chief, Division of Orthopedics, Nemours Children’s Clinic, Jacksonville and Vice President and Chief Executive, Nemours Children’s Clinic—Florida

Leadership Effort in Skeletal Dysplasia

AIDHC is renowned for its work in skeletal dysplasia (commonly known as dwarfism), caring for hundreds of children each year. The condition results in disproportionately short arms and legs and a height of less than four feet, two inches.

In a three-day special report, the The News Journal in Wilmington, Delaware, examined our program and how genetic and orthopedic specialists are unraveling the mysteries of dwarfism. The news coverage helped inform the community about this condition and highlighted Nemours’ state-of-the-art medical and surgical care.
R. Jay Cummings, MD, who has been with Nemours since our start in Florida in the early 1980s, takes a closer look at a scoliosis patient’s curvature. Dr. Cummings is Chief of the Orthopedics Division at the Nemours Children’s Clinic, Jacksonville, and Vice President of the Florida practice.
Orthopedic physician Kevin Neal, MD, is one of more than 20 specialists throughout Nemours who keep the tradition of orthopedic excellence alive in multiple hospital and clinic locations. An additional 21 residents learn from associating with the distinguished Nemours staff and contribute to the care of patients like Brian (above).
“Our Hospital is unique in caring for children with skeletal dysplasias. Very few physicians have the opportunity to spend a large part of their time concentrating on this specific condition. This intense focus allows Nemours to provide the most effective care for these children improving their quality of life,” says William Mackenzie, MD, Chair, Department of Orthopedics at AIDHC.

At all Nemours locations, orthopedic specialists treat a wide range of neuromuscular and musculoskeletal problems, including cerebral palsy, scoliosis, arthrogryposis (contracture of the joints), spina bifida and osteogenesis imperfecta (brittle bone disorder), as well as fractures, sports injuries and other common problems.

Like other specialists, Nemours orthopedic physicians benefit from NemoursOne technology to consult with other physicians at all locations, cultivating best practices drawn from system-wide experience. Our commitment to communication is vital to exceptional care where the well-being of a patient and patient family always remain in focus. Nemours’ integrated approach supports the search for better answers for children with rare orthopedic or medically complex conditions.

“Orthopedics at Nemours has set a high standard for medical performance and caring for patients,” observes Roy Proujansky, MD, Executive Vice President, Health Operations and Chief Operating Officer.

CHILDREN CARED FOR IN ORTHOPEDICS IN 2007:

Almost 33,000 patients visited one of Nemours’ orthopedics clinics during 2007, 20,234 new to the system that year. More than 6,500 surgeries and more than 20,000 medical procedures were performed.
Michael J. Erhard, MD, pediatric urologist and Chief of Surgery at Nemours Children’s Clinic, Jacksonville, shares his knowledge of new methods with Nemours surgeons throughout the system.
Superior skill and innovation

All parents hope their children will enjoy a carefree childhood. Parents of Nemours patients are no different, though their children often face difficult challenges. All across the Nemours system, Associates work every day to restore normalcy and fanciful dreams to children. One effective tool the Nemours urology teams use for children with urological disorders is minimally invasive surgery.

The team in Jacksonville was one of the first in the country to adopt the technology including the use of robotics for pediatric purposes, reducing patient pain and recovery time, allowing children to be children.

The teams of urologists and medical experts continually look for better ways to improve the quality of life for our patients and trade information among clinic locations about what works best for kids. The result is breakthrough treatment for children and families who are back to normal sooner.

As pediatric surgical specialists, Nemours urologists benefit from NemoursOne to ensure a team approach to care. This integration leads to the creation of best practices and standards of care that reach beyond typical health care in pediatric urology.
Our team of board-certified, fellowship-trained pediatric urologists evaluates and treats conditions including kidney and bladder disorders as well as urinary tract infections and obstruction. The group has expertise in urinary and genital reconstructive surgery and management of bladder dysfunction as well as operative treatment of genital and urinary tumors.

Nemours pediatric urologists consult with expectant parents when the family’s obstetrician discovers a urologic problem before birth. The entire urology team increasingly works together to find ever better ways to care for patients and families, improving their results.

