Intensive caring
How nurses like Sheri make a difference
page 12
Welcome to the Summer issue of MU Health, a magazine featuring stories about patient care, education and research at University of Missouri Health.

When I recommend MU Health Care to my family and friends, I know they will be in good hands. Compassionate nurses like Sheri Ardini, shown on the cover, care for patients as if they are their own family. Throughout this magazine, you’ll read about caregivers — nurses, doctors and others — who play vital roles in the health of individuals from mid-Missouri and beyond.

If you are looking for a family doctor, visit our primary care directory on page 18 for a listing of providers who are accepting new patients at clinics in Columbia, Fayette and Fulton. You’ll also read in this issue about our online portal, MU Health e, a convenient way to contact your provider online, anytime, anywhere.

You may have seen MU Health’s “YES Finds A Way” videos recently. This campaign highlights how we use YES at MU Health Care to make lives better through research, education and patient care. To learn more, please visit yesfindsaway.org.

As always, please feel free to share your stories or give feedback on our social media sites or at muhealth.org. I look forward to hearing from you.

Mitch Wasden, EdD
Chief Executive Officer
University of Missouri Health Care

Letters

More Access, Made Easy
Short on time but need to connect with your doc? Learn about online options.

Breakfast Club
Columbia girl visits pediatric ICU weekly, thanking her heros

Man of Many Talents
Roping calves, practicing judo and dancing are a few skills of cancer center director

Find A Doctor
Need a family doctor? Use this guide to select the primary care provider who is right for you and your family.

Match Illuminates Success
100 percent of MU medical students match with residency programs

Better Sleep, Better Behavior
Autism researchers study connection between sleep habits, acting out

Moving ‘Beyond Mere Conversation’ to Action
Gift will fund scholarships, ambassadors at MU Sinclair School of Nursing

Healthy Bites
Tips to add color to your grill, plus rosemary-peach chicken kebabs recipe

Vital Statistics
MU Health Care by the numbers

Highlights
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How friendships with patients motivate muscular dystrophy researcher

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Share your happiness. Our patients inspire us, and sharing your story can inspire others. If you would like to share your story, we’d love to hear from you! Visit muhealth.org and click “Feedback” at the bottom of the page, email websupport@health.missouri.edu or send a letter to: MU Health Magazine, Communications, DC028.00, 1020 Hitt St., Columbia, MO 65212.

LETTERS

Compassionate cancer nurses

“On my recent stay in the oncology unit, your nurses all did a great job caring for me. They were all very available but a few stood out to me — Matt took great care, Alexis also was great and Loretta was a very bright star.”

Christopher Laken
STOVER, MISSOURI

Orthopaedic doc impresses

“I would just like to say that I truly appreciate all the wonderful care, professional consultations and genuine and personal interaction I received from Dr. David Brogan.

“I feel he really went above and beyond the norm in my situation and am indebted to him for the wonderful care I received. Thank you from the bottom of my heart.”

Bruce McNulty
DIXON, MISSOURI

Superior emergency room

“It’s never fun to have to come into the emergency room. However, the staff at University Hospital’s ER made it far less unpleasant than it would have been otherwise. Dr. Brian Bausano saw us promptly and was patient and kind.

“Ashley M. was exceptional. Very helpful and right on the ball. She really went the extra mile and we are very appreciative. Sue took over shortly before we were moved upstairs and was excellent and friendly as well. Thank you for your superior help!”

Laura Lang
VENICE, FLORIDA

Back to tennis after bypass

“A little over a year ago, my husband, Dennis, had triple bypass surgery at University Hospital. Fortunately, he had not had a heart attack first. His primary care physician, Dr. Hal Williamson, suggested that he have a stress test after Dennis mentioned to him during a routine exam that he had noticed some shortness of breath on climbing stairs and similar activities. The cardiac catheterization indicated 75 percent blockage in a main artery and 50 percent in two others. Because of the location of the blockage, a stent would not work, so open heart surgery was necessary.

