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New guidelines from the American Academy of Allergy, Asthma & Immunology measure success by how well asthma is controlled on a daily basis, instead of the severity of the condition at the initial diagnosis. These guidelines also address medications, environmental triggers and education.



Snack Makers Target Your Children

Those brightly colored, sugary cereals, snacks and candies may not look particularly appealing to you, but that's not the point. You are not the target market: your kids are.

Nutritional marketers are very effective at what they do. Your kids see an advertisement for an enticing snack, and pretty soon they want it, too. It's tough for parents, and CHOC pediatrician Maureen Downes, M.D., the mother of three grown children, sympathizes completely.

"Be the parent and guide your child to healthier choices," Dr. Downes advises. "It's not just the sugar parents have to watch out for. Food manufacturers use food dyes as an attraction, and many people are sensitive to them." Dr. Downes recalls treating a young patient with what appeared to be alarming gastrointestinal symptoms. Fortunately, the problem turned out to be red dye from a popular snack food.

Dr. Downes is also concerned about pretzels, crackers and popcorn. She says the salt in these products actually stimulate appetite, making children want more. So parents must keep an eye on portion size.

"A child's portion is much smaller than that of an adult. One serving should be about the size of your child's first," she says. "Also, don't make your child finish everything on her plate. Teach your child to listen to her body, so she develops a healthy sense of satiety."

For more information about healthy meal planning, Dr. Downes recommends www.mealsmatter.org.



A Healthier Way To Snack

Instead of

- Soda or juice
- Granola or energy bars
- Cookies, chips or candy

Try

- Water with a squirt of fruit juice
- Fruit slices, vegetables or string cheese
- Try 100-calorie portions of your kids' favorite snacks. Serve fruit as dessert.





Breast Is Still Best During Flu Season

If you're thinking about weaning your baby before the end of flu season, think again, advises CHOC nurse practitioner Mary DeNicola, C.L.C. Babies who receive formula have three times the risk of gastroenteritis or ear infections and are twice as likely to get SIDS. They are more likely to have allergies, eczema, diabetes and just about every other childhood disease.

"Mother's milk contains special medicine for which we can't even write a prescription," DeNicola says. "That is why in the CHOC NICU, we insist on human milk for our fragile, premature babies. On any given day, over 90 percent of the NICU babies have breast milk available for feedings."

The CHOC Lactation Center is the only clinic of its kind in Orange County that is staffed with certified nurse practitioners. Workshops and individual appointments are available for mothers needing assistance with breastfeeding, including relactation and induced lactation. For more information, please call (714) 289-4987.

CHOC NICU Needs Donated Breast Milk

It's a "gift of love" for babies whose mothers are unable to breastfeed or to provide enough breast milk. For more information, please contact Lactation Family Nurse Practitioner Mary DeNicola, C.L.C., at (714) 289-4987.

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Asthma Needs An Action Plan

“The name of the game in asthma is prevention, not rescue. It’s about keeping the asthma on an even keel.”

Stanley Galant, M.D.
CHOC Pediatric Allergist

“Asthma is a shifting disease, and each patient should have a written ‘action plan’ outlining the steps to take under various circumstances. Parents need to know how much medicine it takes to achieve control,” says CHOC pediatric allergist Stanley Galant, M.D. “In the action plan, a child experiencing good control would be directed to continue to taking ‘controller’ medication to prevent symptoms and to maintain control. However, at the first sign of trouble, the plan would instruct parents to give their child ‘rescue’ medications. If that did not remedy the situation or if symptoms continued to worsen, the plan would instruct parents to call the doctor.”

Because allergy and asthma go hand-in-hand, the educational program should include steps to minimize exposure to known allergens or irritants, such as dust mites, pet dander or tobacco smoke. Allergy shots may be helpful, too.

WINTER IS ASTHMA SEASON

Kids with asthma have a tougher time during the fall and winter months. Respiratory infections, exercise and cold air may trigger an attack. Kids also spend more time inside, where they are exposed to indoor allergens and irritants. Dr. Galant recommends an annual flu shot for asthmatic children who are not allergic to eggs.

“The outlook for kids with asthma is very good,” Dr. Galant says. “With management, many kids can lead normal lives, and participate in both academic and physical activities.”

WHERE TO FIND HELP

Recognized for excellence and research, CHOC Allergy, Asthma and Immunology physicians offer the latest treatment options with an emphasis on prevention, intervention, education and self-management. To schedule an appointment with a CHOC Allergy/Immunology specialist, please call (714) 633-6363.

