Autism or Epilepsy? Right Diagnosis, Treatment Make All the Difference for First-Grader
BY LESLIE A. WHITLINGER

Leandros Liburd is Rowan’s big brother, but barely. The fraternal twins were born two minutes apart in 2008, marking the successful culmination of months of high-risk pregnancy care for their mother, Elizabeth, at MedStar Georgetown University Hospital. But instead of the births being the end of the relationship between family and hospital, they were merely the beginning.

continued on page nine

Where Anything is Possible—A Unique Journey Leads to MedStar Georgetown Pediatric Oncology
BY HEIDI ROSVOLD-BRENHOLTZ

“At the age of four, I joined an exclusive group of people in the world, [those] who develop acute lymphoblastic leukemia—a type of blood cancer. This was not a distinction I had hoped for, but the illness changed my life, taking me on a unique journey.” ~Ishan Coutinho

A Celebration Cut Short by Cancer’s Return
Ishan’s initial cancer treatment in India was a success: at age seven, he was three years into remission. To celebrate, his family planned a U.S. tour including a visit to the Smithsonian National Air and Space Museum.

While in D.C., Ishan developed a severe headache and vomiting. Aziza Shad, MD, Chief of Pediatric Hematology/Oncology and Director of the Leukemia Lymphoma Program, met the family in Medstar Georgetown’s Emergency Department. Ishan’s leukemia had

continued on page ten

IN THIS ISSUE

2 When Medicine Meets Compassion: Whole Child Care
3 Two Domino Liver Transplants; Four Lives Transformed
4 New Procedure May Prevent Peanut Allergies: What You Need to Know
6 New Aerodigestive Clinic: Comprehensive Care and Messy Smiles
Message From the Chairman
When Medicine Meets Compassion: Whole Child Care

Dear Friends,

At the MedStar Georgetown Pediatrics Department, our primary goal in treatment and care is returning every child to a normal, healthy and happy life. Whether patients come to us requiring short-term treatment or an extended stay, we strive to provide each child and family with a level of care that goes beyond their medical needs.

As part of *cura personalis*, or care for the whole person, each patient’s treatment requires not only care for the body, but care for the mind as well. When children require a stay at the hospital, they are away from friends, family and the comforts of home. Our staff of pediatric doctors, nurses and other medical personnel help keep their lives as normal as possible.

The amazing story of Ishan Coutinho shows our associates’ dedication to helping a child remain in good spirits while in treatment (see story on page one). Ishan’s daily interactions with his medical team helped him maintain the strength and determination to fight for his health. When he returned for a celebratory visit to our hospital this year, it was clear that Aziza Shad, MD, Chief of Pediatric Hematology/Oncology, and her team had made an extraordinary difference in his life and health.

Beyond the skilled hands of our doctors and surgeons and the colorful walls of our hospital rooms are our dedication to our patients and our continuous effort to create a place where kids can be kids while receiving world-class treatment.

The stories in this issue of *MedStar Georgetown Pediatrics* serve as a testament to our commitment here. Our clinicians’ expertise is matched by their compassion and drive to care for the whole child and restore them and their families to health.

Warmest regards,

David B. Nelson, MD, MSc
Chairman, Department of Pediatrics,
MedStar Georgetown University Hospital

Visit MedStarGeorgetown.org/Find-a-Doc to find a MedStar Georgetown pediatrician or call 855-546-0973.

Pediatric services offered at our convenient Tenleytown location:
- Adolescent Medicine
- Aerodigestive/Feeding Clinic
- Apnea/Neonatal Clinic
- Cardiology
- Dermatology
- Developmental Evaluation Clinic
- Endocrinology, Diabetes and Metabolism
- Gastroenterology and Nutrition
- Genetics
- Infectious Disease
- Nephrology
- Neurogenetics Clinic
- Neurology
- Otolaryngology
- Oral Health Services
- Pediatric International Travel
- Primary Care
- Psychology
- Pulmonary Medicine
- Sleep Disorders Clinic

4200 Wisconsin Ave., NW, 4th Floor
Washington, DC 20016

For pediatric appointments call 855-546-0973.
Two Domino Liver Transplants; Four Lives Transformed

BY MARIANNE WORLEY AND EMILY TURK

A medical milestone sits at the intersection of six lives—and the first-ever successful double domino liver transplants that gave four people a healthier future.

