



Here, it's different.

2021 YEAR IN REVIEW

Trauma and Burn Centers

At Children's Hospital Colorado



Children's Hospital Colorado

Table of Contents

- Welcome **2**
- Pediatric Trauma Centers **3**
- Emergency Medical Services **7**
- Pediatric Emergency Medicine **9**
- Pediatric Surgery **11**
- Orthopedic Surgery **12**
- Neurosurgery **13**
- Otolaryngology **13**
- Critical Care Medicine **14**
- Child Advocacy and Protection Team **14**
- Rehabilitation Medicine **15**
- Outreach and Education **16**
- Meeting the Community's Needs **18**
- Regional Pediatric Burn Center **19**
- Burn Camps Program **21**
- Philanthropic Support **23**
- Community Events **26**
- Youth Fire Setters Program **26**
- Publications and Research **29**

From the Desks of Our Trauma Medical Directors

Dear colleagues,

Our Trauma and Burn Centers 2021 Year in Review highlights some of the extraordinary work carried out every day by our prehospital partners, physicians, nurses, therapists and staff. We combine outstanding care, cutting-edge science, education and advocacy to provide optimal outcomes for our patients and yours. Whether you need a quick phone consult or an immediate referral for a pediatric patient, we're here to help. Our in-house pediatric surgeon is available for phone consultation at any time, day or night, through OneCall at 720-777-3999. You can reach me or any of the other physicians or services highlighted in this report by calling the Trauma and Burn Center at 720-777-6282 between 7 a.m. and 5 p.m., Monday through Friday.

Find more information at childrenscolorado.org/trauma and childrenscolorado.org/burn. Your questions, comments and suggestions are always welcome.



Steven L. Moulton, MD

Director, Trauma and Burn Services

Children's Hospital Colorado, B-323
13123 E 16th Avenue
Aurora, CO 80045
720-777-3625

steven.moulton@childrenscolorado.org

For injured children, seconds matter and miles equal minutes. That is why the opening of the new Children's Hospital in Colorado Springs was such an extraordinary milestone for pediatric trauma care in our state. By building a state-of-the-art facility and staffing it with pediatric specialty trained providers, Children's Colorado has dramatically extended its reach to care for injured children in need.

The Colorado Springs hospital anchors a trauma program capable of providing comprehensive pediatric trauma care in Southern Colorado and New Mexico. The care we provide consistently exceeds national outcome measures and covers the full spectrum of medical specialties, including general and trauma surgery, anesthesia, critical care, emergency medicine, orthopedics, neurosurgery, otolaryngology, radiology, and rehabilitative medicine.

We are here to help care for any injured child or adolescent on a 24/7,

365 basis. All of the resources of Children's Hospital Colorado – Colorado Springs can be at your disposal and immediately available through our OneCall triage and referral lines at 719-305-3999.



John F. Bealer, MD

Trauma Medical Director

Children's Hospital Colorado – Colorado Springs

john.bealer@childrenscolorado.org



State and ACS-Verified Level 1 Pediatric Trauma and Burn Center on the Anschutz Medical Campus

Our multidisciplinary Level I Regional Pediatric Trauma and Burn Center provides timely, comprehensive, cost-effective care for children with single system or complex multisystem trauma and burn-related injuries.

We are the only American College of Surgeons-verified Level I Pediatric Trauma Center in Colorado and the seven-state Rocky Mountain region. As a regional resource center, we set the standard for pediatric trauma and burn care.

We treat children with traumatic injuries such as:

- Epidural or subdural hematoma
- Thoracic or cardiac injuries
- Solid organ injuries
- Pelvis or femur fractures
- Non-accidental trauma
- Burn injuries

We coordinate pediatric transport within our statewide and regional trauma systems, equipping our dedicated 24/7 pediatric specialty transport team with critical care air and ground ambulances. Our nurse, respiratory and emergency medicine technician teams are the only teams in the entire multistate region offering high-frequency ventilation and nitric oxide therapies.

Regional trauma and burn center 2021 referrals

1,115
Colorado

77
Wyoming

7
South Dakota

1
North Dakota

28
Nebraska

6
Montana

27
Kansas

1,301
Total Transport Referrals

State-Verified Level 2 Trauma Center at Children's Hospital Colorado – Colorado Springs

When time is critical, comprehensive trauma care is now much closer for children in southern Colorado and northern New Mexico. Our state-verified Level 2 Trauma Center can provide immediate, life-saving care for the severest of injuries and can support a child or adolescent and their family throughout their recovery. We treat the full spectrum of injury including:

- Severe closed and penetrating head injuries (such as epidural and subdural hematomas)
- Thoracic and abdominal injuries (such as liver and spleen lacerations)
- Non-accidental trauma or neglect
- All varieties of fracture management, including pelvis and long-bone fractures
- Sports injuries

Colorado Springs trauma center 2021 total transport referrals

362

Colorado

1
Montana

2
New Mexico

2
Kansas

1
Arizona





Our Pediatric Trauma Subspecialty Team

- 13** Trauma surgeons
- 16** Orthopedic surgeons
- 4** Cardiac surgeons
- 5** Urologists
- 9** Ophthalmologists
- 3** Gynecologists
- 9** Neurosurgeons
- 15** Otolaryngologists
- 3** Hand surgeons
- 3** Plastic surgeons
- 26** Critical care intensivists
- 69** Emergency medicine physicians
- 11** Rehabilitation medicine physicians

Trauma Centers

The Children's Colorado Trauma System serves a large geographic area extending from the Canadian border through Montana, Wyoming, North and South Dakota, Western Nebraska, Kansas, New Mexico and the entire state of Colorado.

8 years

Mean age

The mean age of children treated at Children's Colorado is younger than comparative hospitals reporting to the American College of Surgeons Trauma Quality Improvement Program (ACS TQIP).

1.2%

Mortality rate

The overall rate of death for injured children ages 0 to 18 is lower at Children's Colorado than at other hospitals across the nation that submit data to the ACS TQIP database.

Traumatic injuries treated at Anschutz

88%

Blunt

6%

Penetrating

6%

Thermal

Traumatic injuries treated at Colorado Springs

94%

Blunt

5%

Penetrating

1%

Thermal






Emergency Medical Services

We build relationships with emergency medical services providers to ensure the best outcomes in pediatric trauma care. Our Transfer Center facilitates communication between prehospital providers, emergency medicine physicians and trauma surgeons, so that we can anticipate each patient's unique needs prior to arrival.

Transport Modes in 2021 to Children's Colorado Trauma Centers




Level 1 RPTC

Anschutz

-  **53%** Ambulance
-  **8%** Aircraft
-  **39%** Privately owned vehicle

Level 2 TC

Colorado Springs

-  **41%** Ambulance
-  **8%** Aircraft
-  **51%** Privately owned vehicle

Pediatric Emergency Medicine

Our Emergency Departments are the point of entry for our trauma centers. Our emergency medicine physicians, advanced practice providers and more than 400 nurses and ancillary staff deliver high-quality emergent and urgent care to children of all ages, around the clock, serving an enormous geographic area.

Our full-time emergency medicine faculty members are board-certified in pediatric emergency medicine. We care for a wide array of acuities and conditions, in addition to directing Flight For Life pediatric transports and providing 24/7 phone consultation for primary care providers and emergency departments throughout the region.