After her check-up exam with Mark Wehry, MD, for a kidney problem, Lily uses the ultrasound equipment on her hand. She has fun and her hand is fine.
Less Pain for Patients
The Jacksonville urology team was the first pediatric group in the Southeast to use reconstructive procedures with robotics offering minimally invasive surgery. The technology continues to gain acceptance and endorsement from other Nemours surgeons learning the technique.

The potential benefits of minimally invasive surgery are many although difficult to quantify. The main benefits are less pain and faster recovery. Because of quicker healing, the procedure provides benefits to parents, too—reducing their fear, minimizing their stress and allowing them to return to work sooner.

“This is not painless surgery, but it is less painful. The narcotic requirement is less, and by the third day, the child may be taking nothing at all, which used to be unheard of. Even the infants and younger kids rebound really quickly.”

Michael J. Erhard, MD, pediatric urologist and Chair, Department of Surgery, Nemours Children’s Clinic, Jacksonville

“Yesterday, I operated on a six-month-old child with a blocked kidney,” states Dr. Erhard. “She went home in less than a day. If you can imagine—a child so small that you’re working in a space not much bigger than a grapefruit—to get instruments in there, take the kidney apart, cut out what needs to be removed and sew everything back together. That shows how robotics can extend what we can do for better comfort, convenience and results for children and families.”

Urologic surgeons are spreading the word about minimally invasive techniques by teaching other physicians within Nemours and elsewhere about the potential benefits of smaller incisions, smaller scars, faster healing time and less pain.

CHILDREN CARED FOR IN UROLOGY AT NEMOURS OUTPATIENT LOCATIONS IN 2007:

In the Delaware Valley, 4,716 individual children benefited from 8,004 services; in Florida, 9,383 patients from 16,908 services, for a total served by Nemours of 14,099 children benefiting from 24,912 outpatient urological services.
Your Child. Our Accountability.

“It has been my firm conviction throughout life that it is the duty of everyone in the world to do what is within his power to alleviate human suffering.” — Alfred I. duPont

Alfred I. duPont was one of the world’s greatest philanthropists to dedicate his largesse to improving the health of children. He placed a high value on maintaining trust and inspired a high standard for Nemours, the organization that now carries out his conviction in perpetuity: where families entrust their children to us in hopes of alleviating their suffering.

Nemours’ strategic destination is to achieve recognition as one of the nation’s top organizations advancing the health of children by affecting positive results and extremely high satisfaction among families. The structure of our system relies on the commitment of our Associates and on NemoursOne, our electronic medical record (EMR) system. Nemours is among the first to use the EMR in a multispecialty pediatric group practice and has adapted its use most extensively—improving processes while enhancing quality and safety. Our motivation is clear: by raising standards of pediatric medical care and improving child health through research, education and prevention, we ultimately raise a stronger voice for children.

Our plan is simple: using our resources wisely, we set goals and objectives to positively shape the health of children, sharing acquired wisdom along the way. To be accountable within duPont’s measure, we will do everything in our power to succeed in a larger sense by leveraging achievement through advocacy. A powerful and unified voice is necessary to achieve our vision of a future free of disabling conditions.

Accountability begins with transparency, and we are pleased to share our progress with the readers of this report.
3:27 p.m. Missy’s asthma is under control since she began treatments as part of a research study with David Geller, MD.
Hardwiring Accountability

In 2007, Nemours adopted the Strategy Management System (SMS) to articulate the organization’s strategy and link key processes, behaviors and personal accountability. The system aligns the organization’s goals and objectives to advance our mission on behalf of children.

In November, Nemours was inducted into the Balanced Scorecard Hall of Fame as a result of our success in implementing the SMS. The Hall of Fame publicly honors organizations that are successful in using SMS with the balanced scorecard architecture to achieve and sustain breakthrough performance results. The 100 organizations inducted to date represent a broad cross-section of private and public sector industries from more than 15 countries.

The backbone of our hardwired approach to accountability is our enhanced medical information system, NemoursOne. The system lends consistency and accuracy to each child’s record of care—across specialties, geography and sites of treatment. It adds strength and power from the primary care office to clinic use anywhere in the system.