When cadaver livers became available for transplantation in two children with a rare genetic disorder called maple syrup urine disease (MSUD), the young recipients offered their livers to two local adults in critical need.

The pieces of this remarkable medical puzzle fell into place at the MedStar Georgetown Transplant Institute, where 6-year-old Korey Scott and 14-year-old Quadejah Harris turned their new beginnings into life-saving gifts for Jeremy Dick, 49, and Isobel Short, 55.

“While the children’s livers were toxic for them, they can function well in another person who doesn’t have maple syrup urine disease,” explains Thomas Fishbein, MD, the Transplant Institute’s executive director.

In people with the disorder, the body can’t break down certain proteins or amino acids made by the muscles, brain and liver. Those proteins build up in the blood and can cause seizures, brain damage and death. The only cure is a new liver.

“‘I was nervous to meet him at first,’ said Quadejah. ‘But we talked for about 20 minutes and it was amazing. I’m just so happy that I could help someone who was so sick.’”

Successfuly completing two domino liver transplants in the same day would take a team of more than 100 people—and it had never before been done anywhere in the world.

In late January, the four patients gathered at the hospital and the transplant team began a 12-hour, tightly choreographed series of operations. Korey and Quadejah received livers from deceased donors. Quadejah’s liver was transplanted into Jeremy, and Korey gave the gift of his liver to Isobel. Like a domino chain reaction, the transplants were complete.

Less than two weeks after his transplant, feeling better and his color returning to normal, Jeremy and Quadejah got the chance to meet each other.

“I was nervous to meet him at first,” said Quadejah. “But we talked for about 20 minutes and it was amazing. I’m just so happy that I could help someone who was so sick.”

“Meeting Quadejah gave me the chance to thank her for her sacrifice,” says Jeremy. “I appreciate hearing about what she’s looking forward to in her life, and knowing that she, too, was grateful for the donation she received.”

For Korey’s mom, Andrea, the experience was filled with emotion. “I cried when I learned that Korey’s liver was working in someone else,” she says.

“This beautiful little boy has saved not only my life, he has brightened the lives of everyone in my family,” says Isobel.

“Right now, we can only use livers from children with these disorders,” Dr. Fishbein says. “But I believe this is just the beginning. There will be other conditions that we will identify, and we’ll be able to reutilize those livers, as well.”

Visit MedStarGeorgetown.org/Pediatrics for more information about pediatric care. To make an appointment with a specialist, call 855-546-0973.
New Procedure May Prevent Peanut Allergies: What You Need to Know

By Tamara Katy, MD, FAAP, MedStar Georgetown Emergency Department Pediatrician

The number of children with peanut allergies is rising rapidly. A 2010 study noted that the rate of peanut allergies in children had more than tripled between 1997 and 2008. According to the American College of Allergy, Asthma and Immunology, an estimated 400,000 school-aged children in the United States are affected.

As a result, many schools have declared their campuses “nut-free,” banning nut products to avoid causing what can be a life-threatening reaction in some children.

Serious Health Risk
To those allergic, peanuts can pose a serious health risk. The most severe reaction can cause anaphylaxis, a sudden and potentially deadly condition that impairs breathing and requires immediate treatment. Although eating peanuts is the most common way to trigger an allergic reaction, in some cases inhaling peanut powder or dust, or even coming in contact with peanut oil, can cause a reaction.

Allergy Prevention?
Hope may be on the way for parents of some children, however. Results from a study, Learning Early About Peanut Allergy (LEAP), published in the *New England Journal of Medicine* in 2015, showed the early introduction of dietary peanuts may prevent peanut allergy among children at high risk.

The study showed that feeding a small amount of peanut products regularly to children between 4 months and 11 months of age reduced their risk of developing the peanut allergy by 80 percent.

My colleagues in pediatric allergy and immunology are understandably excited about this news.