The Anschutz Pediatric Emergency Medicine Team

- | | | |
|------------------------|-----------------------|------------------------|
| Kathleen Adelgais, MD | Andrew Krack, MD | Eika Sidney, MD |
| Chisom Agbim, MD | Patrick Mahar, MD | Marion Sills, MD |
| Lalit Bajaj, MD | Maria Mandt, MD | Jennifer Smedley, MD |
| Cortney Braund, MD | Marilyn Marr, MD | Matthew Solove, MD |
| Alison Brent, MD | Dyllon Martini, MD | Sandra Spencer, MD |
| Rachel Cafferty, MD | Marcy Mendenhall, MD | Stephanie Staab, MD |
| Ryan Caltagirone, MD | Jeffrey Michael, MD | Melisa Tanverdi, MD |
| Kevin Carney, MD | Rakesh Mistry, MD | Irina Topoz, MD |
| Julia Freeman, MD | Nidhya Navanandan, MD | Tien Vu, MD |
| Timothy Givens, MD | Tara Neubrand, MD | George Wang, MD |
| Joe Grubenhoff, MD | Jonathan Orsborn, MD | Joseph Wathen, MD |
| Maya Haasz, MD | Arleta Rewers, MD | Keith Weisz, MD |
| Nikita Habermehl, MD | Mark Roback, MD | Alexandria Wiersma, MD |
| Sarah Halstead, MD | Caryn Robertson, MD | Jason Woods, MD |
| Jonathan Higgins, MD | Laura Rochford, MD | |
| Nathan Jamieson, MD | Kelley Roswell, MD | |
| Bernadette Johnson, MD | Stephen Ruffenach, MD | |
| Peter Kazura, MD | Mary Saunders, MD | |
| Kristin Kim, MD | Sarah Schmidt, MD | |
| <i>Trauma Liaison</i> | Halden Scott, MD | |

The Colorado Springs Pediatric Emergency Medicine Team

- David Listman, MD,
Trauma Liaison
- Bob Kelly, MD, EMS Liaison
- Jenn Bellis, MD
- James Brown, MD
- Chris Cavagnaro, MD
- Mike DiStefano, MD
- Katherine Huston, MD
- Ashley Mazo, MD
- Sarah Mellion, MD
- Eric Nau, MD
- Jonathan Reeves, MD
- Miguel Sandoval, MD
- Lillie Sarraff, MD
- Paul Szeffler, MD
- Austin Meggitt, MD
- Lisa Coray, MD

2021 Anschutz Volume

63,933

Total ED visits during calendar year 2021

17,831

Visits to the ED for injury

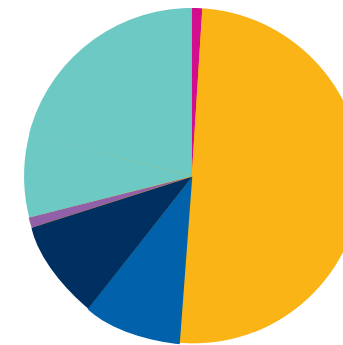
1,701

Injured patients who met registry inclusion criteria

81

Number of highest level trauma team activations

Trauma Patient Disposition in 2021 at Anschutz



- 47% Floor unit
- 28% Discharged from the ED
- 10% Operating room
- 10% PICU admissions
- 3% Direct admissions
- 2% Transferred to another facility

2021 Colorado Springs Volume

31,045

Total ED visits during calendar year 2021

6,209

Visits to the ED for injury

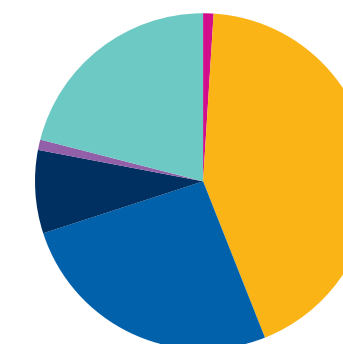
693

Injured patients who met registry inclusion criteria

21

Number of highest level trauma team activations

Trauma Patient Disposition in 2021 at Colorado Springs



- 1% Direct admissions
- 44% Med Surg Admissions
- 18% Operating room
- 7% ICU
- 2% Transferred to another facility
- 28% Discharged from the ED



Pediatric Surgery

As a consistently top-ranked pediatric hospital, we offer several nationally recognized surgical procedures and programs for young patients. Our pediatric trauma surgeons provide 24/7, in-house coverage for immediate trauma and burn care.

Pediatric Surgeons

Steve Moulton, MD, Medical Director,
Trauma and Burn Programs Anschutz
John Bealer, MD,
Trauma Medical Director, Colorado Springs*
Shannon Acker, MD
Denis Bensard, MD
David Bliss, MD*
Sarkis (Christopher) Derderian, MD
Jose Diaz-Miron, MD
Frederick Karrer, MD
Ann Kulungowski, MD
Kenneth Liechty, MD
David Partrick, MD
Jonathan Roach, MD
Stig Somme, MD

*Colorado Springs Team

Pediatric surgery advanced practice providers

Justin Alldredge, PA*
Teren Culbertson, PA*
Starla Eubanks, NP*
Stephanie Fingland, PN
Katie Flynn, PNP
Doug Haase, PA*
Christianna Kaczmarek, PA*
Richele Koehler, PA-C, Lead at Anschutz
Ashley Ludden, PA
Caitlyn McCarthy, NP
Brandy Ramos, NP*
Karisa Reynolds, PA*
Amanda Rutherford, PA-C
AnnaMaria Salas, PA-C
Lauren Schneider, PNP
Elise Van Etten, PA-C

Orthopedic Surgery

Our pediatric orthopedic surgery and rehabilitation medicine physicians and staff are leaders in innovative research and superior care for children and young adults, ensuring the best possible outcomes for our patients, families and communities. We provide integrated orthopedic, surgical and rehabilitation care across a broad spectrum of conditions that affect growing joints and bones, from common breaks and sprains to the most complex musculoskeletal deformities and traumatic injuries. No other program in the nation offers our level of integrated, multidisciplinary pediatric care.

Our physicians also offer consultations for simple and complex pediatric orthopedic problems.

Pediatric Orthopedic Surgeons

Julia Sanders, MD, Trauma Liaison
Jay Albright, MD
Aaron Boyles, MD*
Sayan De, MD
Nathan Donaldson, DO
Mark Erickson, MD
Sumeet Garg, MD
Gaia Georgopoulos, MD
Nancy Hadley-Miller, MD

Travis Murray, MD, Trauma Liaison*
Jason Rhodes, MD
Frank Scott, MD
Courtney Selberg, MD
Brian Shaw, MD*
Sarah Sibbel, MD
Curtis Vandenburg, MD

*Colorado Springs Team



Neurosurgery

Our Pediatric Neurosurgery Program offers integrated, comprehensive care for all types of disorders affecting the nervous system and skull, including traumatic injury, epilepsy, hydrocephalus, brain tumors and facial and skull deformities.

Our fellowship-trained and board-certified pediatric neurosurgeons offer more than 60 years of combined experience and focus solely on the care of children with neurosurgical problems.

Pediatric Neurosurgeons

Brent O'Neill, MD,
Trauma Liaison
Allyson Alexander, MD
Derek Clay, MD
Krista Greenan, MD*
Michael Handler, MD*

Todd Hankinson, MD
Thomas Ridder, MD,
Trauma Liaison*
John McVicker, MD*
Charles Corbett Wilkinson, MD

*Colorado Springs Team



Otolaryngology

As one of the largest groups of fellowship-trained pediatric otolaryngologists in the western U.S., our 15 pediatric ENT specialists offer 125 years of combined post-fellowship pediatric experience, seeing more than 18,000 patients annually.