CHOC BREATHMOBILE

Fully equipped mobile vans staffed with allergists, nurses and pharmacists providing onsite care. The CHOC Breathmobile makes monthly visits to schools and community centers in underserved areas, providing complete asthma testing, treatment, follow up and education. For more information, please call (714) 532-7571.



Could It Be Asthma?

Call your pediatrician if your child has the following symptoms:

- Recurrent or chronic cough
- Chronic or recurrent wheezing
- Coughing or wheezing with exercise
- Chest tightness or shortness of breath
- Symptoms that dramatically improve with albuterol
- Family history of allergy or asthma, especially mother
- History of allergy, eczema or sneezing

Specialty Care For Asthma/Chronic Lung Disease

Asthma affects babies and young children differently. CHOC and the University of California, Irvine, are collaborating on a program specifically for children. Located on the CHOC campus, the Asthma/Chronic Lung Disease (ACL D) Program offers treatment for all disorders of the lungs and respiratory system, including specialty care for asthma and allergy.

Community asthma education programs are also available. To arrange for a nurse educator to come and speak to the students, parents or staff at your child's school, please call Connie Carcel, RN, Nurse Educator, at (714) 532-7591 or Lisa Lara, RN, Nurse Educator, at (714) 532-7577.



CHOC Takes Intensive Care On The Road

At 9 pounds, Jack Selecky was much bigger than most of the other babies in the Hoag Hospital Neonatal Intensive Care Unit (NICU). But Jack was actually more fragile than many of his tiny roommates. He was critically ill with pulmonary hypertension, pneumonia and septic shock.

Jack's grandfather, Paul Selecky, M.D., medical director of the Hoag Pulmonary Department, knew there was a strong chance that Jack wouldn't survive. The decision was made to transport Jack to CHOC where he could receive a specialized nitric oxide treatment available at only a handful of children's hospitals in the state.

Chris and Jen Selecky, Jack's parents, will never forget the sight of the CHOC Emergency Transport Services Team arriving to save their son's life.

"They appeared like angels from heaven. They were up to speed on every detail of Jack's situation and worked hand-in-hand with the Hoag NICU staff to make sure he was receiving the best care possible," Chris recalls. "It gave us every bit of confidence we were hoping for when faced with such a devastating life-and-death experience."

Once at CHOC, Jack's progress was slow with frequent setbacks, but eventually he was weaned from medications and ventilators. Today, he's a healthy, laughing little boy who shows no lingering traces of his close brush with death.

24-HOUR AIR OR GROUND TRANSPORT

CHOC was the first hospital in the nation to transport neonates and children while providing nitric oxide with high-frequency ventilation, a specialized technology for providing life support. Led by physicians and staffed with pediatric and neonatal intensive care nurses and respiratory care practitioners, the CHOC Emergency Transport Services Team literally brings CHOC intensive care to the patient's bedside. They offer the same level

of life-saving capabilities that are provided inside the walls at CHOC. According to Jason Knight, M.D., medical director of the CHOC Emergency Transport Services Team, early initiation of intensive care in the field increases the likelihood of a favorable outcome. This is the well-known "golden hour" concept.

One of the top three busiest teams in the nation, the CHOC Emergency Transport Services Team has experienced a five-fold increase in volume since 1999. More than 120 facilities refer critically ill or injured babies, children and adolescents to CHOC. A second dedicated transport team was recently added to accommodate the growing numbers of referrals and a third team is soon to come.

Dr. Knight attributes this increase to the growing regionalization of healthcare within Southern California.

"CHOC is highly recognized for excellence," Dr. Knight says. "The level of care CHOC provides is difficult to obtain at smaller hospitals, particularly in outlying areas." While most transports from outside of Orange County typically come from Los Angeles, Riverside or San Bernardino counties, it is not uncommon for the team to retrieve patients from San Diego or Central California, or even Washington or Hawaii.

Closer to home, the availability of these services provide added peace of mind for Orange County families, like the Seleckys. They will never forget the care and compassion of the Hoag and CHOC teams who saved their son's life.

"We will forever be grateful," Chris says. "At well-child check ups with his pediatrician, Jack continuously exceeds every expectation for his age. He is truly our miracle baby boy."

CHOC Leads The Way In Minimally Invasive Surgery

Minimally invasive procedures offer several advantages over conventional surgery. Smaller incisions decrease the risk of bleeding, infection, and other complications. Healing time is usually much faster, allowing patients to go home and resume regular activities much more quickly.

