

under the Rainbow

Fall 2018

For every question, every kid, There's only one Rainbow.

CARE FOR THE TINIEST PATIENTS

Specialists perform a rare,
in utero procedure to save
a baby's heart

PAGE 8

9 tips to keep kids
germ-free at school

PAGE 5

New facility
reimagines
women and
children's
health care

PAGE 10

 University Hospitals


Rainbow
Babies & Children's





In this issue

Heather Catanese and her son, Lorenzo page 8

- 3 Health briefs
- 4 Are two-wheeled boards too dangerous for kids?
- 5 Infographic: 9 tips to keep kids germ-free at school
- 6 Sibling struggles: When conflict turns into bullying
- 7 Hand, foot and mouth disease: What you need to know
- 10 New UH Rainbow Center for Women & Children delivers supportive pediatric and women's health services all under one roof



Under the Rainbow is published by UH Rainbow Babies & Children's Hospital. Articles in this publication are written by professional journalists or physicians who strive to present reliable, up-to-date information. But no publication can replace the care and advice of medical professionals, and readers are cautioned to seek such help for personal problems. (FA18)

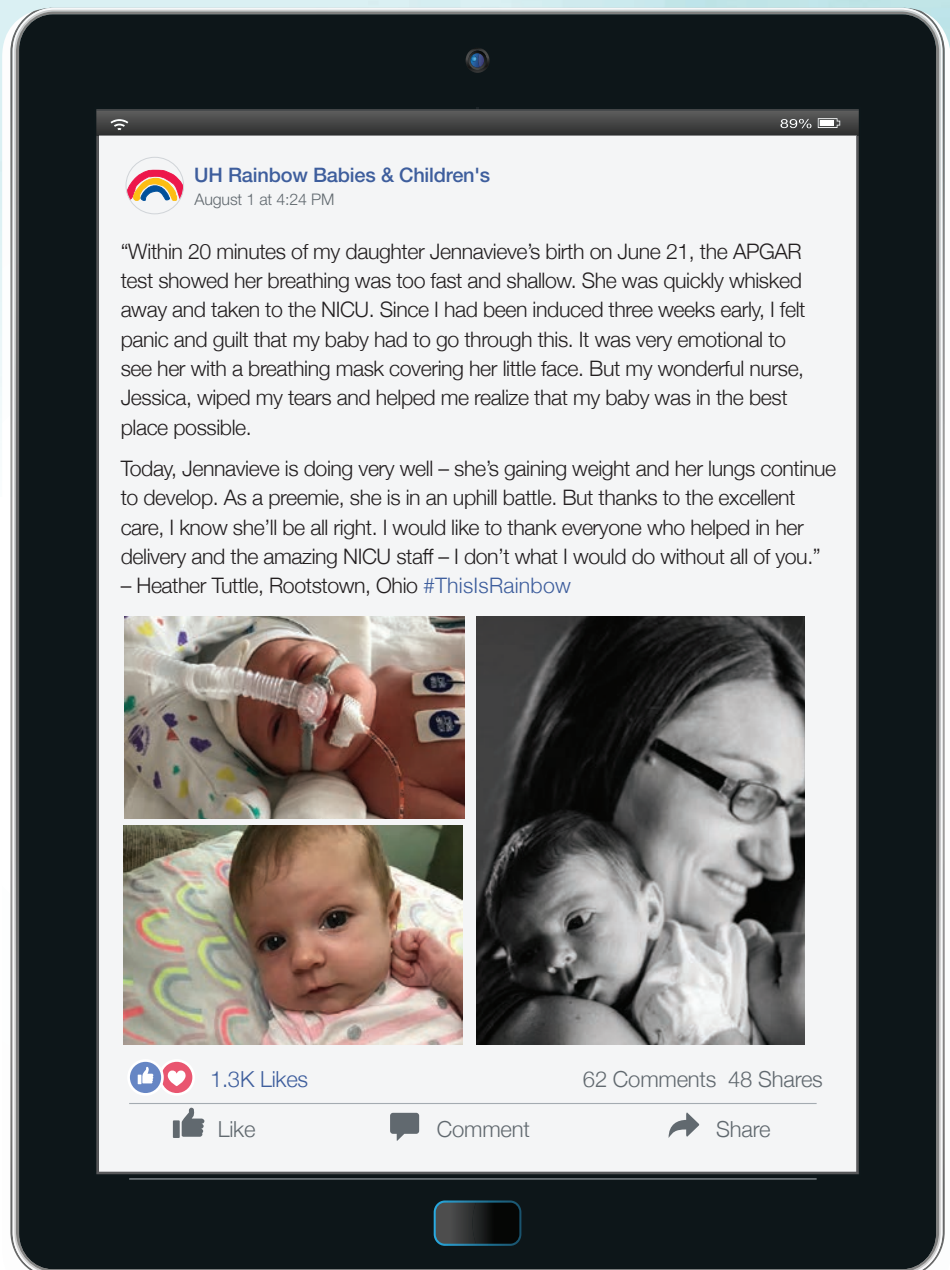


Ranked one of America's Best Children's Hospitals in eight pediatric specialties by U.S. News & World Report, including neonatology, orthopedics, pulmonology and cancer.

Learn more at Rainbow.org/USNews.



Stories from our Facebook community



» For more information about our services or to make an appointment, visit Rainbow.org.

Could selfies harm your teen's mental well-being?

Selfies aren't just a convenient way to capture a moment. Editing images before sharing on social media may contribute to low self-esteem and body dysmorphic disorder, reports new research published in JAMA Facial Plastic Surgery. Increasingly, patients are opting for plastic surgery to look better in selfies or appear more like filtered versions of themselves – known as "Snapchat dysmorphia."

Edited selfies create a mental rift with reality because you may expect to look that way in real life, experts say. Teens bear the brunt of this experience since they're most likely to internalize these unrealistic beauty standards. If your teen seems preoccupied with his or her appearance and it's interfering with work, school or other activities, talk with your child's doctor.



16th Annual Autism Seminar Series

UH Westlake Health Center – 1st Floor
960 Clague Road, Westlake, OH 44145

Wednesday evenings, 6:30 to 7:30 p.m.

October 17, 2018, through April 10, 2019