Pediatric Otolaryngology Surgeons

Owen Darr, MD,
Trauma Liaison*
Gregory C. Allen, MD
Kenny H. Chan, MD
Allison Dobbie, MD*
Christian Francom, MD
Norman R. Friedman, MD
Sarah Gitomer, MD

Steven Hamilton, MD,
Trauma Liaison*
Brian Hermann, MD
Steven Leoniak, MD*
Stephen Newton, MD*
Jeremy Prager, MD
Melissa Scholes, MD
Todd Wine, MD
Patricia J. Yoon, MD

*Colorado Springs Team

Critical Care Medicine

The Children's Colorado Pediatric Intensive Care Unit is the largest and most technologically advanced PICU in the region. Our private intensive care rooms offer patients and families state-of-the-art monitoring and critical care equipment in a private setting, with nursing stations and critical care staff just a few feet from each patient's bed.

Our PICU staff provide comprehensive services for children with single or multiorgan system failure or severe chronic illness, as well as those recovering from complex cardiac, orthopedic, neurologic and general surgeries, and patients undergoing solid organ transplantation.

Pediatric Intensive Care Unit Providers

Todd Carpenter, MD
Joseph Albiez, MD
Jonah Attebery, MD*
Tellen Bennett, MD
Meredith Bone, MD
Amanda Carmean, MD*
Amy Clevenger, MD
Patrick "Jake" Cripe, MD
Trauma Liaison*
Angela Czaja, MD
Gina DeMasellis, MD

Ryan Good, MD
Eva Nozik, MD
Cameron Gunville, DO,
Trauma Liaison
Brian Jackson, MD
Matthew Leroue, MD
Michelle Loi, MD
Aline Maddux, MD
Blake Martin, MD
Leslie Ridall, DO
Monique Robles, MD*

Christopher Ruzas, MD
Imran Sayed, MD*
Carleen Schneider, MD
Kurt Stenmark, MD
Erin Stenson, MD
Christine Vohwinkel, MD
Michael Wittkamp, MD*
Sarah Young, MD*

*Colorado Springs Team

Child Advocacy and Protection Team

Our Child Advocacy and Protection Team provides comprehensive medical evaluations in our weekly outpatient clinic and through inpatient and emergency department consultations.

We offer the only hospital-based multidisciplinary child abuse program in Colorado, proudly meeting the designation criteria of the Children's Hospital Association as a Child Abuse Center of Excellence. Our physicians were among the first in the country — and among the only in Colorado — to be board-certified in Child Abuse Pediatrics by the American Board of Pediatrics.

Family and child evaluation for suspected maltreatment includes family support and education. We offer best-practice care and treatment in a sensitive and family-centered manner.

Child abuse is the #1 cause of trauma related death at Children's Hospital Colorado Anschutz and Colorado Springs.

Top 5 Mechanisms of Injury at Children's Hospital Colorado Trauma Centers

Anschutz

1. Fall
2. Play/Sport
3. Motor Vehicle Collision
4. Penetrating
5. Burn

Colorado Springs

1. Fall
2. NAT
3. Motor Vehicle Collision
4. Struck by and Object
5. Playground

Rehabilitation Medicine

The primary goal of our Rehabilitation Program is to optimize each child's ability to adapt to the environment, to ease the effects of disability on the child's development, and allow the child to be fully included in community living. A child's success in the program results from the collaboration of rehabilitation staff, the child's primary care physician and the child's family — all integral components of the child's care team.

Anschutz discharge disposition

- 98% Home
- 1% Rehabilitation
- 1% Transfer to another facility

Colorado Springs discharge disposition

- 95% Home
- 1% Rehabilitation
- 3% Social services
- 1% Transfer to another facility

Rehabilitation Providers

Susan Apkon, MD
 Michael Dichiaro, MD,
Trauma Liaison
 Pamela Wilson, MD
 Joyce Oleszek, MD

Cristina Sarmiento, MD
 Anne Stratton, MD
 Matthew Mayer, MD
 Kilby Mann, MD
 Wendy Pierce, MD,
*Trauma Liaison**

Amy Kanallakan, MD
 Aaron Powell, MD
 Alison Ballard, NP
 Kim Sawyer, PNP

Outreach and Education

Western Pediatric Trauma Conference

July 18 to 20, 2021 • 15 research and 8 best practices

The Western Pediatric Trauma Conference is a nationally renowned pediatric trauma conference led by Children's Colorado, Phoenix Children's Hospital, Primary Children's Hospital, Children's Hospital Los Angeles and Stanford Children's Hospital to improve outcomes in pediatric trauma care worldwide.

Colorado Pediatric Trauma Conference

November 18, 2021 • 144 virtual attendees

The annual pediatric trauma conference provides education on state-of-the-art care of the pediatric trauma patient. This conference is attended by regional and national physicians, nurses and ancillary providers.

Emergency Trauma Outreach Symposium

December 7, 2021 • 254 virtual attendees

Our Emergency Trauma Outreach Symposia brought educational events to physicians, nurses and prehospital providers throughout Colorado and the surrounding region.

Children's Hospital Care Alliance Conference

October 27th, 2021 • 190 virtual attendees

This conference is for interdisciplinary healthcare team members caring for pediatric patients in a variety of settings. As a result of this session, learners will be able to report new knowledge related to pediatric specialty practice in order to provide current, evidence-based care.

Pediatric Emergency Education Lecture Series

Monthly • 375 virtual attendees

This series offers free pediatric education to prehospital professionals on a monthly basis.

Trauma Video Review

Monthly • 249 virtual attendees

Trauma Video Review is a monthly educational series for trauma team members from pediatric emergency medicine, surgery, nursing and ancillary staff, to critically review challenging trauma cases. Each video is critiqued for team preparation, communication, and adherence to role responsibilities, as well as timeliness and appropriateness of interventions. Quality of care issues are foremost and can lead to changes in trauma-related policies and procedures. Attendees receive 1.0 AMA PRA hours of Continuing Medical Education.

Colorado Springs Pediatric Grand Rounds Series

Bi-Monthly

Recognizing the need for additional educational opportunities for all providers caring for children and adolescents in Southern Colorado, the Children's Hospital Colorado-Colorado Springs group launched a virtual "Grand Series" in 2020. This educational series, providing continuing educational credit to the widest possible range of medical providers, is conducted twice monthly via a virtual platform. While skewed towards trauma related topics, the series has been intentionally designed to provide a broad range of pediatric topics that are pertinent to any and all health care providers caring for children. The program has been extraordinarily successful, reaching not only providers throughout the state of Colorado but also providers in 22 other states and 14 countries. To date, the program has credited over 3500 continuing educational hours to providers working in every role throughout the spectrum of clinical medical care.

Blood Supply Shortages

Credit: Marina Reppucci, MD and Kyle Annen, DO

The COVID pandemic has caused unprecedented blood supply shortages, due declines in donor turnout, blood drive cancellations, staffing challenging, and donor misinformation. In January 2022, the Association for the Advance of Blood & Biotherapies, America's Blood Centers, and the American Red Cross issued a joint statement urging healthy individuals to donate blood to combat this shortage.

Blood shortages can impact all members of a community—not just trauma patients—and postpone potentially lifesaving treatments. Children's Hospital Colorado has taken a proactive approach to preventing dangerously low levels of blood products.

Research

The issue of futility in massive transfusion (MT) has become a recent focus in the trauma literature due to the large volume of blood products that may be required to save the life of a massively bleeding trauma patient. The adult trauma literature suggests possible points for futility for adults, however, recent research at CHCO using a large-scale pediatric trauma database has shown no point of futility among pediatric trauma patients who receive MT, regardless of mechanism of injury. Blood is a scarce resource and it is important to consider futility when transfusing large volumes of blood, but our research highlights that children can tolerate massive amounts of blood and survive.