“This is the first large, prospective study on a possible therapy to prevent the onset of peanut allergy in high-risk infants,” says Sally Joo Bailey, MD, MedStar Georgetown Assistant Professor of Pediatrics, Division of Allergy and Immunology. “Until now, there were only observational studies suggesting that this may work.”

While the news excites those of us in the medical field, we still advise a cautious approach for parents.

“Parents of young children with a known sensitivity should consult with an allergist, pediatrician or general practitioner prior to beginning therapy with peanut products,” cautions Talal M. Nsouli, MD, Clinical Professor of Pediatrics and Allergy and Immunology at the Georgetown University School of Medicine.

Peanut allergies can be very severe. Knowing the signs of an allergic reaction can make all the difference in an emergency.
“I advise parents not to introduce peanuts into the diet before having children properly tested for food allergies,” he says.

Tips for Parents

1) Know the signs and symptoms of food allergies.

The most common reactions occur within several minutes and up to two hours after eating.

Symptoms of Food Allergies
- Hives
- Vomiting
- Diarrhea
- Red lips
- Itchy skin
- Swelling of the lips, tongue or mouth

Symptoms of Severe Anaphylaxis
- Wheezing
- Difficulty breathing or swallowing
- Drop in blood pressure

If your child has any of these symptoms, call your doctor or go to the ED for evaluation. If the reaction is mild, your doctor may advise you to treat symptoms with an antihistamine.

Some children may have anaphylactic or severe reactions, which can be fatal. If you suspect a severe reaction, treat with injectable epinephrine (EpiPen) if available, then call 911.

2) Identify the food trigger.

Have your child’s physician diagnose possible food allergies by examining a complete family history, allergy skin testing and blood work. Your child’s physician will devise a treatment plan, including avoiding the food or similar foods that cause the allergy and other first-line treatments, such as an antihistamine, to relieve symptoms.

3) Be prepared and don’t wait.

Children with a peanut or other food allergy should always have an epinephrine injector, such as an EpiPen or AUVI-Q, accessible anywhere they go. Encourage learning proper and safe use with practice kits. Autoinjectors administer life-saving medicine in the event of a severe allergic or anaphylactic reaction and should be used without delay.

Provide your child’s school nurse or teacher with an autoinjector and clear written instructions for proper use (a “Food Allergy Action Plan”) signed by your doctor. Consider having your child wear a MedicAlert bracelet listing any food allergies.

Living with peanut and other food allergies requires patience and attention. However, with proper education and planning, children with food allergies can enjoy a safe and satisfying diet.

Visit MedStarGeorgetown.org/Find-a-Doc to find a pediatric allergist or call 855-546-0973 to make an appointment.
New Aerodigestive Clinic: Comprehensive Care and Messy Smiles
By HEIDI ROSVOLD-BRENHOLTZ

On the night Suzanne McMurtry was born, her parents, Julie and Matthew, finally learned why their beautiful 4-pound, 4-ounce full-term baby hadn’t grown normally in utero.

Routine procedures to clear the newborn’s airway met resistance, and baby Suzanne was coughing up a lot of fluid, recalls Julie. An X-ray confirmed that her esophagus was blocked.

Suzanne was born with esophageal atresia/tracheoesophageal fistula (EA/TEF), a life-threatening condition that develops before birth and becomes evident soon after delivery. It affects approximately 1 in 3,000 to 5,000 babies. A baby born with EA/TEF is unable to swallow, spits up fluids that are blocked from entering the stomach and may also have trouble breathing. Surgery soon after birth is required to correct these abnormalities.

According to Yuliya Rekhtman, MD, MedStar Georgetown pediatric gastroenterologist and Director of the Aerodigestive Clinic, EA/TEF is two abnormalities, “Esophageal atresia (EA) is a birth defect where the upper esophagus doesn’t connect to the lower esophagus and stomach, she says. “Tracheoesophageal fistula (TEF) is when the esophagus and the trachea don’t connect normally, causing fluids from the esophagus to enter the airway and compromise breathing.” Nearly 90 percent of babies born with EA also have TEF.