In yet another example of accountability, Nemours has effectively lowered the use of antibiotics in patients. Frequent and inappropriate use of antibiotics produces strains of bacteria that can resist treatment. These resistant bacteria require higher doses of medicine or stronger antibiotics. Nemours physicians collaborated on a plan to advise bedside clinicians of optimal use of antibiotics, leading to lowered antibiotic-resistance in the children we serve.
Bar coding on patient ID bands and medications assures safe delivery.

**RATES OF INFECTIONS DROP**
Since implementing “best practices” in Pediatric Intensive Care Units

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<tr>
<td>4</td>
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<td>1</td>
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**IMMUNIZATION RATES HAVE IMPROVED**
Since the introduction of the electronic medical record (EMR)

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<tr>
<td>66%</td>
<td>66%</td>
<td>72%</td>
<td>71%</td>
<td>71%</td>
<td>71%</td>
<td>73%</td>
<td>73%</td>
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</tbody>
</table>

12% improvement 2006 to 2007

TWO-YEAR-OLD CHILDREN SEEN AT NEMOURS PRIMARY CARE
“Through the efficiencies of NemoursOne, patients can rest assured their care is coordinated across the entire Nemours system and by 2009 all information will be in a single chart. The result is superior patient-centered care and greater efficiency, which improves both current and post-encounter care.”

Stephen Lawless, MD, MBA, Vice President, Quality and Safety

Business enhancements that improve the family’s experience “inside,” became visible in 2007: kiosk check-in for “frequent flyers,” personal pagers to improve confidentiality and reduce waiting time for families, and online access to medical information to guide compliance.

Another innovation is Emmi®, a series of online patient education modules for families to learn about a child’s condition before potential treatment. Developed by Nemours Risk Management, our Center for Children’s Health Media and Nemours physician experts in collaboration with Emmi Solutions, the group has covered 10 procedures so far and has also produced a module on general safety issues.

Streamlined graphics and animation combined with step-by-step narration help parents and children learn about procedures from the comfort of their home computer. Parents report greatly improved understanding and peace of mind.
### THE NEMOURS FOUNDATION
Condensed Combined Statements of Operations
Years ended December 31, 2007 and 2006
(Dollars in thousands)

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2006</th>
</tr>
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<tbody>
<tr>
<td><strong>Net patient service revenue</strong></td>
<td>$452,582</td>
<td>$411,991</td>
</tr>
<tr>
<td><strong>Contributions from the Alfred I. duPont Testamentary Trust</strong></td>
<td>132,420</td>
<td>119,014</td>
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<tr>
<td><strong>Other income</strong></td>
<td>50,045</td>
<td>51,724</td>
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<tr>
<td><strong>Total revenue and other support</strong></td>
<td>635,047</td>
<td>582,729</td>
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<tr>
<td><strong>Total operating expenses</strong></td>
<td>570,936</td>
<td>553,532</td>
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<tr>
<td><strong>Operating income</strong></td>
<td>$64,111</td>
<td>$29,197</td>
</tr>
</tbody>
</table>

“We achieved very positive operating results during a year when Nemours continued investing in initiatives deemed critical to future strategic plans as well as increased funding of existing programs that further support the Nemours Mission.”

Robert D. Bridges, CPA, Executive Vice President, Enterprise Services and CFO
“The impressive financial performance of Nemours during 2007 is an important achievement in light of our extensive commitment to increased capital spending in the near future. This planned growth strengthens our position as a premier children’s health system and as an organization that people want to join in an effort to help children.”

THE NEMOURS FOUNDATION
Condensed Combined Balance Sheets
Years ended December 31, 2007 and 2006
(Dollars in thousands)