This series is designed to improve understanding of the medical, behavioral, social, sensory and educational issues related to autism spectrum disorders. Cost is \$100 for the entire series. **Space is limited to 120 participants, so please register early.** To register, please call **216-844-1289** or email Kathleen.Maxwell@uhhospitals.org.

UH Rainbow earns high recognition once again



Rankings at-a-glance

- Northern Ohio's highest ranking NICU
- Ranked in eight children's specialties
- Six specialties rank in the top 25

University Hospitals Rainbow Babies & Children's Hospital has once again been nationally recognized by U.S. News & World Report's Best Children's Hospitals annual rankings. UH Rainbow is ranked No. 6 in neonatology, and among the nation's top 25 children's hospitals in orthopedics, cancer, diabetes and endocrinology, pulmonology and urology.

UH Rainbow has ranked in the U.S. News Best Children's Hospitals every year since the ranking's inception.

Is your child afraid of getting a shot?

Many children have a fear of needles – and a child's fear can often be more upsetting than the actual shot. To ease your child's anxiety, try the following tips:

- **Explain matter-of-factly what is about to happen.**
Tell your child that the shot will hurt a little bit only for a moment.
- **Distract your child with age-appropriate toys.**
For example, bring along a rattle for a baby, a bubble blower or party blower for a young child, or a video game for an older child. It might help to bring along a toy or book that your child has never seen before.
- **Help your child relax.** Hold your child on your lap. Encourage him or her to imagine a beautiful picture or scene, or offer a soothing shoulder massage.
- Ask your child's doctor about **applying a numbing cream** to the skin before the shot.



Are two-wheeled boards too dangerous for kids?



MEET OUR DOC

JERRI ROSE, MD

*Pediatric Emergency
Medicine Physician,
UH Rainbow Babies &
Children's Hospital
Assistant Professor,
Case Western Reserve
University School of Medicine*

When hoverboards hit the scene in 2015, they were an immediate success. Also known as self-balancing or two-wheeled boards, these toys can be a fun way to get around – but are they safe for kids?

Shortly after they debuted, several manufacturers started selling hoverboards that were never inspected for quality or safety. News reports started to surface of the motorized boards spontaneously catching on fire, causing burns. To date, more than 300 incidents of these devices overheating or catching fire have been reported to the Consumer Product Safety Commission.

