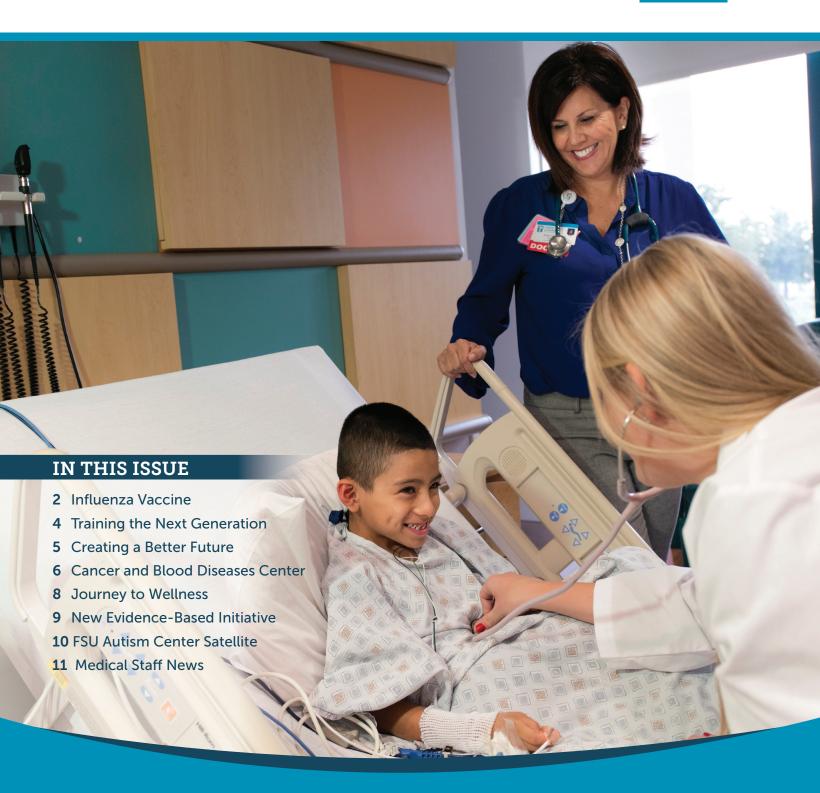


# Progress Notes A Publication of the Medical Staff of Valley Children's Hospital

FALL 2015



## INFLUENZA VACCINE UPDATE



Sahar Barayan, MD Chief of Staff

Valley Children's Healthcare is vaccinating according to the Advisory Committee on Immunization Pracitces (ACIP) and American Academy of Pediatrics (AAP) 2015-16 recommendations. We are committed to

patient safety and require all our employees and medical staff to receive annual influenza vaccination.

Routine annual influenza vaccination is recommended for all persons aged  $\geq 6$  months who do not have contraindications. Healthcare providers should offer vaccination by October if possible and for as long as influenza viruses are circulating. To avoid missed opportunities for vaccination, providers should offer vaccination to unvaccinated persons aged >6 months during routine healthcare visits and hospitalizations.

Valley Children's Healthcare will provide influenza vaccination to children who are hospitalized and do not have a contraindication at discharge. If vaccinations



are given during hospitalization, this information will be included in the discharge summary and the state registry will be updated.

For healthy children age 2 through 8 years who have no contraindications or precautions, either live attenuated vaccine or inactivated vaccine is appropriate. Providers need to be aware of additional precautions/contraindications for the live attenuated vaccine. No preference is expressed for any person ages 2 through 49 years for whom either vaccine is appropriate. Either trivalent or quadrivalent vaccine can be used. Vaccination should not be delayed to obtain a specific product for either dose. Any available, age-appropriate trivalent or quadrivalent vaccine can be used. Inactivated or live vaccines are considered interchangeable for purposes of the second dose if required.