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current assets</td>
<td>$ 269,239</td>
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<td>Non-current assets</td>
<td>501,382</td>
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<tr>
<td></td>
<td>$ 1,263,093</td>
<td>$ 1,199,591</td>
</tr>
<tr>
<td><strong>LIABILITIES AND NET ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current liabilities</td>
<td>$ 125,015</td>
<td>$ 112,565</td>
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<tr>
<td>Non-current liabilities</td>
<td>167,999</td>
<td>170,813</td>
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<td>283,378</td>
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<td>Net Assets</td>
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<tr>
<td>Unrestricted</td>
<td>$ 478,624</td>
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<td>Temporarily restricted</td>
<td>487,498</td>
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<tr>
<td>Permanently restricted</td>
<td>3,956</td>
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<td></td>
<td>970,078</td>
<td>916,213</td>
</tr>
<tr>
<td>Total net assets</td>
<td>$ 1,263,093</td>
<td>$ 1,199,591</td>
</tr>
</tbody>
</table>
In 2007, John S. Lord, Chairman, Nemours Board of Directors, had a wonderful reason to write Mary Newman, BSN, RN, CPN, (pictured at right), Nurse Manager for 3A/Blood and Bone Marrow Transplant Unit (BBMT) and Outpatient Hematology/Oncology Clinic at Nemours/Alfred I. duPont Hospital for Children (AIDHC).

“How proud you make me, and all of us who bring leadership to Nemours, to know of your singular accomplishment as a nurse and as a caregiver for children who benefit from your skill. Your designation as National Nurse of the Year for Clinical Care by Nursing Spectrum is a significant one, and represents a very important moment for yourself and Nemours! We know of the superb quality of care offered to children throughout our system. To have that knowledge personified by you at such a superb level gives us and the world the knowledge that our goals for Nemours, while lofty, are not unreasonable.”

Nemours Associates are in wonderful company, sharing the vision to end disabling conditions with physicians, nurses, scientists, caregivers and skilled support staff. It’s no wonder Nemours Associates rank above national benchmarks in “pride” for the organization and its Mission. This pride contributes, no doubt, to the impressively low turnover rate for all Associates, and one for nurses—just 2.2 percent—that defies current market conditions for highly skilled, experienced professionals.

Nemours’ goal of becoming a great place to work is closely linked to providing a uniquely satisfying experience for children. Our Associates are part of a high-performing team dedicated to service excellence. Their passion is rewarded and renewed by families who share their highs and lows as a collective family.
Our Associates Work Together to Do Whatever It Takes

With operations reaching across four states, Nemours employs more than 4,200 professionals, including 420 physicians and 160 researchers. Their pride in what we can achieve raises our role to so much more than a job. They embody the Nemours Mission... “to restore and improve the health of children through care and programs not readily available, with one high standard of quality and distinction...”

Nemours Associates, aware of their role in our strategic plan and aligned to deliver on its goals and objectives, are living ambassadors of Alfred I. duPont. Our ability to speak on behalf of the health of children grows with the skill, compassion, knowledge and teamwork of our gifted Associates.

To help Nemours focus on continuous quality improvement, we pay close attention to family surveys. We welcome and scrutinize all feedback. We are especially proud to share the family endorsements quoted on these pages. All patient names have been changed to protect privacy.

“Dr. Hsiang makes sure both my daughter and I understand her medical condition and stresses the importance of Anna keeping up with her medication and any health issues she may have. She has built a rapport with my daughter, so she feels comfortable talking with her. Being that her illness will be with her forever, Dr. Hsiang has built the foundation for Anna to take ownership of her illness and become responsible. I couldn’t have created a better doctor.”

Parent of Anna, age 12, Nemours Children’s Clinic, Pensacola
“The doctor was super! She explained everything thoroughly and answered all of our questions to our satisfaction. She appeared to genuinely care about our son and his condition and she explained the treatment and procedures that would follow.”

Parent of Jeff, age 8, Nemours Children’s Clinic, Lake Mary, Florida

“The swiftness with which the ER doctors and nurses acted once my daughter’s condition was known was nothing less than outstanding. When I was fearful for my child, I was comforted by the care and professionalism displayed.”

Parent of Madison, age 4, AIDHC

“I couldn’t have asked for a better place, and its team of doctors and staff to care for the most precious thing to me — my son.”

Parent of Michael, age 13, Nemours Children’s Clinic, Jacksonville

“The ladies in the Child Life Center are amazing. From the visit in the ER to Jessica’s work with my daughter to get her ready for her PICC line procedure, we saw how much time they take with each child. They were great at keeping the kids occupied, which can’t be easy with an extended hospital stay. Thank you, and God bless you all!”