Advocacy

Due to the closure of mobile blood collections during the pandemic, CHCO responded by opening a second location on-site at Children's to expand our ability to collect for the needs of our patients. We provided incentives for donation (e.g., custom masks) and partnered with the media team and local news groups to notify the community of the ongoing need for blood.

Clinical Approaches

CHCO collects 97% of the blood products it uses. Due to ongoing challenges with the national blood supply, however, CHCO cannot rely on local or regional blood banks to acutely resupply the hospital. Thus, changes have been made to the pediatric MT protocol at CHCO, to manage critically low levels of O-negative blood. Patients > 50 KG with unknown blood type who require MT are issued O-positive red blood cell units regardless of gender. This prioritizes the health and safety of critically bleeding patients of any gender, while conserving the blood supply for patient's whose blood type is known.

50

Trauma patients who required blood product transfusion

7

Trauma patients who received MT

8%

Percentage decrease in total products collected compared to 2020

41%

Percentage decrease in first time donors compared to 2020

Whole blood and platelet donations can be made Monday – Friday at Children's Hospital Colorado's Blood Donor Center, located on the Anschutz Campus. If you are interested in blood donation or scheduling a mobile drive, please call: 720-777-5398

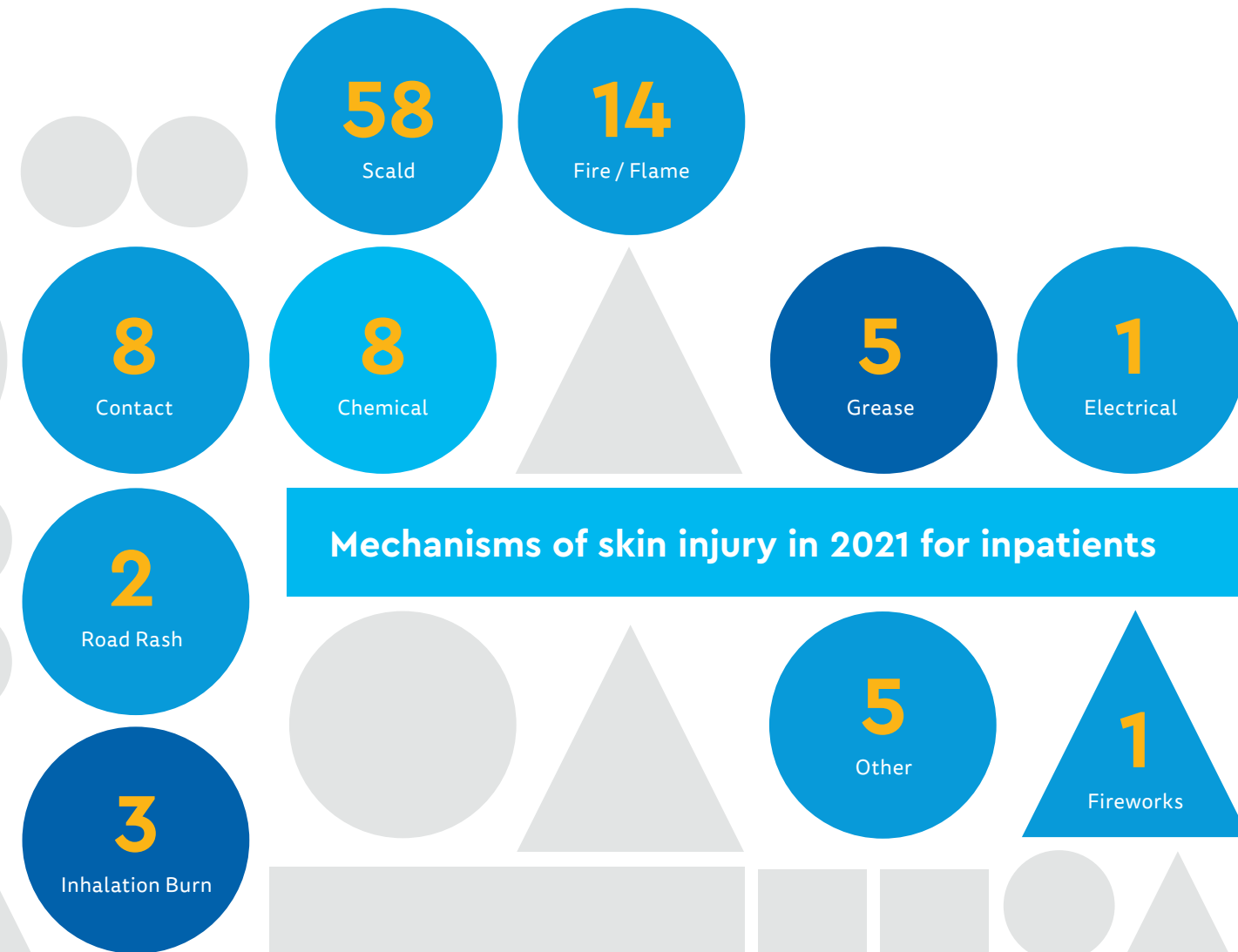


Regional Pediatric Burn Center

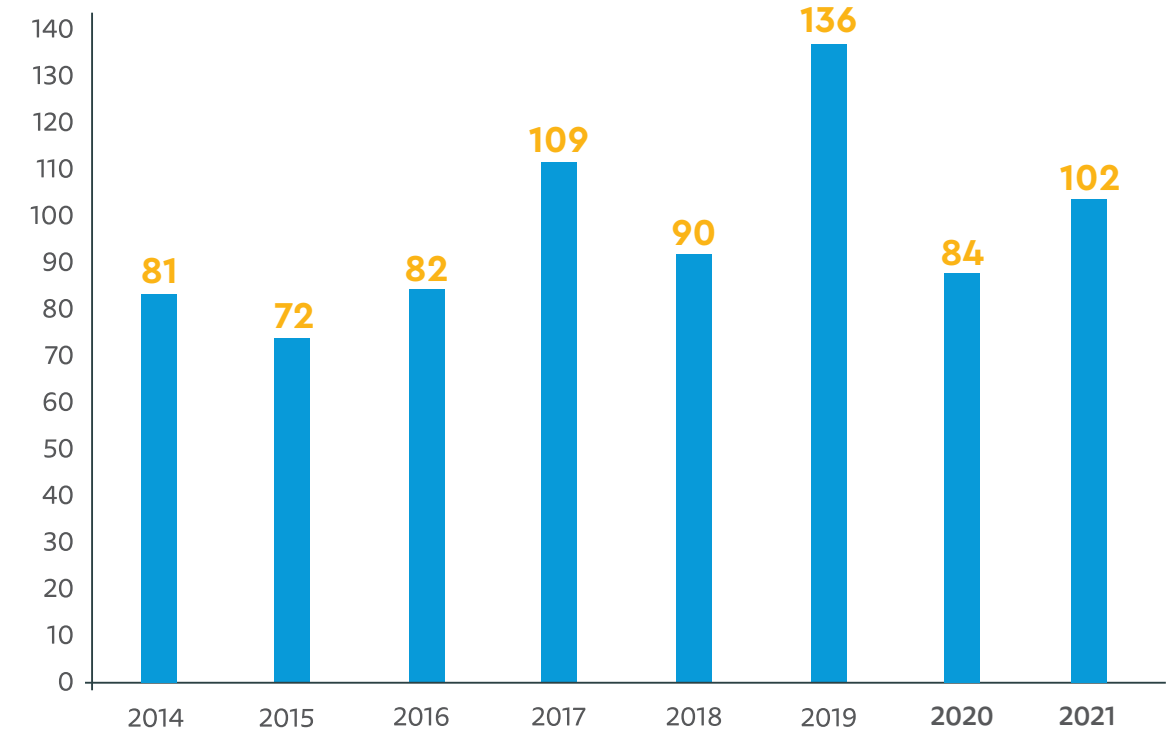
Our Burn Center was established in 1974. We deliver the highest standard of treatment for burn-injured children of all ages. Our transfer center arranges transfers as necessary to ensure every child receives optimal treatment for their burn injuries.