There are relatively few contraindications to influenza vaccination:

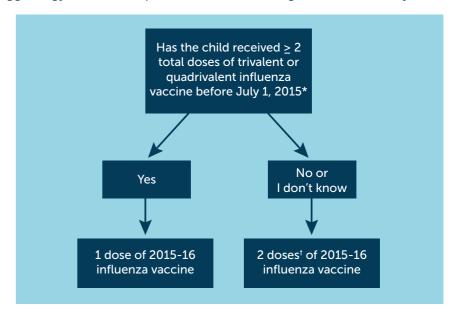
Severe allergic reaction to any vaccine component, including egg protein, or after previous dose of any influenza vaccine.

There are relatively few precautions – the family and the provider should weigh the risks of influenza infection vs. the potential risks from the vaccine in the following circumstances:

Moderate to severe acute illness with or without fever: history of Guillain-Barré syndrome within six weeks of receipt of influenza vaccine.

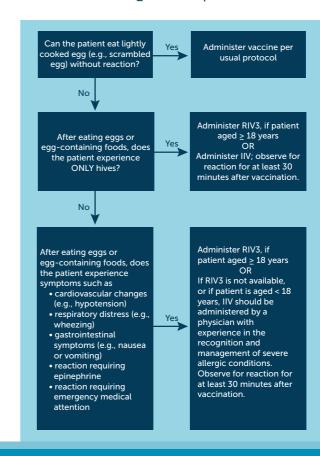
Minor illnesses, with or without fever, are not contraindications to the use of influenza vaccines, particularly among children with mild upper respiratory infection symptoms or allergic rhinitis.

ACIP and AAP recommendations for the 2015-16 Influenza Season have significant updates on vaccine composition and algorithms for egg allergy and dose requirements in children aged 6 months to 8 years:



\*The two doses need not have been received during the same season or consecutive seasons.

<sup>†</sup>Doses should be administered ≥ 4 weeks apart.



RIV3 - recombinant influenza vaccine trivalent

References: Prevention and Control of Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices, United States, 2015-16 Influenza Season. Aug. 7, 2015.

AAP Policy Statement: Recommendations for Prevention and Control of Influenza in Children, 2015-2016, Committee on Infectious Diseases September 2015.

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# **Training the Next Generation**



Jolie Limon, MD **Chief of Pediatrics** Valley Children's Healthcare

I am pleased to announce the development of the Valley Children's Pediatric

Residency Program, in Affiliation with Stanford University School of Medicine, which will recruit its first class of 13 residents their area of interest. We are fortunate to for July 2017. This is an amazing opportunity for this organization and our community as we train the next generation of pediatricians who will serve as leaders and providers to Valley children.

I joined Valley Children's in 2000. I was just out of residency and started my career at this freestanding children's hospital in the heart of Central California. Over the past 15 years, I have watched this hospital grow and flourish. We have expanded our clinical services to provide care for more than 1.3 million children throughout 11 counties. In pursuit of our vision to become the nation's best children's hospital, we constantly look to add new talent and innovation. This vision now includes Graduate Medical Education. Our broad vision for the new program includes focusing on quality and patient safety, interprofessional education, and community. Our program will emphasize the diverse nature of pediatrics as well as the multicultural population we serve. When residents begin Valley Children's program, they may choose between four different training tracks. Each track will provide residents an individualized curriculum that supports their career choice. The tracks include: 1) Inpatient Medicine and Quality 2) Pediatric Subspecialties 3) Primary Care PLUS with emphasis on advocacy and the medical home 4) Academic Medicine and Leadership. In addition to our residents,

Valley Children's will continue to serve as a major training site for other Valley programs.

Residents will also have four options for their continuity clinic sites depending on partner with Kaiser Permanente, which will serve as one of our continuity clinic sites. The other sites include Fresno Children's Medical Group, a private-practice setting, and Charlie Mitchell Children's Center, a rural health clinic on Valley Children's main campus providing primary care for medically complex, underserved children.