New hoverboards don't carry the same fire risk that some used to. If you have an older model, visit CPSC.gov to see if there's been a recall. All hoverboards should be compliant with the UL 2272 safety standard.

However, even if your child has one of the newest models, that doesn't automatically mean it is safe. After all, two-wheeled boards can be difficult to balance on – and falls resulting in injuries are not at all uncommon.

A look at statistics

How often do these falls result in serious injury? A recent study from the American Academy of Pediatrics found that about 26,854 children visited an emergency department with a hoverboard injury during 2015 and 2016. The average age of an injured child was 11. Boys were slightly more prone to present with injuries than girls (52 percent of the children seen were boys).



» Virtual care, anywhere

UH Virtual Visit allows you to make a virtual doctor's appointment 24/7. Register or learn more at VirtualVisit.UHhospitals.org.

Children were most likely to injure their wrists, forearms and heads. The most common injuries were:

- Fractures (40 percent)
- Bruises (17 percent)
- Strains/sprains (13 percent)

While hoverboards may be one of the newest toys, many other wheeled toys result in trips to the emergency department. During the same 2015 to 2016 time period, skateboards caused almost 121,400 injuries.

Practicing safety

How can you keep your kids safe when using any kind of wheeled toy? Here are some tips from Jerri Rose, MD, a Pediatric Emergency Medicine Physician at UH Rainbow Babies & Children's:

- Require children to wear protective gear, such as a helmet and wrist guards. "Parents should enforce a simple 'no helmet, no riding' policy for kids using wheeled toys including hoverboards, skateboards, scooters and bicycles," says Dr. Rose.
- Don't allow them to ride in or near traffic.
- If appropriate for the activity, enroll your child in lessons. Learning how to fall properly while skateboarding, for instance, can help children avoid serious injuries.
- Read all the manufacturer directions, including any age or weight restrictions.
- Don't use any motorized toy that overheats.
- Only use the charging cord that came with the product.
- Make sure the wheeled device your child uses is free of debris and not worn out.

"If your child sustains a fall that results in loss of consciousness, change in behavior, seizure activity, severe headache, vomiting or swelling over the head, always seek medical attention promptly," says Dr. Rose. "Wrist and ankle sprains can generally be treated with rest, ice, compression, elevation (RICE) and over-the-counter analgesics such as ibuprofen. If there's severe pain or swelling in the extremities after a fall, or if pain is not improving, it's time to see a doctor." •

9 TIPS to keep kids germ-free at school



Some things spread like wildfire in a school – the latest lingo, the latest trends and, unfortunately, the latest germs. Share these tips with your kids to keep them as healthy as possible:

Nearly **22 million** school days are missed each year due to colds alone.



WASH YOUR HANDS.

Teach younger kids to scrub their hands in warm, soapy water until they finish singing the entire alphabet song. Teach older kids to count to 20 before rinsing.



DON'T SHARE.

This applies to personal items, such as water bottles, earbuds, hats, hairbrushes and lip balms.



COVER SNEEZES AND COUGHS.

Teach kids to sneeze and cough into the crook of their elbow or a tissue – not their hands.



HANDS OFF YOUR FACE.

Teach younger kids especially to keep their fingers out of their mouths, noses and ears.



SKIP THE WATER FOUNTAIN.

If your children's school doesn't allow water bottles, teach them to use the water fountain without putting their mouths on the spigot.



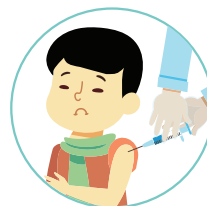
EAT YOUR FRUITS AND VEGGIES.

A nutritious diet can give young immune systems a healthy boost.



GET ENOUGH SLEEP.

Sleep helps keep kids' immune systems strong. Follow these guidelines per night:
Ages 10 to 17: 8.5 to 9.5 hours
Ages 5 to 10: 10 to 11 hours
Ages 3 to 5: 11 to 13 hours



GET THE FLU SHOT.

This is the single best way to protect your kids from influenza every year.



STAY HOME FROM SCHOOL.

Sick kids' weakened immune systems may make them vulnerable to even more germs – and they need to avoid infecting others.

» To learn more about our pediatric services or to find a doctor, visit Rainbow.org.

Expert: Claudia Hoyen, MD, pediatric infectious disease specialist, UH Rainbow Babies & Children's Hospital
Additional source: Centers for Disease Control and Prevention



Sibling struggles:

When conflict turns into bullying

Squabbling with siblings is part of growing up – but there is a point when it can go too far.