And most importantly, there is less pain and the outcome is the same.

Orange County children have access to leading-edge, minimally invasive surgery, thanks to the ongoing efforts of our medical staff who are bringing these specialized techniques to CHOC. Here's a closer look at two exciting areas in which minimally invasive surgery is rapidly becoming the norm.

CENTER FOR MINIMALLY INVASIVE NEUROSURGERY

Craniosynostosis occurs when the sutures connecting the bones in a baby's skull close prematurely. In time, the brain outgrows the volume of the skull, elevating intracranial pressure. Without treatment, children with this physically disfiguring condition may experience brain injury as well as vision and behavioral problems.

For 40 years, the standard surgery to correct this condition began with an ear-to-ear incision, says CHOC pediatric neurosurgeon William Loudon, M.D. CHOC pediatric neurosurgeons are now accomplishing the same results using an endoscope and two small, one-inch incisions.

REGIONAL TRAINING SITE FOR DEFLUX

Urologists from all over the world are coming here to receive Deflux training from CHOC pediatric urologists Barry Duel, M.D., and David Chamberlin, M.D. Through their efforts, CHOC has become the only training site in the south western United States for this minimally invasive procedure to correct vesicoureteral reflux (VUR).

VUR is a congenital condition in which the connection between the ureter and the bladder malfunctions, allowing urine to flow backwards up to the kidneys. As a result, children with VUR typically experience recurrent urinary tract infections. The Deflux procedure uses an endoscope to repair the valve, eliminating the need for a large incision.

As the only full-time pediatric urologists serving Orange County, Dr. Duel and Dr. Chamberlin perform more than 100 Deflux procedures each year. Additionally, Dr. Duel has brought new robotic and laparoscopic surgical techniques for urology to CHOC.

If minimally invasive surgery is the future, tomorrow has already arrived at CHOC. To learn more about minimally invasive neurosurgery, please contact Dr. Loudon at West Coast Neurological Associates, (714) 289-4151. For more information about the Deflux procedure, please call Dr. Duel or Dr. Chamberlin at Children's Urology, (714) 639-3134.



William Loudon, M.D.



Barry Duel, M.D.



David Chamberlin, M.D.



making a mark

Olivia Llamas, age 7

A Fragile Beginning Strengthened Her Heart

From the moment their daughter Olivia was born, Alejandro and Diane Llamas' lives became an unexpected emotional whirlwind. Olivia's condition was difficult to detect in newborns and impossible to prevent. Her blood vessels had not properly developed in one chamber of her heart. Blood was being pumped into her lungs, but it wasn't being pumped out. She immediately underwent heart surgery at Children's Hospital of Orange County (CHOC) within hours of being born.

Her mother barely got to hold her, but Baby Olivia began fighting a tough battle that she'd soon win.

At eight pounds and one ounce, Olivia was put on an artificial heart and lung machine. Within 12 hours of birth, doctors at CHOC began the delicate heart procedure that would save her life. Doctors slowed her metabolic rate, almost stopping her circulation. Once the surgery was completed, Olivia's chest was kept open to allow for the swelling in the organs to go down enough to be closed.

Dr. Richard Gates of the CHOC Heart Institute said the timing of her life-saving surgery was critical. Had it take place one hour later, it would've jeopardized Olivia's life. He called Olivia a "fighter."

"Olivia is a true miracle child. She brings life and laughter to everyone she meets. We are so blessed to have her in our life," added a very grateful Diane, Alejandro and Olivia's sister Caroline.

Olivia is a healthy, thriving 7-year-old thanks to the experts at CHOC. Proving her strength the first hours of her life, Olivia will conquer even more in the future!

Early Treatment Avoids Hip Surgery Later On

Your pediatrician screened for it at birth, and will keep checking for it during your baby's first year. Developmental dysplasia of the hip (DDH) is a developmental condition that occurs when the femoral head, the ball-shaped end of the thigh bone, does not fit securely within the hip socket.

DDH occurs in one of every 1,000 live births, and in 25 percent of breech births. But the dislocation is not always immediately apparent, and that is why pediatricians screen for it at well-child checkups.

"It's like the tires on your car. If they are not aligned properly, you won't be getting 60,000 miles out of them," says CHOC pediatric orthopaedic specialist François Lalonde, M.D. "Without adequate treatment in childhood, DDH leads to complications in later life. This is especially true for women who may begin experiencing osteoarthritis in their late 30s or early 40s as a result."