Our Stanford partnership will create many valuable opportunities for both pediatric residency programs. Valley Children's residents will rotate in Palo Alto for adolescent medicine as well as behavioral and developmental pediatrics in their first year of training. The Stanford pediatric residents will join us at Valley Children's Hospital for a robust emergency medicine rotation as part of their second-vear curriculum. Both programs will have the option of away electives at either site.

With Stanford as our affiliate, we will continue to have full control and ownership of the program along with Stanford School of Medicine's expertise and support. We are one of the few freestanding children's hospitals nationwide not to have its own sponsored program. Now is the time to create the educational environment for the Valley's future pediatricians and to ensure high-quality pediatric care that our community deserves and has come to expect from Valley Children's.

## CREATING A BRIGHTER FUTURE



Monica Prinzing Communications Specialist Valley Children's Healthcare

In 1978, Dr. John Gates was diagnosed at age 5 with acute lymphoblastic leukemia (ALL), the most common type of

childhood cancer. He began receiving therapy for the cancer that affects the blood and bone marrow at a time when cancer treatments just started proving successful for some children.

Undergoing years of chemotherapy, radiation, and experimental bone-marrow transplants, Dr. Gates experienced firsthand the challenges of past treatment, including two relapses, painful spinal tap procedures without sedation and weekly blood draws before portacaths existed. During long periods when he was too immunocompromised to attend school, he missed social activities while completing his coursework in isolation at home on the East Coast.

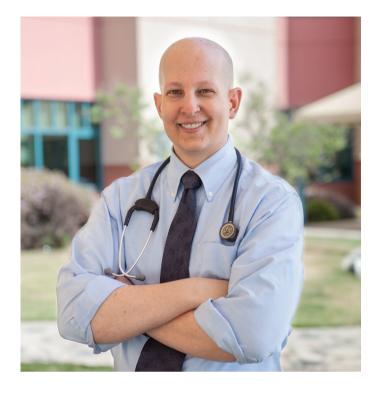
## I realized this is my life purpose and why I survived when the odds were stacked against me. >>

- Dr. John Gates

Fortunately, Dr. Gates became cancer-free as a teenager. He continued to work hard to get good grades and prepare for what his family assumed he would naturally become: a doctor who treats cancer.

"But even when I received my medical degree, I still guestioned who I was and what I wanted," said Dr. Gates.

Soon everything made more sense to him. During his fellowship in pediatric hematology/oncology at Texas Children's Cancer Center-Baylor College of Medicine, he became fascinated with the Center's childhood cancer survivorship program. Given decades of improved supportive care and powerful yet toxic cancer treatments, the increase in childhood cancer survivors has inspired such programs to help them prepare for a brighter future.



"Then it clicked," said Dr. Gates, who was born in Sacramento. "I realized this is my life purpose and why I survived when the odds were stacked against me."

In 2005, Dr. Gates enthusiastically accepted the position as a pediatric hematologist/oncologist at Valley Children's - located in the same area where his parents grew up and he has many relatives.

By 2010, under Dr. Gates' direction, Valley Children's launched a formalized Childhood Cancer Survivorship Program. The only one of its kind in the region and among a small handful statewide, the program's participants receive personalized treatment therapy summaries, and a tailored risk-assessment, screening and follow-up plan.

"Dr. Gates is motivated and passionate about helping kids," said Dr. David Christensen, Valley Children's senior vice president, medical affairs, and chief medical officer. "He can relate to what our children diagnosed with cancer go through. He's a great success story himself."





The Valley Children's **Pediatric Residency** Program, in Affiliation with Stanford University School of Medicine, will recruit its first class of 13 residents for July 2017.

#### **COMMITTEE CHAIRS**

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Committee Reporting to the Department of Surgery: Trauma

Michael Allshouse, DO



# **CANCER AND BLOOD DISEASES CENTER**

Valley Children's Pediatric Hematology/Oncology Division is Central California's exclusive provider of comprehensive, state-of-the-art treatment for children and adolescents with cancer and blood disorders. Our nine, board-certified faculty members in association with other healthcare providers and specialists from multiple disciplines, provide experienced, compassionate clinical care. We participate in important clinical research with the ultimate goal of achieving a long-lasting cure.