While parents might think of bullying as something that happens among classmates, sibling bullying has many of the same qualities. Like regular bullying, sibling bullying is an aggressive behavior intended to cause harm by a child/teen who has more power over the other child, and these behaviors are repeated over time even when the child is told to stop. Sibling bullying may present as:

- Frequently saying mean and hurtful things with the aim of upsetting a sibling
- Hitting, kicking, pushing or shoving
- Leaving a sibling out of activities with other siblings or other kids
- Telling lies or making up false rumors about a sibling – this could include cyberbullying, posting or texting inaccurate statements, or posting pictures on social media without a sibling's permission

Carolyn Ievers Landis, PhD, a Professor of Pediatrics and Licensed Clinical Psychologist at UH Rainbow Babies & Children's, adds, "While arguments and teasing happen with even the friendliest of siblings, bullying involves power and control. Bullying often happens in front of other children and away from the eyes of adults. It's something that occurs again and again."

Victims are more likely to be females bullied by an older sibling, particularly an older brother, according to a study published in Pediatrics. They're also more likely to live in families with at least three children.

A parent's role

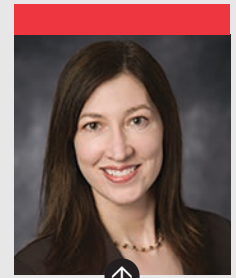
Managing the relationship between your kids isn't always an easy task. These tips from Dr. Ievers Landis can foster healthy relationships:

- The number one recommendation is to supervise your children carefully, particularly if you have concerns that one may be treating another unkindly. If you have any concerns, do not leave the children alone at home together without a trusted adult. Even if children are together in another room or outside, make

frequent, unannounced checks to make sure everyone is safe and being treated well.

- Avoid making comparisons of your children in front of each other. Instead, let each child know that he or she is special in his or her own way. Be consistent and fair in your treatment of each child.
- Address behavioral or other concerns (e.g., academic) privately. Talk to the child about any concerns away from siblings.
- Hold family meetings about any continuing areas of conflict between family members. This can help get all children talking in a way that's constructive and lets them know they're being heard.
- Teach your kids how to solve problems and have perspective on a situation. Make sure they understand how to manage conflict by using positive strategies such as calmly discussing emotions, setting ground rules, reasoning, negotiating and agreeing to a compromise.

"If you suspect bullying might be a problem, talking with your children's health care provider is a good idea," says Dr. Ievers Landis. "Take these concerns seriously and do not give up improving them until the bullying situation is under control. You will probably need to continue to monitor your children's relationships to make certain that the bullying does not re-emerge." •



MEET OUR DOC
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LANDIS, PhD

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>> Get parenting tips
and expert advice delivered
monthly to your inbox. Sign
up at [UHospitals.org/
BetterLiving](http://UHospitals.org/BetterLiving).





Hand, foot and mouth disease: What you need to know

Your child is irritable, has a fever and isn't eating well – again. Before you assume it's just another cold or flu, watch for other symptoms. Your young one may have hand, foot and mouth disease.

Symptoms

Hand, foot and mouth disease is common in children younger than age 5. At the beginning, your child will most likely have a fever, reduced appetite and sore throat. One or two days later, he or she may develop painful mouth sores that start as small red spots in the back of the mouth or a rash of blistering red spots on the hands, bottoms of feet, knees, elbows, genitals or buttocks.

How it spreads

Viruses cause hand, foot and mouth disease. It spreads through contact with nose, throat or blister fluids, or bowel movements – for example, if you change a diaper and touch your eyes, nose or mouth before washing your hands. It can also spread by touching contaminated surfaces or breathing air after a sick child coughs or sneezes. Your child will be the most contagious during the first week of illness.

How to help your sick child

Keep your child at home until he or she is well. There is no specific treatment, but according to Anandhi Gunder, MD, a Pediatrician at

Rainbow Euclid Pediatrics, you can help your little one feel more comfortable with:

- Medications to reduce pain and fever, such as acetaminophen or ibuprofen
- Numbing mouthwashes or sprays
- Lots of liquids to prevent dehydration

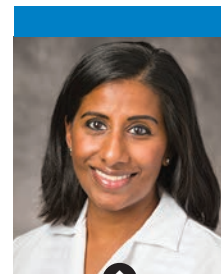
“Older children and adults can sometimes catch it, too,” says Dr. Gunder. “Unfortunately, there is no vaccine available yet.”