SHORT-TERM BRACING IS VERY EFFECTIVE

Depending on the baby's age, an ultrasound or X-ray will be ordered to confirm the diagnosis. Treatment begins with full-time use of a Pavlik harness. Worn for a variable portion of the day, depending on the severity of the condition, this soft harness is very baby-friendly and allows full freedom of movement. It doesn't have to be taken off for diaper changes, either.

After three months, the hip is re-evaluated. If it has stabilized, weaning begins. This process requires the harness to be worn less and less as the hip condition improves. Eventually the harness is only worn at night. Weaning usually lasts for about three to six months, or until the hip socket shape is optimal.

"We know that parents don't want to see their baby in a harness, so we only prescribe it if absolutely necessary. But by age 4 or 5, the hip socket stops developing. After that, if the hip socket remains too steep, surgical correction may be required," Dr. Lalonde says. "The earlier we catch DDH, the more likely that bracing will be all that's needed."

THE CHOC INFANT AND ADOLESCENT HIP PROGRAM

Staffed by Orange County's only pediatric orthopaedic specialists, the CHOC Hip Program is available at both CHOC and CHOC at Mission. Services include evaluation, onsite ultrasound and X-ray, monitoring and treatment. To learn more about the CHOC Infant and Adolescent Hip Disorder Program, please call the CHOC Orthopaedic Institute at (800) 329-2900 or visit www.CHOC.org.

The Pavlik harness has a 95 to 100 percent success rate for most hip disorders, minimizing the need for surgical correction later on. The harness doesn't slow down developmental milestones, either. A baby can crawl, sit and roll while wearing it.

DDH Risk Factors

- First born
- Girls are at six times greater risk
- Family history on the mother's side
- Breech presentation at birth
- Torticollis — bending of the neck to one side

Symptoms to discuss with your pediatrician

- Legs are different lengths
- Uneven skin folds on the thighs or buttocks
- Less mobility or flexibility of one or both hips
- Limping, tow walking or "waddling" in children who have just begun to walk
- Painless limp or uneven walk pattern that persists once child learns to walk
- Clicking sounds in the hip

community education classes

school/children's classes

Programs can be brought to your school or group. To schedule a visit, please call (714) 532-8887.

Buckle Bear/Booster Bear (Grades Pre K–2)

Children will learn the safest way to ride in the vehicle through interaction with Buckle Bear.

Germbusters (Grades Pre K–6)

Kids will become “GERMBUSTERS” when they learn how to protect themselves against germs when someone coughs or sneezes.

Healthy Habits (Grades K–6)

Through this program children will be encouraged to adopt healthy habits. The five basic food groups and the importance of eating balanced meals will be taught using an interactive activity.

Heads Up for Helmet Safety (Grades K–6)

Assembly format for students teaching the importance of wearing a helmet for all wheel-based sporting activities.

Body Image (Girls, Grades 6–12)

This presentation focuses on media's impact on the body image of adolescents.

Media Violence (Grades 6–12)

This presentation focuses on the amount of violence children are exposed to through media.

Media Literacy: Alcohol, Tobacco and Other Drugs (Grades 6–12)

In this interactive class, teens will understand how alcohol and tobacco companies target their specific age group and the hidden messages behind their ads.

safe sitter program

Held at both CHOC in Orange and CHOC at Mission.

Safe Sitter – Now in one day!

A seven-hour, nationally accredited childcare course for children ages 11–13.

adult programs

Programs can be brought to your community group.

Home Safety Presentation

This program educates parents and caregivers about the dangers present in the home and how to prevent unintentional injuries.

Child Passenger Safety Classes

A Certified Child Passenger Safety Technician will cover current California laws regarding restraining children and adults in the car.

Well-Fed

This program will discuss how to make feeding time a positive stress-free experience.

Media Violence: Parents

Learn what the violence portrayed in media is teaching young children and how to help your child distinguish between fantasy and reality.

Three Tragic Seconds:

Drowning Prevention & Sun Safety

Parents learn about the problem of drowning: why it happens, where it happens, and how it happens. We will also cover the importance of being sun smart by using sunscreen and wearing protective clothing.

Active Communication:

How to win cooperation with your child

Learn how to send clear and powerful messages to children, engage them in problem solving and strengthen the parent-child relationship.

Effective Discipline:

How to raise a responsible child

Learn proven non-violent discipline techniques that will teach our children responsibility and acceptable behavior while still showing them that we care about them.

Building Character, Courage, and Self-Esteem in Your Child

Learn how to strengthen your child's self-esteem that will produce more positive behaviors and give them the perseverance to keep trying even when things get tough.