#### **Exemplary cancer care**

Every year, about 12,000 children are diagnosed with cancer nationwide – more than 120 of whom are diagnosed and treated at Valley Children's Cancer and Blood Diseases Center. Our oncology division is dedicated to providing each of these children the best care. Treating childhood cancer is a collaborative endeavor, requiring the expertise of pediatric

hematologists/oncologists as well as a variety of other pediatric subspecialists, specialized nurses, social workers, child life specialists, palliative care professionals, and other caring members.

The pediatric oncology department

at Valley Children's began almost 30 years ago under the leadership of Dr. Vonda Crouse. Dr. Crouse continues to provide exemplary care along with our other pediatric hematologists/oncologists who bring specialized expertise. For example, our neuro-oncology program, led by Dr. David Samuel, is a multispecialty team focused on treating children with brain tumors. Our Childhood Cancer Survivorship Program, developed by Dr. John Gates, himself a survivor of childhood cancer, monitors children for late effects of treatment, and provides education and guidance to prepare them for the rest of their lives.

The oncology team also cares for children with solid and rare tumors, and other diseases such as the histiocytic disorders LCH and HLH. The team's dedication to quality improvement and safety has resulted in Dr. Faisal Razzaqi's recent appointment as a national co-chair for the Children's Hospital Association collaborative to improve sepsis outcomes.

An important aspect of treating children with cancer is collaborative research. The Children's Oncology Group (COG), of which Valley Children's is a member, is the largest such group composed of more than 200 pediatric institutions across North America, Europe and Australia. Valley Children's program ranks in the top 10 percent for therapeutic COG enrollments to National Cancer Institute studies. With access to the latest and best treatment protocols, Valley Children's ensures that each

child treated for cancer receives the most effective curative regimen. Fifty years ago, few children diagnosed with cancer lived to see their next birthday. Today, due to advanced therapies and supportive care, about 80 percent of children treated for cancer become long-term survivors.

We are extremely grateful for the community's love and support, enabling our program to make such impressive progress over the past three decades. Valley Children's remains dedicated to providing unparalleled cancer care for all children of the Valley for many years to come.

#### **Blood disorders expertise**

The field of blood disorders has seen unprecedented advances over the past few decades. Valley Children's Hematology Division has kept pace with these developments, establishing itself as the sole provider of state-ofthe-art care for the entire spectrum of blood disorders affecting the pediatric population throughout the Valley. In addition to providing timely diagnosis and comprehensive management of simple and complicated blood disorders, expert advice is provided to providers across the region. Our federally funded Hemophilia Treatment Center (HTC) – the only one in the Valley – provides comprehensive care to patients with bleeding and clotting disorders and participates in various national projects in hemophilia research. This includes the Centers for Disease Control and Prevention's ongoing surveillance studies related to these disorders; the American Thrombosis and Hemostasis Network Dataset; and the My Life Our Future (provides free genotyping for all patients with hemophilia), to name a few.

Valley Children's HTC recently received national recognition at the Annual Meeting of the National Hemophilia Foundation in Dallas, Texas. The HTC won the "Champion of the Year 2015" award for its innovative approach to increase enrollment in the My Life Our Future project.

In addition to offering coordinated care from numerous specialists, the HTC features a high-quality Home Therapy program in association with the Valley Children's Home Care program. Dr. Vinod Balasa, Valley Children's medical director of hematology/oncology and the HTC, is a nationally renowned expert in bleeding and clotting disorders.