Alfred A. Chahine, MD, a pediatric surgeon at Medstar Georgetown, met with Suzanne’s parents in the the Neonatal Intensive Care Unit (NICU) just after her birth to discuss her surgery. “He did a phenomenal job of explaining everything to us in a comforting way,” explains Julie.

Following surgery, when Suzanne was eating appropriately for her size, she was discharged in just 15 days, much sooner than expected. Typically, intensive follow-up care is necessary for babies and children with EA/TEF.

On her first birthday, Suzanne McMurtry made her first visit to Medstar Georgetown’s new Aerodigestive Clinic with her mom, Julie, to have a raspy cough evaluated and discern why the active toddler’s intake of solid food had stalled.

Suzanne is now 15 months old. She has gained weight since her last clinic appointment and has made progress meeting other developmental milestones. She is eating age-appropriate food, “very messily,” says her mother happily, and soon will no longer need regular clinic visits.

“We met with eight different specialists in one place,” shares Julie. “We stayed put and they cycled through the exam room to evaluate Suzanne.” It was golden, according to Julie, because as they examined her, all the specialists worked to decrease Suzanne’s anxiety—not always easy for a 1-year-old.

Following Suzanne’s evaluation in the Aerodigestive Clinic, several diagnostic procedures were coordinated to minimize her time under anesthesia. Doctors evaluated Suzanne’s throat, trachea and esophagus and recommended new strategies for her parents to try at home. After her parents implemented the recommendations, Suzanne started to feel better and became more adventurous with her food choices.

Dr. Chahine did a phenomenal job of explaining everything to us in a comforting way.

Julie McMurtry

Aerodigestive refers to the organs and tissues of the respiratory tract and upper part of the digestive pathways.

The team that cared for Suzanne, now 15 months old, at the pediatric Aerodigestive Clinic at MedStar Georgetown made hospital visits easy for the toddler.

Photo courtesy of Julie McMurtry

continued on page eleven
A Remarkable Young Man's Legacy Brings Hope to MedStar Georgetown  

by Katherine Potosky

“Your child has cancer.”

When those words are spoken, the diagnosis affects the child and the entire family, as Tina and Jefferi Lee learned when their youngest son, Brandon Carrington Lee, was diagnosed with a rare form of bone cancer, known as osteosarcoma, at age 12.

After seeing several other physicians, the Lees brought Brandon to MedStar Georgetown University Hospital, where they met Aziza Shad, MD, Chief of Pediatric Hematology/Oncology, whose family-centered approach aligned with their own priorities and values.

Brandon, his parents and his older brother Jefferi, II, drew strength from their Christian faith and love for one another to face the challenges before them. Throughout Brandon’s two-year battle with cancer, his family was constantly by his side, integrating hospital visits, family vacations and Bible study so that Brandon could continue to live his life to the fullest just as he always had prior to his diagnosis.

On November 23, 2003, Brandon lost his valiant fight, succumbing to his illness at the age of 14. His parents took comfort in the knowledge that Brandon had lived the life God promised him, never questioning its length, always focusing on its quality and sanctity, and accomplishing more in his 14 years than many others do in twice that length of time.

To honor the life, accomplishments and ambitions of this extraordinary young man, the Lees established a foundation in his name. The Brandon Carrington Lee Foundation supports cancer research, provides academic scholarships and funds the annual Brandon Carrington Lee Pediatric Palliative Care Grand Rounds Lectureship at MedStar Georgetown.

The inaugural lecture was held at the hospital on September 5, 2014, and was delivered by distinguished guest speaker Dr. Chris Feudtner to a packed auditorium of physicians, residents, medical students, nurses and other healthcare professionals. A renowned pediatrician, epidemiologist, historian and ethicist at The Children’s Hospital of Philadelphia and the University of Pennsylvania, Dr. Feudtner has devoted his career to improving the lives of families managing complex chronic conditions.