The Magic of Family Meetings:

Teaching problem solving and positive values

Learn how to instill qualities of character in our children that will enable them to make good decisions when events start getting out of hand.

Parenting in the 21st Century:

What's your parenting style and how does it influence your child?

We will explore three types of leadership styles and how to apply the new techniques at home.

Sidestepping the Power Struggle:

Redirecting your child's misbehavior

Develop an understanding of how and why children behave as they do, learn how to apply methods to redirect them towards positive behavior, and avoid power struggles.

What You Need to Know About

Your Child — Ages 1 to 4

Parents will learn the ages and stages of child development and how to enhance your child's learning at each stage.

Discipline and Beyond

Learn non-violent discipline skills that really work, and how you can set rules that your toddler can understand and follow.

Building Better Behavior

Discover how the power of encouragement helps children learn positive behavior at an early age.

CPR for Family and Friends Class

This two-hour training is designed for those who wish to learn when to act and what to do in an emergency. Those who successfully complete the course will be given a participation card, not a CPR credential.

Active Parenting Now! — Six-Week Series (For parents of children 5–12 years of age)

The Active Parenting Program will teach you a consistent model of parenting, enabling you to act with confidence and clarity.

Cooperative Co-Parenting — Six-Week Series

Parents will learn how divorce affects children and how to move beyond the anger and put the needs of their children first.

1, 2, 3, 4 Parents! — Three-Week Series (for parents of children 1–4 years of age)

Through this series parents will learn the value of the child and the job of parenting, methods of bonding and non-violent discipline skills.

Understanding Childhood Asthma

Families will learn how to manage their child's asthma at home and school.

Important Resource Phone Numbers

For emergency medical care call: 911

Cardiac Parent

(714) 532-8521

Cystic Fibrosis Parent

(714) 532-8521

Diabetes Parent and Children

(714) 532-8330

Healing Hearts Bereavement Group

For parents who have lost a newborn or chronically ill child.

(714) 532-8521

HIV Parent

(714) 532-8521

Living Options

A family cancer support group.

(949) 364-1770

Lupus

(714) 532-8521

Oncology Parent

Hosted by OCFOCF.

Spanish speaking also.
(949) 472-2051

Orofacial Guild of Orange County

For parents of children with cleft/craniofacial disorders.

(714) 532-8521

Parent to Parent

For parents of children receiving care in the NICU.

(714) 532-8521

Pediatric Advice Line (PAL)

(714) 289-4500

South County Postpartum

For families having difficulty adjusting after the birth of their baby.

(949) 364-1770

Rheumatology Parent

For parents of children with rheumatic disorders.

(714) 532-8521

Sickle Cell

For individuals affected by sickle cell anemia.

(714) 532-8521

Spina Bifida Parent

For information call Diane Cohen.

(714) 532-8521

Epilepsy Alliance of Orange County

English and Spanish educational support groups.

(714) 557-0202

save the date!

FEBRUARY 8

Cinderella Guild
Valentine Luncheon and Boutique
Location TBD

FEBRUARY 17

CHOC Honda Night
Honda Center

MARCH 13, 14 AND 15

CHOC Follies
Chapman University

MARCH 19

The Forever Gift: Endowments
CHOC North Board Room
Noon – 1 p.m.
Includes tour of the new 6th floor
PICU/CVICU.

MARCH 28

Credit Union for Kids Wine Auction
Balboa Bay Club

APRIL 5

Littlest Angel Guild
Pursenally Yours Luncheon
Nixon Library, Yorba Linda

APRIL 12

Jack & Jill Guild
Spring Fling
Location TBD

APRIL 12

Queen of Hearts and Tres Osos
Guilds
Casino Night
El Niguel Country Club

APRIL 26

Tinkerbell Guild
Spring Gala
Laguna Cliffs Marriott Resort

MAY 3

Small World Guild
Dinner/Dance
Crean Estate, Newport Beach

MAY 7

Philanthropy
through Real Estate:
How to Transfer
Real Estate into a
Charitable Remainder Trust
Noon – 1 p.m.
CHOC North Board Room

MAY 10

Glass Slipper Guild
Annual Gala
Balboa Bay Club

MAY 16

Mad Hatter Guild
Annual Wine Tasting Event
Location TBD



ALL PROCEEDS WILL BENEFIT CHOC!

CHOC FAMILY NIGHT AT HONDA CENTER FEBRUARY 17, 2008



Watch the Ducks take on the Calgary
Flames at 5 p.m., February 17, at CHOC
Family Night at the Honda Center.