In the area of hemoglobinopathies, our hematology division provides comprehensive care for patients with sickle cell disease and is now an important member of a regional collaborative to improve care for patients with thalassemia along the entire West Coast. The hematology division is an active member of a U.S. Health Resources and Services Administration (HRSA) grant to develop a model for a network of specialty centers throughout the region where patients can easily access critical services without the need to travel long distances. Dr. Latha Rao, a prominent faculty member of our hematology division, will spearhead these efforts at our institution.

Valley Children's Hematology/Oncology Division follows a coordinated care model with a multidisciplinary approach by establishing comprehensive care clinics, fostering open communication between referring physicians and specialists, and providing an extensive patient education program in addition to high-quality clinical care. Our physicians are available 24/7 to provide consultations and assistance for any area related to pediatric cancer and blood disorders.









# Family goes into 'fight mode' to beat young daughter's cancer

Ashlei Frazier couldn't imagine her young daughter who appeared happy and healthy not making it to her first day of school or even her next birthday.

So when she learned her little girl Madyn's blood test during a routine well-baby exam indicated an alarmingly high white blood cell count, her initial reaction was, "Kids – babies – don't get cancer. Right?"

Madyn was only 18 months old. She looked a little pale. Ashlei assumed she probably only had a virus. But Madyn's pediatrician suspected cancer and immediately referred her to Valley Children's Cancer and Blood Diseases Center for further evaluation and diagnosis.

Dr. J. Daniel Ozeran, a pediatric hematologist/oncologist, confirmed the parents' greatest fear: Madyn has leukemia. It's very aggressive. Treatment needs to begin right away.

As the Fraziers grasped the enormity of the situation, their emotions raced. "Valley Children's is part of the Children's Oncology Group (COG)," Ashlei and her husband Jeremy Frazier heard Dr. Ozeran's steady voice continue, referring to the world's largest organization devoted to childhood cancer research. "Wherever you go, you'll get the same treatment - just different faces and scenery."

"We knew we were in the right place," Ashlei said, wrapping her arms lovingly around Madyn sitting on her lap at a local coffee shop. "Dr. Ozeran's confidence made our family feel safe."

"Dr. Ozeran said to plan on two-and-a-half years of treatment," Jeremy said. "He believed Madyn would eventually be a healthy girl starting kindergarten. We immediately went into fight mode."

Within hours of Madyn's diagnosis, a mediport was surgically inserted and her spinal fluid checked for signs of leukemia cells. Madyn's journey to wellness had begun. The first year of her treatment was especially difficult, but Valley Children's compassionate team made an unbearable situation bearable. "They put us at ease with a smile, a laugh or uplifting comment," Ashlei said.

Fortunately, Madyn's condition didn't require a bone marrow transplant or radiation therapy. October 2015 marked two years since her last bone marrow biopsy. Madyn continues follow-up visits to ensure she remains healthy. In another year, she will begin Valley Children's Childhood Cancer Survivorship Program.

The Fraziers still think of Valley Children's Hospital as a "home away from home." Whenever Madyn sees Valley Children's from a distance or on TV, her response is consistent: "That's my hospital!"

"Dr. Ozeran said he had every hope Madyn would start kindergarten healthy – and here we are," Jeremy said beaming, watching Madyn playing with her sister just days before starting kindergarten. "Madyn has her whole life ahead of her - because of Valley Children's."

#### - Monica Prinzing

Communications Specialist, Valley Children's

## **NEW EVIDENCE-BASED INITIATIVE UNDERWAY**



Tiffany Osburn, MD Pediatric Hospitalist

We are very excited about a new Evidence-Based Medicine initiative at Valley Children's Hospital. The initiative provides a formal structure for our clinical pathways and evidence-based practices.

So far this year, we revised our clinical practice guidelines for bronchiolitis and asthma. The diagnoses were chosen based on volume and the availability of good evidence to drive practice. As part of the process, subject matter experts across the disciplines came together to discuss the literature. The evidence is assimilated and dispersed and then discussed in a multidisciplinary setting. The subject matter experts then come to a consensus about the contents of the guideline. A plan and process for education and implementation of the clinical practice quideline follows.