Our team cares for patients throughout their entire recovery journey, from acute inpatient care to the outpatient and rehabilitative settings. We also offer consultations for other skin injuries including exfoliative dermatoses (such as Stevens Johnson Syndrome and toxic epidermal necrolysis), IV infiltrates and traumatic abrasions.

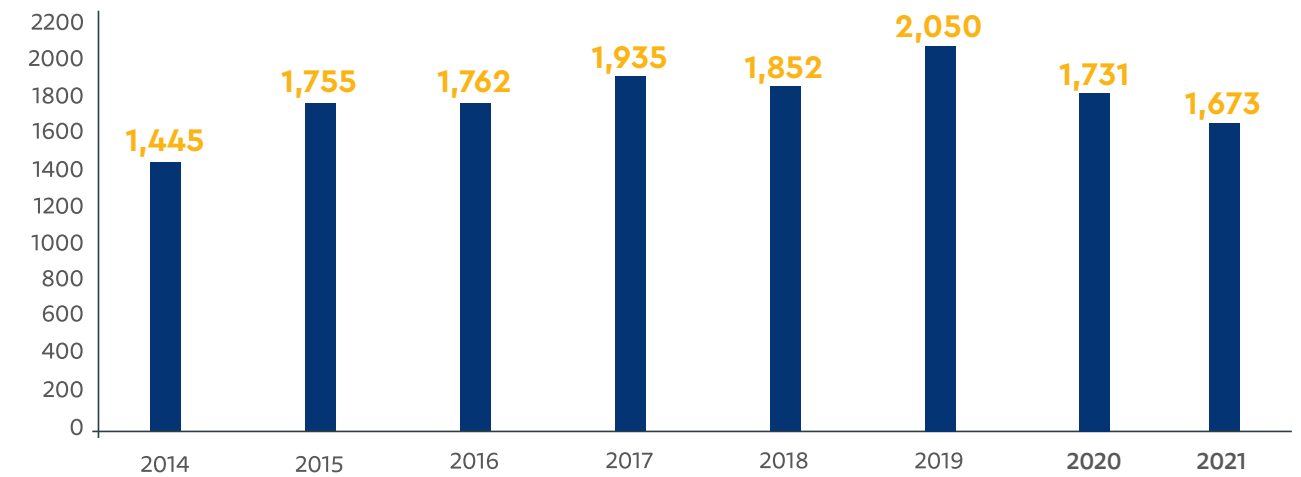
We offer education and family-centered care through peer support groups, community gatherings, a school re-entry program, and our burn camps program. For questions or patient transfers, call OneCall at 720-777-3999 or our burn nurse cell phone at 303-549-4636.



Inpatient Burn Volumes



Outpatient Burn Volumes





Burn Camps Program

The Children's Hospital Colorado Burn Camps Program is an American Camp Association accredited suite of programs structured to meet the rehabilitative and psychosocial needs of children who have sustained a burn injury. Since its inception in 1983, our program is designed to meet the specific needs of children who have sustained a burn injury by providing a residential camp program with world-class medical care, professional camp staff, dedicated staff from referring burn units, and community service partners.

Our mission is to provide children who have sustained a burn injury, and their families, the opportunity to build courage and thrive throughout their recoveries and beyond by offering inspiration, rehabilitation, and shared experiences in a safe, nurturing and supportive community. It is our vision to be a leader in quality outcomes and camper safety through innovative programming, delivering the burn camp experience to all children who sustain a burn injury.

We empower our campers and families to thrive through challenges in a safe and nurturing environment. Campers engage in intentional activities including, horseback riding, arts and crafts, rock climbing, games, and swimming. These curated activities encourage boundless creativity, self-expression, newfound courage, and adventure. They create a positive self-image, all while making life-long friendships. Our campers play with purpose and start to discover who they are as people. They learn that their scars are part of them and do not define who they are. They can then begin to heal from the inside out.



Summer Camp

Despite the restrictions implemented for our Summer Burn Camp Program, we were incredibly fortunate to host 50 kids at Cheley Children's Hospital Colorado Summer Burn Camp in August. Together we celebrated our 38th year and we could not be prouder of both staff and campers who came together, followed the everchanging COVID-19 protocols, and kept each other safe and healthy! We were able to challenge ourselves physically and emotionally, reconnect with our camp community, make lifelong friends, and enjoy an amazing week in the mountains. The 2021 Summer Burn Camp had a little bit of everything: horseback riding, hiking, mountain biking, fishing, singing songs, playing with purpose, and even snow!

This year our theme was "Together Again", and we made the most of our time together. We stayed in cohorts to keep each other safe and found creative ways to be together as a whole camp. We sang, danced, hiked, fished, rode horses, swam, went on outcamps and smiled so big under our masks! We are so proud of each camper! They all found ways to challenge themselves and commit to finding a path to being their best, both at camp and as they seek their own unique leadership styles at home and in their communities.

Young Adult Retreat

Our Young Adult Retreat program extends our mission of community reintegration by laying foundational building blocks to foster success. It is a learning experience designed to identify and address the unique needs of burn survivors ages 18-25. The program includes recreational activities and various workshops to address topics such as relationships, body image, goal setting, budgeting, and developing a personal mission statement. Participants share experiences, thoughts, and feelings in an emotionally safe and supportive environment, which creates opportunity for growth and development of personal and professional skills. In October, our retreat was held in Evergreen, CO, where we gathered to build community, learn from one another, and build life skills and friendships for the next stages of life and beyond.

Website

We continue to look for additional ways to keep our Burn Camp community updated quickly and accurately. To this end, we completed a refresh of our website. Our designer did an amazing job of encapsulating all things about Burn Camp in the build and design. Check it out at www.noordinarycamps.org. We hope you like it as much as we do!

During the pandemic, we never wavered from our mission. We continue to find creative, innovative ways to connect our campers, their families and the incredible community that makes camp a possibility. We held steadfast to our values of innovation, collaboration, resiliency and creativity. This inspired our dedicated camp staff, leadership team and specialty programming teams to continue as leaders in therapeutic programming for young burn survivors and their families. We are so appreciative of all who have supported our success.



Philanthropic Support

Our work would not be possible without the philanthropic support of multiple partner organizations and individuals. Thank you to our individual and corporate partners, who contributed \$2,500 or more in 2021. We appreciate their volunteer efforts and financial contributions, which contribute to the growth and development of our Trauma and Burn Center and Burn Camps Program.



Anonymous

The Estate of Daniel bank

The Frill Foundation

The Murray Family

The Wiczky Family

Creating Ties

Creating Ties is the signature event of the Children's Hospital Colorado Burn Camps Program. The event raises critical funds and was named Creating Ties to highlight the importance we each have in building a community that works together to support young burn survivors and their families achieve their highest potential.

We thank those who joined us at this year's Creating Ties Dinner. We are very thankful to those who joined our program in-person, via Zoom, purchased a dinner box, donated, or purchased a silent auction item, and/or sponsored the event. One of our campers, Colby, spoke about the impact Burn Camp has had on his life. Burn Camp Director, Trudy, spoke about the importance of camp and how we empower campers to "Be Brave" in their everyday lives. We extend a heartfelt thank you to all our 2021 Creating Ties sponsors.