TERRACE LEVEL TICKETS JUST \$35!
CALL 714.940.2855 BY JANUARY 25TH
TO ORDER. SEATING IS LIMITED.

*Special reserved seating at a discount price is available
for CHOC Associates, supporters, family and friends.*



CHOC Follies XI WAITING FOR CHOCMAN

A Musical Mockumentary

Thursday, March 13 &

Friday, March 14 at 8:00pm

Saturday, March 15 at 2:00pm & 8:00pm

*Chapman University Memorial Auditorium
One University Drive, Orange*

714.532.8690 • choc.org

Music Therapy Comes to CHOC

The halls of CHOC soon will be filled with the sound of music, thanks to a \$1 million endowment from the Music for a Cure Foundation, a non-profit organization co-founded by Sugar Ray bassist Murphy Karges, and a generous gift from Gwen Stefani. The combined funds will be used to implement the program at CHOC and hire a part-time music therapist at CHOC, who will provide music therapy services to referred patients and families in conjunction with the CHOC Child Life Department.

Music therapy is proven to have a profound and positive impact on patients, promoting wellness, managing stress and anxiety, and alleviating pain and discomfort. During and after music sessions, children are less agitated and anxious, more responsive to supportive psychosocial interventions, and more relaxed during medical procedures and treatments.

According to Emily Grankowski, special projects coordinator in the CHOC Child Life Department, "Music has long been recognized for its therapeutic capabilities. With the advent of music therapy as an accredited healthcare profession, we can now offer this therapy to our patients as part of their care plan. We are excited to start this new program, and grateful to Music for a Cure, Murphy Karges and Sugar Ray, and Gwen Stefani for their generous support."

Music for a Cure is a non-profit organization whose goal is to bring the curative properties of music to children who need it most. It was founded in memory of teen Ryan Michael Bates, who lost his battle against cancer in December of 2001.

Ask our experts

Should I be concerned when my child complains of back pain?

A. Yes. Back pain in children is a concern because it usually indicates something is organically wrong: infection, tumors, inflammation or trauma.

Contact your physician if your child's back pain:

- Lasts longer than six weeks
- Causes your child to give up an enjoyable activity
- Keeps your child awake at night

Back pain in younger children and adolescents is increasing in this country. This trend is attributed to increased level of athletic participation, poor posture while sitting, and more sedentary activities, such as computers or video games. Long periods of sitting put excessive strain on the lower back, causing it to ache.

Heavy backpacks may also cause low back pain. Children should not carry more than 10 to 15 percent of their body weight. If your child weighs 100 pounds, the backpack should not exceed 15 pounds. If it does, switch to a rolling model.

If your child experiences back pain along with chills, fever, lethargy, weight loss or urinary incontinence, contact your physician immediately—don't wait.



AFSHIN AMINIAN, M.D.
MEDICAL DIRECTOR
THE CHOC ORTHOPAEDIC
INSTITUTE



Want to receive your subscription to *Kids Health* Newsletter?

KIDS HEALTH NEWSLETTER PROVIDES HEALTH AND WELLNESS INFORMATION ABOUT YOUR GROWING CHILD FROM THE EXPERTS AT CHILDREN'S HOSPITAL OF ORANGE COUNTY AND CHOC AT MISSION. TO HELP US BETTER SERVE YOUR FAMILY, PLEASE TAKE A MOMENT TO COMPLETE THE FOLLOWING:

- Yes, I would like to continue receiving *Kids Health*. (You only need to return this form once to stay on our subscription list.)
- Please correct my name/address. (Make corrections directly on label and return.)
- I am moving, effective _____ and would like to continue receiving this publication. Please send to the address written below.
- Please send a subscription for *Kids Health* to my friend. (Fill out name and address below.)

HOW DID YOU RECEIVE THIS NEWSLETTER? _____

BIRTH MONTH/YEAR OF YOUR CHILD(REN): _____

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

EMAIL ADDRESS _____

DO YOU WORK WITH CHILDREN AND FAMILIES?

IF YOU ARE A TEACHER, COUNSELOR, SCOUT LEADER, ETC. AND WOULD LIKE TO HAND OUT *KIDS HEALTH*, WE WOULD BE HAPPY TO SEND YOU A BULK SUBSCRIPTION EACH QUARTER:

NAME _____

ORGANIZATION _____

ADDRESS _____

CITY _____ ZIP _____

DAYTIME PHONE _____

QUANTITY NEEDED: _____



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