Dr. Gunder suggests these tips for reducing the risk for spreading hand, foot and mouth disease to other family members:

- Make sure everyone washes hands often
- Avoid touching your eyes, nose or mouth with unwashed hands
- Avoid kissing, hugging, and sharing cups and utensils with people who are sick
- Disinfect frequently touched surfaces in your home, like toys and doorknobs

Dr. Gunder adds, “Hand, foot and mouth disease is usually mild and resolves within seven to 10 days. Keep in mind that it is one of many infections that cause mouth sores and rashes. Your doctor will diagnose your child by considering his or her symptoms and looking at the mouth sores and rash.”

As a parent, it's hard to see any of your children suffer. Help your children avoid getting sick in the first place by encouraging handwashing and reminding them about how they can reduce their risk. •



MEET OUR DOC

ANANDHI GUNDER, MD

*Pediatrician,
Rainbow Euclid Pediatrics
Clinical Instructor,
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University School of Medicine*

>> Schedule an appointment today with a UH Rainbow Care Network pediatrician at **216-815-0059** or **Rainbow.org**.



Anthony and Heather
Catanese with their
son, Lorenzo



Incomparable care for the tiniest patients

Specialists team up to perform a rare procedure **in utero** to save a baby's heart.

When Heather Catanese was 22 weeks pregnant with her third son, Lorenzo, she underwent a routine prenatal anatomy scan. The test showed that something was wrong – blood was flowing in the wrong direction through Lorenzo's heart.

Heather and her husband, Anthony, were referred to James Strainic, MD, Director of the Fetal Heart Program at University Hospitals Rainbow Babies & Children's Hospital. He was able to see them the next day. During the appointment, testing revealed that Lorenzo had a very serious condition known as impending hypoplastic left heart syndrome (HLHS). "Babies with this condition are born with half a heart," Dr. Strainic says. "As a result, the left chambers of the heart are too small to pump blood to the body." In addition, the fetal echocardiogram showed a complex form of this type of heart disease with severe leakage of the left heart valve, the mitral valve.

The outcomes for babies with this combination of problems (severe aortic stenosis and severe mitral valve regurgitation) are grim. They have about a 10 percent chance of surviving to age 6 months. But there was a chance that Lorenzo's story could be different. Dr. Strainic told Heather and Anthony about an innovative procedure that could be done while the baby was still *in utero* (in the womb) to help the left side of his heart grow.

That same day, Dr. Strainic discussed Lorenzo's case with members of the Congenital Heart Collaborative's Fetal Cardiac Intervention team. This multidisciplinary team includes experts in maternal fetal medicine, fetal cardiology and pediatric interventional cardiology from UH Rainbow and UH MacDonald Women's hospitals and Nationwide Children's Hospital. Together, the team agreed that Lorenzo was a candidate for the procedure. Dr. Strainic called Heather and Anthony that evening to offer them the option.

offer this procedure and the only provider of this type of care in Ohio.

"The turning point in this whole experience occurred as we left one of our follow-up appointments with Dr. Strainic a couple months after the procedure," Heather says. "I realized that Anthony and I had gone from discussing the most important things we wanted to do in the little time that we would get to spend with our baby to talking with Dr. Strainic about what sports he would be able to play in high school!"

“We are so thankful for the Congenital Heart Collaborative team, who not only saved our son’s life, but have given him a higher quality of life than we ever could have hoped for.”

– Heather Catanese

Making the decision

The next few days were a whirlwind. "We met with several members of the team to discuss our questions and help us understand the procedure," Heather says. The family also received opinions from teams in other parts of the country that performed the same procedure. "Ultimately, we decided to move forward with the team at UH Rainbow," she says. "We appreciated how communicative and open they were with us and with each other. We felt like no other team of doctors was as invested in our baby as the team here at UH."

The clock was ticking. "The ideal window for performing this procedure is between 23 to 26 weeks of gestation," says Ellie Ragsdale, MD, Director of Fetal Intervention at UH MacDonald Women's Hospital. "The earlier we do it, the better."