Parent of Megan, age 2, AIDHC

420 physicians
160 researchers
4,200 professionals
Nemours Residency and Fellowship Programs

Pediatric subspecialists are in increasingly short supply. Nemours plays a prominent role in filling that need with training posts for medical students, post-graduate resident physicians and fellows in areas of concentrated interest. Nemours Medical Education, in collaboration with the Nemours Clinical Management Program, has expanded our resources to provide training in hard-to-obtain medical education subjects such as statistics, research design and molecular biology.

Our Academic Partners

During the past year, Nemours has hosted almost 500 residents and nearly 240 medical students as well as provided fellowship rotations for nearly 70 physicians from our academic partners: Mayo Clinic Medical College, Thomas Jefferson University, University of Delaware and the University of Florida, among others.

“The nurse was very patient with my son. He was uncooperative with medication administration, and she was very kind.”

Parent of Will, age 9, Emergency Room, AIDHC

“My son wasn’t scared to be at the doctor because everyone was so friendly… he loved playing in the waiting area.”

Parent of Anthony, age 3, Nemours Children’s Clinic, Pensacola

“We are impressed with Dr. Mason—a great doctor who takes his time with you, which is not very common these days. He also makes the kids feel good and safe in his care.”

Parent of twins Jennifer and John, age 5, Ambulatory Service, AIDHC

“We were attended by a great doctor that listened very well to every word I said and answered every question I had and asked me very important questions.”

Parent of Emma, age 1, Nemours Children’s Clinic, Orlando
A brief stop on the KidsWalk, which connects Nemours and affiliate Wolfson Children’s Hospital, can help communication between Associates. William A. (Chip) Cover, Jr., Administrator of Nemours Children’s Clinic, Jacksonville, listens to an update from general surgeon Danielle S. Walsh, MD.
Best Doctors in America®

Every year, Best Doctors includes a long list of Nemours physicians and specialists among its experts with Best Doctors in America®. The referral company pioneered a worldwide database of 50,000 top medical specialists in more than 400 subspecialties chosen by their peers. For several consecutive years, increasing numbers of Nemours physicians have been selected among the Best Doctors in America® and in 2007, more than 150 Nemours physicians were recognized as the “Best.”

National Professional and Medical Affiliations

Nearly one quarter of all Nemours physicians hold leadership positions on national and regional committees and boards. Currently, our physicians hold more than 263 such appointments.
“3E NURSES ROCK! I have never before met such a wonderful group of people. I felt as if my son was their only patient. You could tell that all loved what they were doing to help others.”

Parent of Alex, age 14, Unit 3E, AIDHC

“What can I say? Everyone was great! This clinic restored my faith that good, respectful health care workers really do exist!”

Parent of Maria, age 7, Nemours Pediatrics, South Philadelphia

“Everyone from housekeeping to the doctors was wonderful. They all kept a smile and were very friendly. For my daughter, who doesn’t like ERs, you changed her opinion and that was great for me.”

Parent of Keisha, age 13, Emergency Room, AIDHC

“I don’t think good should even be a rating. Excellent is how we’ve been treated. I thank you all.”

Parent of Jake, age 2, Nemours Children’s Clinic, Jacksonville

“Dr. Shah made this horrible experience one that we could handle. He has been very professional, and I can’t thank him enough for all his kind words toward our daughter. He really is the best in his field.”

Parent of Stacey, age 11, Ambulatory Service, AIDHC
Since 1940, Nemours has been recognized for providing “patient-centered care,” long before the term was in general use. The concept of technically-advanced care delivered with compassion and crafted to meet each individual family’s particular circumstance has become the Nemours Way. This is the central tenet expressed by one of our overarching strategic goals: care for every child as if they were our own.

Generations of families have turned to us repeatedly because of the care they receive. Still, fulfillment of our Mission to restore and improve the health of children requires an intentional effort to define our direction and our differentiation as a provider of programs and services to children. This report illustrates aspects of our plan—a plan formulated after carefully considering what parents and families require to truly help them enable their children to achieve their full potential.

Nemours has articulated a specific strategic destination: to be recognized as a leader in advancing the health of children. This level of commitment honors not only the trust so many families have placed in us, but also Alfred I. duPont’s vision when he created Nemours through a transformational act of philanthropy.