Thank you to our 2021 table sponsors

PLATINUM



VIRTUAL



GOLD



SILVER

Ted Bellamy
Joey Irwin Family

Together we raised over \$127,000 for the Thrive Endowment, which ensures any child who has sustained a burn injury has the opportunity to attend Burn Camp long into the future. Thanks again for joining us for a fun evening filled with friends, food, libations, auction, and the power of camp.

Community Events

We provide and participate in a wide range of events, including community, fundraising, prevention, awareness, conferences, and continuing education for medical professionals.

Each year we host community support activities for families healing from a burn injury. Typically, we hold additional community events at different locations throughout Denver. Our community events provide opportunities to connect families to other families, the fire service, and community partners. While these have been on hold due to COVID-19 precautions, we look forward to gathering again soon.

Burn Awareness Week, organized by the American Burn Association, is observed the first full week in February and is a window of opportunity for organizations to mobilize burn, fire and life safety educators to unite in sharing a common burn awareness and prevention message in our community. We are a member of the Colorado Risk Reduction Network focused on injury prevention and safety initiatives throughout the year.

We are members of the Phoenix Society for Burn Survivors peer support program. Our volunteers, who have themselves navigated a burn injury and recovery, provided peer support to children, teens, siblings, and caregivers across the acute and rehabilitative phases of care through the Survivors Offering Assistance in Recovery (SOAR) peer support program.

Ambassador Program

Every two years, the community nominates a group of patients to represent Children's Hospital Colorado as Patient Ambassadors. Throughout their two-year commitment, Ambassadors and their families will share their stories, help to raise money, and represent Children's Colorado at community fundraising events.

We are incredibly grateful to Elizabeth and Grace for representing the Burn Center and Burn Camps Program in 2020 and 2021. We want to extend a huge thank you to them and their families for appearing at events, sharing their stories, and raising much-needed funds!



Youth Fire-setting Evaluation and Treatment Program

The Youth Fire Setting Evaluation and Treatment Program was developed to address youth misusing fire. The program focuses on helping youth make safer decisions. Due to health restrictions, we were not able to conduct multi-family interventions, so we individually met with families or via video and/or telehealth.

The youth and families participating in this program were highly impacted by the isolation and reduction of youth activities and services at school and in the community due to the covid pandemic

We evaluate and treat patients with injuries from the misuse of fire, candles, electricity, lightbulbs, chemicals, and fireworks, and help families develop safety plans. We receive community referrals from fire departments, schools, mental health services, juvenile justice and parents of children exhibiting high-risk fire setting behavior. Families receive mental health intervention for these high-risk behaviors to help prevent burn injuries and enhance community safety.





Research Projects with IRB Approval

1. Statewide Helmet Regulations and ATV Injuries in Pediatric Patients
2. The Prevalence of Mental Health Disease and Mental Health Service Utilization Among Pediatric Trauma Patients
3. Cardiac and great vessel injuries in pediatric patients
4. Pediatric Traumatic Injuries
5. Outcomes of Operative and Non-Operative Treatment of Displaced Proximal Humerus Fractures in Adolescents
6. Retrospective Review of Femoral Fractures
7. CORTICES REGISTRY
8. Prospective Randomized Study Comparing Functional Bracing vs. Hip Spica Cast in Pediatric Femur Fracture
9. Seasonal Trends in Supracondylar Humerus and Femur Fractures
10. Use of Non-Steroidal Anti-Inflammatory Medications in Pediatric Head Trauma

11. Incidence of Cervical Spine Instability in Pediatric Abusive Head Injury
12. Decision Making Surrounding ICP Monitoring in Children with Severe TBI
13. Proximal Both Bone Forearm Fractures in Skeletally Immature Patients: Identifying Criteria for Aggressive Treatment
14. A Cost-Analysis of Treatment Methods for Diaphyseal Forearm Fractures in Pediatric Patients
15. Evaluating 3D Printed Orthotics in Pediatric Scaphoid Fractures
16. Ulnar Epiphysiodesis: Success of the Index Procedure
17. Proximal Phalanx Fractures Salter Harris II: Clinical Outcomes and Long-Term Follow-up
18. Retrospective Review of Midshaft Clavicle Fractures in Adolescents with Cross-sectional Follow Up
19. Evaluation of the Necessity of Operative Irrigation and Debridement: Pediatric Randomized trial of type One Open Fractures (COMIRB)
20. IMPACCT Survey on Distal Radius and Medial Epicondyle Fracture
21. Pediatric Tibial Spine Fractures Prospective Cohort Ceding to CHOP IRB
22. PECARN C-Spine "Development and Testing of a Pediatric Cervical Spine Injury Risk Assessment Tool (C-Spine)"
23. PECARN PediDOSE "Pediatric Dose Optimization for Seizures in EMS (PediDOSE)"
24. Difficult Airway "High Risk Criteria for the Physiologically Difficult Pediatric Airway: a Multicenter, Observational Study to Generate Validity Evidence"
25. COVID Airway Management "Impact of COVID-19 on Pediatric Airway Management in the Emergency Department"
26. PEDS Ready "Trauma Designation, Presence of a Pediatric Emergency Care Coordinator, and Pediatric Emergency Department Readiness"
27. VIPER Intubation Trial "Video laryngoscopy versus direct laryngoscopy in emergency pediatric tracheal intubation"
28. "Impact of high-fidelity simulation on prehospital provider self-efficacy and competency in managing pediatric emergencies"
29. PEMCRC Submersion "The Pediatric Submersion Score – a tool to identify and manage children at low risk for submersion injury"
30. PAIN "Factors that Impact Prehospital Pain Management in Injured Children"
31. PED Injuries "The Epidemiology of Pediatric Injuries During a Global Pandemic"
32. PEMCRC Anaphylaxis "The PEMCRC anaphylaxis study protocol: a multicenter cohort study to derive and validate clinical decisions models for the emergency department management of children with anaphylaxis"
33. PERN Pain "Pain Management and Sedation in Pediatric Ileocolic Intussusception: A Global, Multicenter, Retrospective Study"
34. PECC "Pediatric Emergency Care Coordination in EMS Agencies: Measuring the Influence, Magnifying the Improvement"
35. VIPER Collaborative "The Videography in Pediatric Emergency Resuscitation Collaborative"
36. IMPROVE "The Effect of Emergency Department and After-Emergency Department Analgesic Treatment on Pediatric Long Bone Fracture Outcomes (After-ED Fracture Outcomes)"

2021 Publications

Child Abuse

1. Lindberg DM. What Will it Take to Achieve Routine Screening for Abuse? *J Pediatr*. 2021 Sep;236:10-11. doi: 10.1016/j.jpeds.2021.05.038. Epub 2021 May 19. PMID: 34022246.
2. Lee GS, Lindberg DM, Frasier LD, Hymel KP. A changing history: When is it a red flag for child abuse? *Child Abuse Negl*. 2021 Jul;117:105077. doi: 10.1016/j.chiabu.2021.105077. Epub 2021 Apr 28. PMID: 33930662.
3. Mitchell IC, Norat BJ, Auerbach M, Bressler CJ, Como JJ, Escobar MA Jr, Flynn-O'Brien KT, Lindberg DM, Nickoles T, Rosado N, Weeks K, Maguire S. Identifying Maltreatment in Infants and Young Children Presenting With Fractures: Does Age Matter? *Acad Emerg Med*. 2021 Jan;28(1):5-18. doi: 10.1111/acem.14122. Epub 2020 Nov 21. PMID: 32888348.