All of the clinical disciplines, including nursing, respiratory care and emergency medicine physicians and hospitalists are actively engaged.

The major changes for our bronchiolitis and asthma clinical practices guidelines will be:

#### **Bronchiolitis**

- Removal of all inhaled medications from the bronchiolitis pathway
- Lowering of the threshold for oxygen therapy to 90% Asthma
- Standardization of continuous albuterol dosing in accordance with National Heart Lung and Blood Institute (NHLBI) guidelines
- Use of metered-dose inhalers (MDIs) for all doses of Albuterol that are not continuous nebulizations
- Oral decadron as the steroid of choice for mild/ moderate exacerbations of asthma
- Implementation of a respiratory score to help guide

We developed robust tools for monitoring the clinical practice in these areas, recognizing variation, and initiating provider feedback on performance. We look forward to using those tools to improve quality across the continuum of care.

As respiratory season approaches, we are excited to evaluate the impact of our work. Our Evidence-Based Medicine committee will soon become a standing medical staff committee, committed to ensuring that our clinical pathways contain the most relevant, up-to-date practice recommendations.







# **New FSU Autism Satellite Location**



Executive Director, Behavioral Sciences Institute

For more than 60 years, Valley Children's has consistently adapted to the growing needs of our community, making the health and wellbeing of our children the top priority. On July 17, Valley Children's

and California State University, Fresno, officially recognized the opening of the Autism Center @ Fresno State's new satellite location at Valley Children's main campus.

This new partnership between the University and Valley Children's addresses the increasing need for services for children with autism spectrum disorder (ASD) – the fastest growing developmental disability in the nation – and both organizations' enduring commitment to improving the quality of life for all children.

The Center provides principle-based behavior intervention for children 18 months to 6 years old with, or at risk of, an autism diagnosis or related disability. Research-based procedures help children develop skills on their own. The instructional programs expand children's language capabilities, enabling them to learn through observation of the environment and improve their access and quality of life in inclusive settings.

To best meet the needs of the child and the family, the Center combines both Center and home-based interventions. Creating a positive and fun environment, rich with language and opportunities for peer engagement, is critical when addressing communication and social delays.

While most goals can be addressed at the Center, certain objectives are best accomplished in the home. As such, the Center staff works closely with parents, providing support and home visits as needed.

The Center employs a team of professionals who come from various educational backgrounds, with most studying applied behavior analysis, early childhood education, or speech and communicative disorders. A board-certified behavior analyst directly supervises each client, monitoring progress and outcomes daily.

The Center is an in-network provider for a number of insurance companies. Single-case agreements can be made if out-of-network services are available. For insurance information or to make a referral to the Center, call (559) 278-6779. You may also fax a referral form to (559) 278-0015. (The form is available at www.fresnostate. edu/csm/bsi/documents/REFERRALFORM.pdf). In most cases, assessment and services start by the beginning of the following month.

The Autism Center @ Fresno State is part of a continuum of care provided to those with ASD through the Behavioral Sciences Institute. The institute has four programs: the Autism Center, Behavior Intervention Services, Social Connections and Positive Parenting. Each of these programs meets a community need by providing services throughout the lifespan for those with ASD.



## New practitioners who recently joined Valley Children's medical staff include:

#### Maternal-Fetal Medicine

#### Cheryl Albuquerque, MD

Dr. Albuquerque is a new member of Specialty Medical Group practicing as a maternal-fetal medicine specialist at Valley Children's.

#### **Pediatrics**

#### Isam Dafdony, MD

Dr. Dafdony is a new member of Valley Children's Primary Care Group practicing as a pediatrician in

#### William DiNicola, MD

Dr. DiNicola is a new member of Valley Children's Primary Care Group practicing as a pediatrician in Bakersfield.

#### Avsun Azimi, DO

Dr. Azimi is practicing as the chief resident through the UCSF Pediatric Residency Program.