Although we will carefully review and refresh our strategic objectives for each business cycle, our goals remain the same. We know successful execution of our strategy requires complete integration into all facets of our service and operations. Thus, communication throughout the enterprise and with those we serve remains a top priority for Nemours. Realizing our aspirations will require discipline and focus as we strive to fulfill our commitment: Your Child. Our Promise.

David J. Bailey, MD, MBA  
Nemours President and CEO

John S. Lord  
Chairman, Nemours Board of Directors
Nemours Board of Directors and Executive Team

Nemours Board of Directors combines five members of the Alfred I. duPont Testamentary Trust with a majority of other leaders of national experience and accomplishment. John S. Lord, Board Chairman, observes: “Nemours has benefited greatly from the vision and accomplishment that each of our Directors brings to the table. Nemours’ ability to raise a pre-eminent voice for children has been greatly strengthened.”

Nemours Board of Directors

Back row, left to right: Leonard L. Berry, PhD; Rosa Baumanis Hakala; William T. (“Tee”) Thompson III; Robert G. Riney; J. Michael McGinnis, MD, MPP; Hugh M. Durden; Toni Jennings; Winfred L. Thornton; and John F. Porter III. Front row, left to right: Terri L. Kelly; John S. Lord, Chairman; Richard T. Christopher, Vice Chairman; and Brian P. Anderson.
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Chair

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Pediatrician-in-Chief

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Dean

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Paul E. Garfinkel, MSH
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Susan B. Stine, MD (emeritus)
Division of Developmental Medicine

Jacksonville
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Neuromaging Research
William Turk, MD
Neurology Research
Prabhakaran Balagopal, PhD
Obesity & Cardiovascular Research
Research Laboratory/Interim Director, Biomedical Analysis Laboratory
R. Jay Cummings, MD
Orthopedic Research
Gary Josephson, MD
Otolaryngology Research
Kevin Maupin, MD
Pulmonology Clinical Research
Mark Weatherly, MD
Pulmonology Clinical Research
Mark Rich, MD
Urology Research

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Director, Center for Pediatric Auditory & Speech Sciences
Thomas H. Shaffer III, PhD
Director, Center for Pediatric Lung Research
Jeffrey Twiss, MD, PhD
Director, Center for Translational Neurobiology
Nemours Faculty and Staff Research Publications

The following list includes biomedical and other research articles published in peer-reviewed medical and health journals. A complete list, including chapters, books and other contributions available online at:
static.nemours.org/www-file box/research/2007-nemours-research-publications.doc

A


B


Brenn RL. The Lauriston S. Taylor Lecture: fifty years of scientific research: the importance of scholarship and the influence of politics and controversy. Health Physics 2007;93:348-379.


Bunnell D. Nurses as leaders: influencing, motivating and enabling the profession. DNA Rep 2007;32:5.

C


Cermik TF, Mavi A, Azizoglu G, Housenl M, Dadparvar S, Alavi A. FDG PET in detecting primary and...
Nemours clinicians and 17 PhD lab heads work with Biomedical Research in Delaware and Florida.

All Associates collaborate to accelerate the pace of translational pediatric research.


Geller DE, Coates AL. The combination of drug and device used for respiratory medications should be FDA-approved: pro and con. Pediatr Pulmonol 2007;Suppl 1:129-130.


“What’s struck me about Nemours is the enthusiasm and support for our research efforts. The entire system wants this research to improve the lives of children.”

Ayyappan Rajasekaran, PhD
Director, Nemours Center for Childhood Cancer Research

Houghton PJ, Morton CL, Kolb EA, Gorlick R, Lock R, Carol H. Initial testing (stage 1) of the mTOR inhibitor rapamycin by the pediatric preclinical testing program. Pediatr Blood Cancer 2007 July 16 [Epub ahead of print].


Levy AD, Harcke HT, Getz JM, Mallak CT, Caruso JL, Pearse L, Frazier AA, Galvin JR. Virtual autopsy: two- and three-dimensional multidetector CT findings in...


Your Child. Our Promise.

S


Your Child. Our Legacy.

Nemours Mansion and Gardens

Nemours, the home of Alfred I. duPont just outside Wilmington, Delaware, derives its name from the town in France from where Alfred I. duPont’s great, great grandfather, Pierre Samuel duPont de Nemours, emigrated to the United States.