Emergency Medicine

4. Kirschen MP, Myers SP, Neuman MI, Grubenhoff JA, Mannix R, Stence N, Yang E, Woodford AL, Rogers T, Nordell A, Vossough A, Zonfrillo MR. Intracranial Traumatic Hematoma Detection in Children Using a Portable Near-infrared Spectroscopy Device. *West J Emerg Med*. 2021; 22:782-791
5. Grubenhoff J. PECARN blunt head-trauma prediction rule in infants <3 months old. *J Pediatr*. 2021 Nov; 238:338-342. doi: 10.1016/j.jpeds.2021.08.059. PMID: 34702504
6. MI Harris, KM Adelgais, SW Linakis, SW Magill, R Brazauskas, MI Shah, DK Nishijima, GS Lowe, K Chadha, TP Chang, EB Lerner, JC Leonard, HP Schwartz, JB Gaither, JR Studnek & LR Browne (2021) Impact of Prehospital Pain Management on Emergency Department Management of Injured Children, Prehospital Emergency Care, DOI: 10.1080/10903127.2021.2000683
7. Harris M, Crowe R, Anders J, Salvatore D'Acunto, Adelgais K, Fische J. Applying a Set of Termination of Resuscitation Criteria to Paediatric Out-of-Hospital Cardiac Arrest. *Resuscitation*. 2021, epub Sept 20 2021: <https://doi.org/10.1016/j.resuscitation.2021.09.015>
8. Documentation of Child Maltreatment by Emergency Medical Services in a National Database. Qualls C, Hewes HA, Mann NC, Dai M, Adelgais K. *Prehosp Emerg Care*. 2021 Sep-Oct;25(5):675-681. doi: 10.1080/10903127.2020.1817213. Epub 2020 Oct 12. PMID: 32870747
9. Interim Guidance for Emergency Medical Services Management of Out-of-Hospital Cardiac Arrest During the COVID-19 Pandemic. Goodloe JM, Topjian A, Hsu A, Dunne R, Panchal AR, Levy M, McEvoy M, Vaillancourt C, Cabanas JG, Eisenberg MS, Rea TD, Kudenchuk PJ, Gienapp A, Flores GE, Fuchs S, Adelgais KM, Owusu-Ansah S, Terry M, Sawyer KN, Fromm P, Panczyk M, Kurz M, Lindbeck G, Tan DK, Edelson DP, Sayre MR. *Circ Cardiovasc Qual Outcomes*. 2021 Jul;14(7): e007666. doi: 10.1161/CIRCOUTCOMES.120.007666. Epub 2021 Jun 23. PMID: 34157848
10. Simulating Teamwork for Better Decision Making in Pediatric Emergency Medical Services. Ozkaynak M, Dolen C, Dollin Y, Rappaport K, Adelgais K. *AMIA Annu Symp Proc*. 2021 Jan 25;2020:993-1002. eCollection 2020. PMID: 33936475
11. Emergency Visits and Hospitalizations for Child Abuse During the COVID-19 Pandemic. Kaiser SV, Kornblith AE, Richardson T, Pantell MS, Fleegler EW, Fritz CQ, Parikh K, Zagel A, Sills MR, Souza HG, Goyal MK, Hogan AH, Heller KR, DeLaroché AM, Cooper JN, Puls HT. *Pediatrics*. 2021 Apr;147(4): e2020038489. doi: 10.1542/peds.2020-038489. Epub 2020 Dec 30. PMID: 33380432
12. Exposure and Confidence with Critical Nonairway Procedures: A Global Survey of Pediatric Emergency Medicine Physicians. Craig SS, Auerbach M, Cheek JA, Babl FE, Oakley E, Nguyen L, Rao A, Dalton S, Lyttle MD, Mintegi S, Nagler J, Mistry RD, Dixon A, Rino P, Kohn Loncarica G, Dalziel SR; Pediatric Emergency Research Networks. *Pediatr Emerg Care*. 2021 Sep 1;37(9): e551-e559. doi: 10.1097/PEC.0000000000002092. PMID: 32433454

13. Lerner EB, Browne LR, Studnek JR, Mann NC, Dai M, Hoffman CK, Pilkey D, Adelgais KM, Brown KM, Gaither JB, Leonard JC, Martin-Gill C, Nishijima DK, Owusu-Ansah S, Shah ZS, Shah MI. A Novel Use of NEMSIS to Create a PECARN-Specific EMS Patient Registry. *Prehosp Emerg Care*. 2021 Jul 27:1-8. doi: 10.1080/10903127.2021.1951407. Online ahead of print. PMID: 34232828
14. Evaluating a longitudinal point-of-care-ultrasound (POCUS) curriculum for pediatric residents. Brant JA, Orsborn J, Good R, Greenwald E, Mickley M, Toney AG. *BMC Med Educ*. 2021 Jan 19;21(1):64. doi: 10.1186/s12909-021-02488-z. PMID: 33468138
15. Impact of young age on outcomes of emergency department procedural sedation. Schlegelmilch M, Roback MG, Bhatt M; Sedation Safety Study Group of Pediatric Emergency Research Canada (PERC), Johnson DW, Farion KJ, Ali S, Beno S, Dixon A, McTimoney CM, Travassos G, McGahern C, Cantor Z, Fitzpatrick E, Dow N, Naranian T, Allard G. *Am J Emerg Med*. 2021 Mar 10;46:116-120. doi: 10.1016/j.ajem.2021.03.014. Online ahead of print. PMID: 33744747
16. Metric Development for the Multicenter Improving Pediatric Sepsis Outcomes (IPSO) Collaborative. Paul R, Niedner M, Brilli R, Macias C, Riggs R, Balamuth F, Depinet H, Larsen G, Huskins C, Scott H, Lucasiewicz G, Schaffer M, DeSouza HG, Silver P, Richardson T, Hueschen L, Campbell D, Wathen B, Auletta JJ; IPSO COLLABORATIVE INVESTIGATORS. *Pediatrics*. 2021 Apr 1: e2020017889. doi: 10.1542/peds.2020-017889. Online ahead of print. PMID: 33795482
17. Room to Maneuver: Implementation of a Pediatric Emergency External Surge Tent during the COVID-19 Pandemic. Braund C, Wathen J, Kim KM, Ludwig MSM, Masin DA, Carney KP, Roback MG, Johnson BK. *Pediatr Emerg Care Med Open Access*. Vol.6 No.2:8 (2021) <https://pediatric-emergency-care.imedpub.com/room-to-maneuver-implementation-of-a-pediatric-emergency-external-surge-tent-during-the-covid19-pandemic.pdf>
18. Hurst IA, Abdo DC, Harpin S, Leonard J, Adelgais K. Confidential Screening for Sex Trafficking Among Minors in a Pediatric Emergency Department. *Pediatrics*. 2021 Feb 16: e2020013235. doi: 10.1542/peds.2020-013235. Epub ahead of print. PMID: 33593847.
19. Lyng J, Adelgais K, Alter R, Beal J, Chung B, Gross T, Minkler M, Moore B, Stebbins T, Vance S, Williams K, Yee A. Recommended Essential Equipment for Basic Life Support and Advanced Life Support Ground Ambulances 2020: A Joint Position Statement. *Prehosp Emerg Care*. 2021 Feb 8:1-13. doi: 10.1080/10903127.2021.1886382. Epub ahead of print. PMID: 33557659
20. Green SM, Norse AB, Jackson BF, Carman MJ, Roback MG; ACEP Regulatory Challenges to Emergency Department Procedural Sedation Task Force. Regulatory Challenges to Emergency Medicine Procedural Sedation. *Ann Emerg Med*. 2021 Jan;77(1):91-102. doi: 10.1016/j.annemergmed.2020.08.004. Epub 2020 Oct 21. PMID: 33353592.
21. Brooks-Russell A, Brown T, Wrobel J, Milavetz G, Dooley G, Friedman K, Amioka E, Steinhart B, Wang GS, Kosnett M. Simulated Driving Performance among Daily and Occasional Cannabis Users. *Accident Analysis and Prevention*. 2021 Aug 14; 160:106326. doi: 10.1016/j.aap.2021.106326.