On February 7, 2018, at 24 weeks of pregnancy, Heather underwent the procedure, known as *in utero* fetal aortic valvuloplasty, at UH Rainbow. Under ultrasound guidance provided by Dr. Strainic, Dr. Ragsdale placed a needle through Heather's abdomen, into her uterus and into Lorenzo's heart. Then Aimee Armstrong, MD, Director of Cardiac Catheterization & Interventional Therapies at Nationwide Children's Hospital, subsequently expanded a balloon in Lorenzo's aortic valve to increase blood flow through the left ventricle. "The goal is that the increased blood flow will aid the development of the left side of the heart and prevent HLHS," Dr. Strainic says.

The Congenital Heart Collaborative team is one of only eight centers nationwide that

A future full of possibilities

After the successful procedure, the remainder of Heather's pregnancy progressed smoothly. She visited Dr. Ragsdale and Dr. Strainic nearly every week to make sure that she and Lorenzo were doing well. On May 18, at almost 39 weeks' gestation, Dr. Ragsdale delivered Lorenzo.

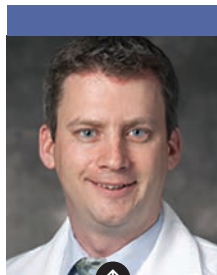
"There were so many unknowns," Heather says. "We didn't know how his heart would function outside of the womb or if we'd get to see him or hold him right away." Happily, they were able to hold him in the delivery room before he was taken to the neonatal intensive care unit for closer examination.

At 4 days old, Lorenzo was ready to go home with his family. "We were so excited to take our son home and are so thankful for the Congenital Heart Collaborative team, especially Drs. Strainic, Ragsdale, Armstrong and Bocks, who not only saved our son's life, but have given him a higher quality of life than we ever could have hoped for."

Today, Lorenzo is a healthy baby boy and receives monthly echocardiograms from Dr. Strainic. He loves watching and interacting with his two big brothers, Gianni and Luca. "I can already tell that he's going to try to keep up with them," Heather says. "We couldn't have asked for a better outcome." •

» Expert care, before and after birth

To learn more about our Fetal Heart Program, visit Rainbow.org/Heart.



MEET OUR DOCS

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Assistant Professor,
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ELLIE RAGSDALE, MD

Director, Fetal Intervention,
UH MacDonald
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Reimagining health care

The UH Rainbow Center for Women & Children delivers supportive pediatric and women's health services all under one roof.

Imagine a different type of health care. Instead of making appointments in multiple locations for a child's pediatrician visit, a mother's prenatal care, and a child's dental and vision screenings, patients could receive all these services under one roof.

Consider the convenience of having prescriptions filled at an on-site pharmacy or lab tests drawn at a full-service lab without needing to travel to separate locations. Picture a state-of-the-art facility that's bright, inviting, and celebrates the vibrant and diverse urban community it serves.

This July, when the new UH Rainbow Center for Women & Children opened its doors, it made all of this – and much more – a reality for people in Cleveland. Located at 5805 Euclid Avenue, the 40,000-square-foot outpatient facility

provides high-quality health care services in the heart of Midtown. Just two miles west of University Hospitals Cleveland Medical Center, it's the new home for two outpatient practices previously located on the first floor of UH Rainbow Babies & Children's Hospital. Together these clinics log more than 45,000 patient visits per year, and are primary UH training sites for the next generation of pediatric and OB/GYN clinicians. The Center is also expected to receive LEED certification.

Advancing the science of health and the art of compassion

"The UH Rainbow Center for Women & Children is an urban academic medical center that provides comprehensive, coordinated care from a variety of different services that are essential for patients' overall well-being," says Aparna Bole, MD,

Division Chief of General Academic Pediatrics & Adolescent Medicine at UH Rainbow and Co-Director of the Center. "It's a one-stop shop for their health care needs that uses a team-based approach for care efficiency and enhanced communication – drastically different from the traditional model of care. Another unique focus is to connect families with resources to address social, economic and environmental factors that can influence health."

Grant funds allow UH to expand group care beyond pregnancy and pediatric visits to include group care for nutrition and primary care conditions, such as high blood pressure. This team-based approach to medical visits will be routine at the UH Rainbow Center for Women & Children, engaging with patients in a group setting with peer-led discussion.