In November 2014, the Brandon Carrington Lee Foundation partnered once more with MedStar Georgetown to present The Feeling Friends, a family-oriented musical performance program aimed at strengthening the emotional literacy and health of children and families through music, dance and rhyme.

continued on page eleven
Pediatrics Gala Celebrates ‘Hope for Henry’ Founders
By Katherine Potosky

Henry Strongin Goldberg was known for his bright smile, positive attitude and limitless courage. The organization named in his honor, Hope for Henry, aims to bring smiles, laughter and joy to children with cancer and other serious illnesses.

On April 18, the sixteenth annual MedStar Georgetown Pediatrics Gala was held at the Andrew W. Mellon Auditorium in Washington, D.C. This black-tie event included a cocktail reception, dinner and a silent and live auction. The highlight of the evening was the presentation of the Flame of Hope Award to Laurie Strongin and Allen Goldberg, the founders of Hope for Henry. The nonprofit was founded in 2003 in honor of the couple’s son, Henry Strongin Goldberg.

So far, the foundation has served more than 13,000 children in the Washington, D.C., metropolitan area and beyond, providing gifts and entertaining events such as Halloween parties and bedside birthday parties. The foundation also helps to provide funding for child life specialists in D.C. area hospitals, who can help children focus on being kids while they are hospitalized.

This year, His Excellency Adel bin Ahmed Al-Jubeir, Ambassador of the Kingdom of Saudi Arabia to the United States, once again served as Honorary Host of the gala. Sponsorships and donations received included $150,000 from His Excellency and Mrs. Saad Rafic Hariri, and $100,000 each from Lockheed Martin and Raytheon Company. Items up for bid included sparkling jewelry, a Holland America cruise, vacation home getaways, items for kids and even tickets to a special evening with Tony Bennett and Lady Gaga at the Kennedy Center in August.

Proceeds from the event will support early career researchers in pediatrics. Additionally, the 2015 Gala proceeds will be used for clinical, teaching and community pediatric programs that support children and families served at MedStar Georgetown’s Department of Pediatrics.

“The Department and Board of MedStar Georgetown Pediatrics are truly grateful,” says David Nelson, MD, Chair of Pediatrics at MedStar Georgetown. “The outpouring of support and generosity shown by individuals, foundations and members of the community means so much.”

To support the MedStar Georgetown Pediatrics Department, contact Katherine Potosky, Senior Philanthropy Officer, at 202-444-0943 or by email at Katherine.R.Potosky@gunet.georgetown.edu.
Six weeks premature, the boys spent time in MedStar Georgetown’s highly rated Neonatal Intensive Care Unit (NICU) before going home with Elizabeth and their father, Lester. Despite mild developmental delays, the brothers steadily improved over the next year with therapy and achieved childhood milestones.

Then Leandros—the first to crawl, stand, start to walk and talk—just seemed stuck.

“Rowan was continuing to learn new things and move forward but all of a sudden, Leandros wasn’t,” Elizabeth says. “Then he started to go backward, not responding to his name or maintaining eye contact anymore.”

The formerly happy little boy also started throwing terrible temper tantrums, complete with kicking, arching his back and angry cries. Leandros’ physicians suspected autism spectrum disorder or even a severe intellectual disability; Elizabeth’s maternal instinct said otherwise.

Then, one day, MedStar Georgetown occupational therapist Mary-Kay Davidson-Taylor, MS, OTR/L, noticed Leandros’ shoulders briefly jerked during a session. Undetected seizures were to blame for Leandros’ delays.

“Seizures can be very subtle, non-convulsive and occur during sleep,” explains MedStar Georgetown’s Cesar C. Santos, MD, professor and Chief of Pediatric Neurology and a specialist in epilepsy. “When that happens to young children, it can lead to learning disabilities and problems including aggression and hyperactivity. And while it’s fairly rare, epilepsy can also affect speech. As a result, children with undetected seizures may be misdiagnosed as having autism instead, or they may have both conditions simultaneously.”

After first performing a brain MRI to rule out any structural abnormalities, Dr. Santos admitted Leandros to the hospital’s six-bed, all-private-room Epilepsy Monitoring Unit (EMU), part of the MedStar Georgetown Comprehensive Epilepsy Center. The center is the first in Washington, D.C., to achieve the highest designation, Level Four, from the National Association of Epilepsy Centers.