Dr. Desai is practicing as the chief resident through the UCSF Pediatric Residency Program.

#### Brent Feudale, MD

Dr. Feudale is practicing as the chief resident through the UCSF Pediatric Residency Program.

#### Pediatric Anesthesiology

#### Inger Aliason, MD

Dr. Aliason is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric

#### Monique Cadogan, MD

Dr. Cadogan is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric anesthesiologist.

#### Carina Cheung, DO

Dr. Cheung is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric anesthesiologist

#### Shelby Cody, MD

Dr. Cody is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric anesthesiologist.

#### Ahamed Raza, MD

Dr. Raza is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric anesthesiologist.

#### **Pediatric Hospitalist** Laura Maitoza, MD

Dr. Maitoza is a new member of Specialty Medical Group practicing as a pediatric hospitalist.

#### Hasti Sanandajifar, DO

Dr. Sanandajifar is a new member of Specialty Medical Group practicing as a pediatric hospitalist.

#### Christine Santos, DO

Dr. Santos is a new member of Specialty Medical Group practicing as a pediatric hospitalist.

#### **Pediatric Critical Care Medicine**

#### Molly Dorfman, MD

Dr. Dorfman is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric intensivist

#### Andrew Kim. MD

Dr. Kim is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric intensivist

#### Bruce Tran, MD

Dr. Tran is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric intensivist.

#### Wendy Wong, DO

Dr. Wong is a new member of Pediatric Anesthesia Associates Medical Group practicing as a pediatric intensivist

#### Interventional Radiology

#### Trevor Davis, DO

Dr. Davis is a new member of Wishon Radiological Medical Group practicing as an interventional radiologist.

#### Maud Morshedi, MD

Dr. Morshedi is a new member of Wishon Radiological Medical Group practicing as an interventional radiologist.

#### Sean Tower, MD

Dr. Tower is a new member of Wishon Radiological Medical Group practicing as an interventional radiologist

#### **Diagnostic Radiology**

#### Ceayee Mak, MD Dr. Mak is a new member of Wishon Radiological

## Medical Group practicing as a diagnostic radiologist.

#### David Nakamura, MD

Dr. Nakamura is a new member of Wishon Radiological Medical Group practicing as a diagnostic radiologist.

## Roberta Yang, MD

Dr. Yang is a new member of Wishon Radiological Medical Group practicing as a diagnostic radiologist.

## Minesh Patel, MD

Dr. Patel is a new member of Specialty Medical Group practicing as a pediatric gastroenterologist.

#### **Pediatric Emergency Medicine**

#### Aram Shemmassian, MD

Dr. Shemmassian is a new member of Emergency Medicine Physician Partners practicing as a pediatric emergency medicine physician.

#### Pediatric Otolaryngology

#### Victor Duarte, MD

Dr. Duarte is a new member of Specialty Medical Group practicing as a pediatric otolaryngologist.

#### Qiu Zhong, MD

Dr. Zhong is a new member of Specialty Medical Group practicing as a pediatric otolaryngologist.

#### Pediatric Orthopaedic Surgery

#### Jill Friebele, MD

Dr. Friebele is a new member of Specialty Medical Group practicing as a pediatric orthopedic surgeon

#### Joan Hulme, MD

Dr. Hulme is a new member of Specialty Medical Group practicing as a neonatologist.

## Pediatric Dermatology

#### Christine Kilcline, MD

Dr. Kilcline is a pediatric dermatologist in private practice in San Luis Obispo at Coastal Family Dermatology.

## **Pediatric Infectious Disease**

#### Mohammad Mhaissen, MD

Dr. Mhaissen is a new member of Specialty Medical Group practicing as a pediatric infectious disease specialist

#### Pediatric Neurology

#### Muhammad Salim, MD

Dr. Salim is a new member of Specialty Medical Group practicing as a pediatric neurologist.





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