Improving outcomes for women and babies

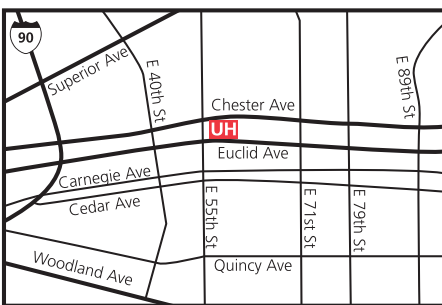
The Center also aims to improve outcomes for mothers and infants with group prenatal care known as CenteringPregnancy®.

“CenteringPregnancy includes comprehensive prenatal care, during which women receive much more face time with their provider, and group discussions that are facilitated by one of the providers, but led by the group,” says Ann Konkoly, APRN-CNM, Co-Director of the UH Rainbow Center for Women & Children. The Centering® model of group health care is a proven effective strategy, and UH’s CenteringPregnancy has achieved positive results. In 2017, the program’s pre-term birth rate was just 3.8 percent, compared with Cleveland’s overall rate of nearly 15 percent, according to March of Dimes.

Meeting total health needs in one place

Beyond traditional treatment and medical therapies, such as pediatric primary care, adolescent medicine, and pregnancy and gynecologic medical care for women, the UH Rainbow Center for Women & Children offers community and educational programs focused on disease prevention and total health needs. These programs include the following and more:

- Integrated mental and behavioral health services
- Dietitians and nutrition education
- Full-service vision clinic from OneSight
- Dental screening and cleaning
- Legal services
- On-site WIC office
- Pharmacy



>> To make an appointment at our new facility, call 216-920-4371.

Learn more about our services at Rainbow.org/Center.



MEET OUR DOC

APARNA BOLE, MD
Division Chief, General Academic Pediatrics & Adolescent Medicine, UH Rainbow Babies & Children’s Assistant Professor, Case Western Reserve University School of Medicine

Designed with community support

To help determine the different types of resources to offer and to incorporate community-centered design features in the building, UH convened a Community Advisory Board two years ago that includes more than 70 stakeholders representing 35 different organizations including UH Rainbow and UH MacDonald patients and staff.

“We are grateful for this group’s generous commitment to collaboration, and look forward to bringing novel joint programs, connectivity to social services and community input to our center programming,” Dr. Bole says. “The Center’s unique model of care also enables us to develop and evaluate innovative programs that give us the opportunity to stay on the leading edge of health care.” •



The UH Rainbow Center for Women & Children’s first patient, 3-day-old Na’Tour, had his first well visit with pediatrician Dr. Sarah Ronis. Na’Tour’s family was excited to be the first to experience the new Center and looks forward to future visits.



MEET OUR PROVIDER

ANN KONKOLY, APRN-CNM
Co-Director, UH Rainbow Center for Women & Children Clinical Instructor, Case Western Reserve University Medical Center



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Rainbow Babies & Children's Hospital
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The art of compassion.**

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Twitter: [@UHRainbowBabies](https://twitter.com/UHRainbowBabies)
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[#ThisIsRainbow](https://www.instagram.com/ThisIsRainbow)



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Create your personal health record today

University Hospitals MyUHCare Personal Health Record (PHR) allows you to receive lab and radiology results, communicate with your doctor, refill a prescription, request an appointment, pay a bill and so much more from the comfort of home or on the go 24/7.

Adults over the age of 18 can create an account from the UH Now app, or by going to **UHhospitals.FollowMyHealth.com** from a computer, smartphone or tablet and selecting the "I Need to Sign Up" button.

To learn how to access health records for your child under the age of 18, visit UHhospitals.org/ParentGuardianAccess.



Ask Rainbow

Submit a question at **Rainbow.org/AskRainbow** and get an answer from one of our pediatric experts within 48 hours. Or call our pediatric nurse line 24/7 at **216-815-0059**.

A guide for your child's first years

Our **FREE** weekly emails make it easy to stay informed about important milestones during pregnancy and your baby's first few years.

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Or go to
UHhospitals.org/GrowKids

Kids in the Pool

A swimming program for children and teens with cancer and blood disorders. Sponsored by Iris Wolstein in honor of her husband, Bert Wolstein.

**Saturday, December 1
9 a.m.**

**Robert F. Busbey Natatorium
Cleveland State University**

» To register or for more information, contact Michele Rothstein:
216-286-6553
Michele.Rothstein@uhhospitals.org