Orthopedic Surgery

22. Multi-day Delay to Care identified in Pediatric trauma cases during COVID-19. Kylie G. Shaw, Reba L Salton, Patrick Carry, Nancy Hadley-Miller and Gaia Georgopoulos. July 17 2021, *Journal of Pediatric Orthopedics B*.
23. Distal Femur Fractures are Associated with the Highest Risk of Clinically Significant Growth Disturbance among Lower Extremity Physeal Fractures. MINAMI K. YAMAMURA; Patrick Carry; Romie F. Gibly MD; Kaley S. Holmes; Brandon Ogilvie; Alicia Phillips; Gaia Georgopoulos MD; Nancy Hadley Miller MD*; Karin Payne**

Radiology

24. Magnetic resonance imaging findings following button battery ingestion. Grey NEO, Malone LJ, Miller AL, Carroll HF, Khalaf RT, Kramer RE, Browne LP. *Pediatr Radiol*. 2021 Jun 1. doi: 10.1007/s00247-021-05085-w. Online ahead of print. PMID: 34075452

Pediatric Surgery

25. Reppucci ML, Acker SN, Cooper E, Meier M, Stevens J. Improved Identification of Severely Injured Pediatric Trauma Patients Using Reverse Shock Index Multiplied by Glasgow Coma Scale (rSIG). *J Trauma Acute Care Surg*.
26. Reppucci ML, Phillips R, Meier M, Acker SN, Stevens J, Moulton SL, Bensard D. Shock Index Pediatric Age-Adjusted (SIPA) as a Tool for Predicting Outcomes in Children with or Without Traumatic Brain Injury. *J Trauma Acute Care Surg*. 91(5):856-860, November 2021. doi: 10.1097/TA.0000000000003208. Epub 2021 Mar 31.
27. Reppucci ML, Pickett K, Stevens J, Phillips R, Recicar J, Annen K, Moulton SL. Massive Transfusion in Pediatric Trauma – Does More Blood Predict Mortality? *J Pediatr Surg*. 2021 Oct 8. doi: <https://doi.org/10.1016/j.jpedsurg.2021.09.051>.
28. Phillips R, Hunter M, Bensard D, Shahi N, Shirek G, Reppucci ML, Meier M, Recicar J, Acker S, Kim J, Moulton S. It is time for TEG in pediatric trauma: unveiling meaningful alterations in children who undergo massive transfusion. *Pediatr Surg Int*. 2021 Sep 17;1-8. doi: 10.1007/s00383-021-04944-9.
29. Katie W. Russell, Shannon N. Acker, Romeo C. Ignacio, Katrine M. Lofberg, Erin M. Garvey, Stephanie D. Chao, David W. Bliss, Caitlin A. Smith, Deepika Nehra, Melissa L. Anderson, Brittney L. Bunnell, Niti Shahi, John M. Perry, Lauren L. Evans, Jacky Z. Kwong, Joseph Tobias, Autumn Rohan, Kaci L. Pickett, Jill L. Kaar, Zachary J. Kastenber, Antoinette L. Laskey, Eric R. Scaife, Aaron R. Jensen. Child physical abuse and COVID-19: Trends from nine pediatric trauma centers, *Journal of Pediatric Surgery*, 2021, ISSN 0022-3468, <https://doi.org/10.1016/j.jpedsurg.2021.09.050>.

Neurosurgery

30. Alexiades, Nikita G et al. "Development of best practices in the utilization and implementation of pediatric cervical spine traction: a modified Delphi study." *Journal of neurosurgery. Pediatrics*, 1-12. 2 Apr. 2021, doi:10.3171/2020.10.PEDS20778

Critical Care

31. Burd RS, Jensen AR, VanBuren JM, Richards R, Holubkov R, Pollack MM; Eunice Kennedy Shriver National Institute of Child Health and Human Development Collaborative Pediatric Critical Care Research Network Assessment of Health-Related Quality of Life and Functional Outcomes After Pediatric Trauma Investigators, Berg RA, Carcillo JA, Carpenter TC, Dean JM, Gaines B, Hall MW, McQuillen PS, Meert KL, Mourani PM, Nance ML, Yates AR. Factors Associated With Functional Impairment After Pediatric Injury. *JAMA Surg*. 2021 Aug 1;156(8):e212058. doi: 10.1001/jamasurg.2021.2058. Epub 2021 Aug 11. Erratum in: *JAMA Surg*. 2021 Jul 7;:null. PMID: 34076684; PMCID: PMC8173466.

Contact Us

One Call

phone: 1-800-599-3904

Trauma Center

phone: 720-777-6282

email: childrens.trauma@childrenscolorado.org

web: childrenscolorado.org/trauma

Colorado Springs Trauma Program

phone: 719-305-9912

Education & Outreach

phone: 720-777-6604

email: emergency.outreach@childrenscolorado.org

web: childrenscolorado.org/tebo

Burn Center

phone: 720-777-6604

email: childrens.burn@childrenscolorado.org

web: childrenscolorado.org/burn

Burn Camps

phone: 720-777-8295

email: learnmore@noordinarycamps.org

web: noordinarycamps.org

Youth Fire Setters

phone: 720-777-6604



Children's Hospital Colorado

Anschutz Medical Campus | 13123 East 16th Avenue, B245 Aurora, CO 80045 | childrenscolorado.org

© Children's Hospital Colorado 2022 All rights reserved.

Discrimination is Against the Law. Children's Hospital Colorado complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Children's Hospital Colorado does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Children's Hospital Colorado provides free aids and services to people with disabilities to communicate effectively with us, such as: Qualified sign language interpreters, written information in other formats (large print, audio, accessible electronic formats, other formats). Children's Hospital Colorado provides free language services to people whose primary language is not English, such as: Qualified interpreters, information written in other languages. If you need these services, contact the hospital main line at 720.777.1234.

If you believe that Children's Hospital Colorado has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Corporate Compliance Officer, 13123 E 16th Avenue, B450, Aurora, Colorado 80045, Phone: 720.777.1234, Fax: 720.777.7257, corporatecompliance@childrenscolorado.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Corporate Compliance Officer is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD) Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Children's Hospital Colorado complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-720-777-1234.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-720-777-1234.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-720-777-1234 번으로 전화해 주십시오.

注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電1-720-777-1234。

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-720-777-1234.

ማስታወሻ: የዓገናን ስራ ለማግኘት ለሆነ የትርጉም አገልግሎት ለማግኘት በነፃ ለኃገሪታችን ተዘጋጅተዋል። ወደ ማስተላለፊ ቁጥር 1-720-777-1234 (መስማት ለተሳናቸው-

رقم) 720-777-1234-1 اتصل برقم 720-777-1234-1 للمساعدة اللغوية تتوافر لك بالمجان.

ملحوظة: إذا كنت تتحدث انگر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-720-777-1234.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-720-777-1234.

ध्यान दनु होस तपाइने नेपाल बोल्नेहरू भन तपाइको निम्त भाषा सहायता सवाहरू नः शक्क रूपमा उपलब्ध छ । फोन गनु होसर 1-720-777-1234 ।

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-720-777-1234.

注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。1-720-777-1234 まで、お電話にてご連絡ください。

Nĭ: Q buɔ na asu lbo, asusu aka oasu n'efu, defu, aka. Call 1-720-777-1234.

EMER-180101-2022-03