



THANK YOU

Children's Health Foundation is sincerely grateful for the J.P. Bickell Foundation's generous past support of Children's Hospital in London, Ontario, totaling \$147,000.

We wanted to send you an update, to make you aware of the impact your support has had, particularly for the most fragile patients cared for at Children's Hospital – those in the Neonatal Intensive Care Unit (NICU).

In the period spanning 2013 - 2021, you made several grants to ensure fragile babies receive the best possible care for the best possible future. In 2011, you also helped to establish the Paediatric Palliative Care Program to bring comfort to children in their final days.

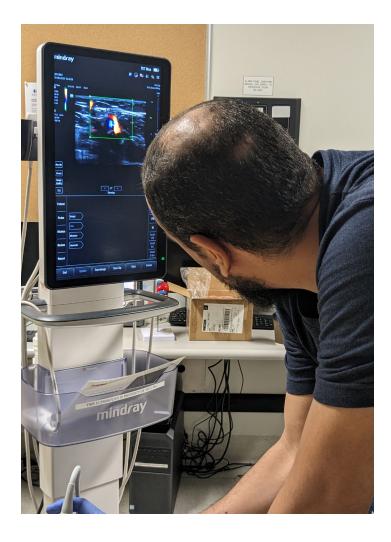
Our hospital is the third largest children's hospital in Canada and has one of the busiest Neonatal Intensive Care Units in the country. We serve a vast geographical region that spans west from London to Windsor, east to Kitchener/Waterloo and as far north as Thunder Bay. Our health care professionals are caring for a growing number of infants in the NICU, with 1,013 premature and critically ill patients supported last year alone. The NICU has recently expanded to be a 55-bed Unit.

We are thankful to the J.P. Bickell Foundation for helping equip our team with the resources needed to save babies' lives.

POINT OF CARE ULTRASOUND FOR THE NICU MADE POSSIBLE BY YOUR GRANT IN 2021

In 2021, the J.P. Bickell Foundation generously granted \$63,000 towards a Point of Care Ultrasound (POCUS) for the NICU at Children's Hospital in London, Ontario. We were so very grateful – the POCUS has been a critical addition to the NICU's fleet. The information gleaned from this equipment has been contributing to life-saving decisions about care.

POCUS is now the standard of care in NICUs in other countries and in adult Intensive Care Units, and is quickly becoming so for Paediatric Critical Care Units and Emergency Departments. Also, having the POCUS enables the NICU at Children's Hospital to provide full training for new neonatal specialists, as they need to acquire ultrasound skills using the most up-to-date technology.



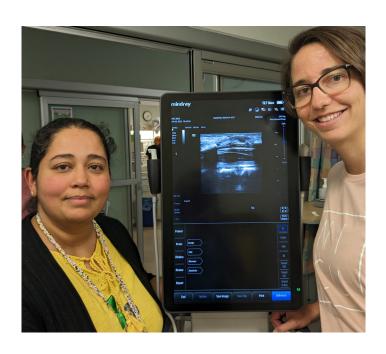
Portable to the bedside. the POCUS provides our neonatologists with a "window" into a baby's organs, such as the brain, lungs, blood vessels, gastrointestinal tract, and kidneys, without risk of radiation, at any time of the day or night. It is being used to evaluate structure (for anomalies), and to look for hemorrhages, lesions and abnormal collections of fluid in or around these organs. The machine will also help with putting in intravenous lines into tiny veins of babies without "guessing" where.

ONE OF THE MANY FAMILIES WHO HAVE BENEFITTED FROM THE POCUS AND MEMBERS OF THE STAFF FROM THE NICU WANTED TO EXPRESS THEIR APPRECIATION TO YOU:

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Our baby girl was admitted to the NICU with intestinal obstruction complicated by perforation. After a major surgery, she became very sick with low blood pressures, which required intensive monitoring with an arterial line. Her pulses were not palpable, making the insertion of an arterial line extremely difficult. Using the POCUS, the doctors were able to get an arterial line, which helped them to use appropriate medications in a timely manner to treat the low blood pressures. Today, our baby has overcome the complications following surgery and is on the road to full recovery. We are very grateful to the doctors and the POCUS machine that truly saved our baby's life.

AND FROM THE MEDICAL TEAM:

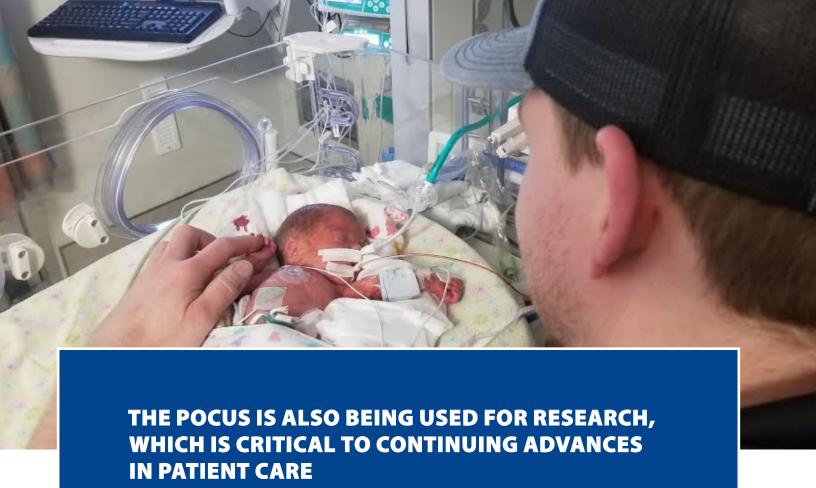




The availability of the POCUS machine 24/7 helped the physicians in many critical situations. For example, we were able to diagnose a tension pneumothorax (air leak from the lungs into the chest cavity) in a rapidly deteriorating baby without waiting for a chest X-ray, which would have taken an additional 15-30 minutes. The timely assessment using POCUS allowed us to drain the air immediately and helped the baby recover much faster and prevented more severe complications like a brain injury.



Using POCUS, we were able to make a rare diagnosis of the genetic cause of respiratory distress syndrome caused by surfactant deficiency in a term baby. The lung ultrasound findings guided the care team to confirm the cause by further genetic testing. The treatment requires lung transplantation, which is not available in newborns and has poor outcomes. The timely genetic diagnosis, while very sad, helped the family to decide on palliative care in the best interest of the baby, and she passed away peacefully. The family had closure.



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As a trainee in neonatal-perinatal medicine, one of the fellowship requirements is the successful completion of a research project. I have always been fascinated to learn about how ultrasound can be used for quick clinical assessment. Having the POCUS machine in the NICU not only helped me with acquiring more ultrasound skills but also to conduct quality research using ultrasound. I am currently involved in two ultrasound-related research projects, one of which is nearing completion, and we are aiming to submit to the upcoming international conferences.



OUR HEARTFELT THANKS

Once again, on behalf of the entire team in the NICU at Children's Hospital and the babies and families they serve, please accept our heartfelt thanks for making the purchase of the POCUS possible. We hope this brief update provides you with a sense of the significant difference your grant has made.

FOR MORE INFORMATION, PLEASE CONTACT:



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