At the EMU, patients are hooked up to the latest digital video-EEG monitoring equipment to track brain activity continuously over an extended period of time, often 24 to 48 hours. Family members can spend the night to support their loved ones.

EEG results give specialists the most complete and thorough picture of what is happening. If seizures are detected, the EEG information also helps physicians identify their type for the most accurate diagnosis and best treatment.

Leandros’ study was eye-opening. While sleeping, he had abnormal electrical activity in the section of the left brain that controls speech. Dr. Santos diagnosed epilepsy with partial seizures and immediately put him on an anticonvulsant medication.

Within a couple of weeks, Leandros started talking.

“The change was amazing, just phenomenal,” says Elizabeth. “Every day, Leandros surprised us by saying something new. Soon he was speaking in complete sentences.”

Leandros, now in first grade, is living the life of most 6-year-old boys—riding his bike, reading and enjoying school. Since about 70 percent of children with epilepsy eventually outgrow the condition, Leandros will undergo another EEG sleep study in two years to see if he can stop medication.

“MedStar Georgetown has changed the future for Leandros and our whole family,” concludes Elizabeth. “They’ve just been wonderful, every step of the way.”

Dr. Santos is delighted by Leandros’ results as well. “It’s so rewarding to see a child’s sudden progression after getting the right treatment. I personally believe that every child diagnosed with autism should have an overnight EEG to see if seizures are present.”

To schedule an appointment with a pediatric neurologist, visit MedStarGeorgetown.org/Find-a-Doc or call 855-546-0973.
Where Anything is Possible  continued from page one

returned, this time attacking his central nervous system. Returning home to New Delhi would have to wait.

According to Dr. Shad, the overall survival rate for childhood leukemia is more than 80 percent; however, when a child relapses soon after treatment, as did Ishan, the prognosis is worse, especially when cancer recurs or reappears in the central nervous system and bone marrow together.

Another fact about Ishan’s case alarmed Dr. Shad. “Historically, we know some leukemias are more aggressive in low- and middle-income countries such as India and Pakistan. We aren’t completely sure why. There may be a biological difference in the disease,” explains Dr. Shad. Ishan needed aggressive therapy.

A New Home and a “Second Family”

For the next six weeks, the MedStar Georgetown Pediatric Oncology Unit became Ishan’s home, and the team—Dr. Shad, as Ishan’s primary oncologist, and Dr. Amal Abu-Ghosh, Dr. Corina Gonzalez, nursing staff, therapists and volunteers—would become Ishan’s “second family.”

“The MedStar Georgetown Pediatric Oncology Unit is a place that celebrates children,” says Lester Coutinho, Ishan’s father. “When Ishan felt it was the end of the world, Georgetown’s staff would make the difference for him. What held us together at a very challenging time was a very caring team.”

Ishan met the challenge head-on, meditating to talk to his body’s cells and help them overcome the cancer. He kept his mind busy and played a “Question of the Day” game with his physicians, posting questions on a whiteboard in his room. “I was far away from home and they made me feel very comfortable and they took good care of me;” he said.

“Ishan is wise beyond his years and truly understood the importance of a positive attitude,” recalls Dr. Shad. “He was focused at all times on the future.”

When Ishan’s condition was stable, his journey continued to Palo Alto, Ca., where his father had accepted a job. Ishan continued treatment at The Lucille Packard Children’s Hospital in Stanford, Ca.

When Ishan’s cancer returned yet again, physicians recommended a bone marrow transplant. A coincidence reconnected Ishan to his “second family.” Even though Ishan was in California, his bone marrow match was found at MedStar Georgetown.

A Surprise for a Cherished Patient

Ishan’s journey came full circle in mid-April, when his family returned to Washington, D.C., to finish the trip interrupted years before. A priority for Ishan was thanking his treatment team at Medstar Georgetown.

Ishan arrived to find a surprise party in his honor, including his favorite cupcakes served by Dr. Shad and the team.