The entire property includes the mansion, gardens and AIDHC and spans 300 acres. The 47,000-square-foot home is comprised of 102 rooms, including a music room, nature conservatory and a two-lane bowling alley.

Renovation and rejuvenation were the focus in 2007. A grand re-opening is planned for 2008 and includes a new Visitor Center and introductory Visitor Center film, *Alfred I. duPont: True to Every Trust*.

Open for tours since May 1976, Nemours Mansion and Gardens hosted approximately 315,000 visitors annually and that number is expected to grow after re-opening in 2008.
**Nemours Health Clinic**

Since 1981, the Nemours Health Clinic has fulfilled our commitment to Delaware’s elderly by serving low-income senior citizens with outpatient health care services generally not covered by Medicare or private insurance. The Clinic provides dental care, vision care and hearing aids at little or no cost to qualified members. These services are unavailable to our many elderly patients who are so appreciative for the much needed attention inspired by the priorities of Alfred I. duPont.

The Clinic increased income eligibility in 2007 to serve more seniors and will make further increases in 2008. Hearing visits for 2007 increased by more than 10 percent over 2006 and totaled 4,397, while eye visits in 2007 totaled 15,533, an increase of almost five percent over 2006 visits.

**Alfred I. duPont Award for Excellence in Children's Health Care**

Jerold F. Lucey, MD, received the *Alfred I. duPont Award for Excellence in Children's Health Care* in 2007. In his life and work, duPont was creative but exacting—seeking to inspire himself and others to achieve excellence, much like Dr. Lucey, a worldwide leader in neonatal research.

Dr. Lucey is the founder of the Vermont Oxford Network, an international database improving the quality and safety of medical care for newborns. He has also been editor-in-chief of Pediatrics, the official peer-reviewed journal of the American Academy of Pediatrics, since 1974. Dr. Lucey helped pioneer two landmark treatments for newborns—phototherapy to prevent infant jaundice and artificial surfactant to assist premature infant breathing. Dr. Lucey epitomizes a caregiver who brings excellence and compassion to serve children.

Established by the Nemours Board of Directors in 2001, the *Alfred I. duPont Award for Excellence in Children’s Health Care* recognizes one individual annually who has made outstanding contributions to pediatric health care; promotes continued improvement of children’s care nationally; and honors Alfred I. duPont and his legacy of care for children.
Nemours Partnership for Children’s Health

The Nemours Partnership for Children’s Health helps make wishes come true for both those giving and receiving. The most fervent wish of our generous donors, from the community and Nemours, is to make a difference in the lives of children. Across Nemours, their contributions continue the legacy of Alfred I. duPont by providing important resources for clinical care, capital improvements and biomedical research, as well as education and health promotion programs—all of which make a significant difference in the health and well-being of children.

“A Night at Nemours,” a black-tie gala held on the grounds of the Nemours/Alfred I. duPont Hospital for Children (AIDHC), attracted 725 attendees, as well as 80 corporate sponsors and advertisers. The event raised $260,000 in support of Nemours’ new Center for Childhood Cancer Research.

Kohl’s Cares for Kids®, a program of Kohl’s department stores, contributed more than $81,000 to help AIDHC take health and prevention programs into the community. Nemours educators use the funds to distribute bicycle helmets, car seats for infants and toddlers, and educational materials for families.

The Nemours Society, our recognition society for donors whose annual gifts total $1,000 or more, grew to 266 members in 2007. Annual dinners in Delaware and Florida honor the members, a growing number of which are from the community.

Nemours also benefited from a number of events sponsored by individuals and organizations to help sick children, including golf, tennis and cheerleading tournaments. These events generated more than $81,000 for Nemours.

Last year, Nemours launched a new, enterprise-wide Associate giving program—“It’s All About the Kids.” Representatives from each Nemours location guided the planning and chose special giving opportunities by location. The group also oversaw the Associate Emergency Relief Fund. More than 250 Associates participated, raising more than $126,000.
A special thanksto the hundreds of Associates who contributed to the photographic impression of our system of care and health. This is a conscious attempt to reach across the miles to show the commonality of purpose that connects all of Nemours.

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