“Our team works hard to put together a different kind of family-centered care that involves caring for all the patient’s and family’s needs. You don’t cut the cord once the patient is gone,” explains Dr. Shad.

“Almost any hospital center can provide the medical piece. What we provide, in addition, is strong psychosocial support to keep families intact through treatment and beyond. I was privileged to be part of Ishan’s care. I have learned so much from this remarkable young man,” says Dr. Shad.

Visit MedStarGeorgetown.org/Pediatrics for more information about pediatric oncology. To make an appointment with a specialist, call 855-546-0973.

Ishan and his family will always be thankful for MedStar Georgetown and the pediatric oncology team that played such an important role in his recovery.

Photo courtesy of Ishita Coutinho
New Aerodigestive Clinic continued from page six

A Team Approach to Care
Patients with aerodigestive disorders often are graduates of the NICU or the Medstar Georgetown intestinal transplant program.

Dr. Rekhtman and her colleagues were inspired to create the clinic because they recognized a formula for success for their patients. “We wanted to design an outpatient clinic where specialists evaluate patients on-site, discuss their progress and needs as a team, and follow them through ongoing therapy with their individual specialists,” she says.

The clinic’s goal is to schedule evaluations approximately six months to a year after patients leave the NICU. The clinic’s team includes:
- A gastroenterologist
- A pulmonologist
- An ear, nose and throat specialist
- A neonatologist who also serves as a developmental pediatrician
- A speech therapist
- A nurse coordinator

The clinic opened in November 2014 and currently runs once a month. With additional resources and more referrals from community pediatricians, Dr. Rekhtman hopes the clinic will grow to serve more patients with conditions such as difficulty swallowing, feeding aversions and issues associated with acid reflux.

For more information about the pediatric Aerodigestive Clinic, or to make an appointment with a specialist, visit MedStarGeorgetown.org/Pediatrics or call 855-546-0973.

A Remarkable Young Man’s Legacy Brings Hope continued from page seven

The Feeling Friends program was developed by Karen Cuthrell, a friend of the Lee family, as a means of helping her own daughter cope with the emotional challenges of a serious illness over 20 years ago.

The program holds a special place in the hearts of the Lee family, having helped them to communicate their feelings openly with one another as they experienced Brandon’s illness. By bringing The Feeling Friends to MedStar Georgetown, the Lees hope to share this healing resource with other families.

To support the MedStar Georgetown Pediatrics Department, contact Katherine Potosky, Senior Philanthropy Officer, at 202-444-0943 or by email at Katherine.R.Potosky@gunet.georgetown.edu.

Karen Cuthrell, performing as “Miss KK,” and The Feeling Friends, presented by MedStar Georgetown and the Brandon Carrington Lee Foundation. Photo by Dustin Lilley
Medical Care When You Need It, Where You Need It.

MedStar PromptCare, an urgent care center, provides medical care for both adults and children for injuries and illnesses that are not life-threatening, physicals for school, sports and camp, concussion evaluations and flu shots, as well as laboratory and X-ray services.

Our 10 locations allow for convenient care, without the wait.

**Washington Metro Region**
- Adams Morgan
  - 1805 Columbia Rd., NW
  - Phone: 202-797-4960
- Alexandria
  - 3610D King St.
  - Phone: 703-845-2815
- Capitol Hill
  - 228 7th St., SE
  - Phone: 202-698-0795
- Gaithersburg
  - 12111 Darnestown Rd.
  - Phone: 301-926-3020
- Wheaton
  - 11915 Georgia Ave.
  - Phone: 301-942-4505

**Central Maryland Region**
- Belcamp
  - 1321 Riverside Pkwy.
  - Phone: 410-297-2380
- Federal Hill
  - 1420 Key Hwy.
  - Phone: 410-230-7800
- Perry Hall
  - 8605 Ridgely’s Choice Dr.
  - Phone: 410-248-2310
- Pikesville
  - 1419 Reisterstown Rd.
  - Phone: 410-415-2100
- Towson
  - 6317 York Rd.
  - Phone: 443-777-6890

Visit us on MedStarGeorgetown.org/Pediatrics