“Everyone at the hospital involved with Dennis was great. Dr. John Markley, after consulting with us and discussing what was to happen, performed the surgery in February 2015 and all went well. The nursing staff in the Cardiac Intensive Care Unit was top notch. Particularly, David (whose last name we don’t remember) was the go-to guy in the unit. He was attentive, efficient and positive.

“Dennis’ post-op care also was exceptional. Dr. Anand Chockalingam was available by phone for questions, and his staff called to check on Dennis’ progress. Bob Smith, Dr. Markley’s physician assistant, was helpful in answering post-op concerns. The staff at University Hospital’s rehab facility, Fit for Life, was both watchful and encouraging.

“The bottom line is that now Dennis is exercising regularly and playing tennis again … without being winded (at least not any more than any healthy 69-year-old would be). We are thankful for University Hospital’s physicians and staff and recommend the cardiac unit to anyone with heart difficulties.”

Sandy Stegall
COLUMBIA, MISSOURI

Praise for Missouri Orthopaedic Institute

“Dr. James Stannard and his crew are wonderful! My son had knee surgery after a football injury and Dr. Stannard told us he would have him playing back for district games and he did! Three weeks after surgery, he was back on the field. He just had a meniscus transplant and the entire MOI staff was awesome!”

Echo Foster
SHELBINA, MISSOURI

‘Amazing’ birth experience

“I had my son (third baby) at Women’s and Children’s Hospital in November. We were actually the first to use the low-intervention birthing room. Amazing. The rooms and our entire stay and all the care we received were amazing.

“We had some incredible nurses, both labor and delivery as well as postpartum. I was impressed at the nurses’ willingness to float between labor and delivery, pediatrics and postpartum. I know, for me, having the nurse who helped deliver my son be part of our postpartum team felt incredible.

“Lori Anderson was my midwife and was amazing. I cannot say enough good things about the hospital, our birthing team and our care. I would recommend anyone to deliver here if they can!”

Jill Markijohn
COLUMBIA, MISSOURI

To learn more about our Low-Intervention Birth Program, please visit muhealth.org/low-intervention.
More Access, Made Easy
MU Healthe resource connects patients with team, personal health information

Short on time but need to connect with your doc? Now you can get help online. Find quick and convenient service without picking up the phone, thanks to MU Healthe, an online portal where University of Missouri Health Care patients can securely view, save and share their personal health information, schedule appointments, communicate with physicians and more.

Dustin Viet, who works with development and maintenance of MU Healthe through the Tiger Institute for Health Innovation, said interest in the program continues to rise. Since 2012, more than 60,000 people created accounts online, and new patients join daily. In fact, between 1,700 and 2,000 mid-Missourians signed up in the final months of 2015 alone.

The site’s growing popularity, Viet said, is largely due to increased use by health providers as well as its convenience for patients. MU Healthe fits easily into patients’ day-to-day lives and allows them to access health information how and when they need it.

How to sign up for MU Healthe
If you are an MU Health Care patient and would like to sign up for MU Healthe, talk to your doctor or another member of your MU Health Care team. The staff member will email you an invitation with a link and instructions to create an account.

You also may sign up on your own at muhealth.org/patient if you know your medical record number, a unique number that identifies you in the electronic medical record. You can find this number on your departure summary, which is a document provided during hospital stays or clinic visits, or on a recent bill.

How MU Healthe works
Once you have an account, you can sign into the secure portal using a computer, tablet or smartphone. There, you can request prescriptions, schedule appointments, view lab results and reports, and read care notes.

Care notes are the records your health care team creates during your clinic visit or hospital stay. These notes sync with MU Healthe, so you can view the care team’s comments in the portal soon after your visit.

Not only is the portal a way for you to access your medical records, but you can also connect directly with doctors or nurses through secure messaging, phone calls or video conferencing.

“The nice thing about MU Healthe is that it is all of your MU Health Care providers, so they have all your medical history, and they know who you are,” said Tom Selva, MD, chief medical information officer for MU Health Care.

You will receive email alerts when new information or messages are added to your account.

Why access is important
Having access to personal health information allows you to become more involved in your health care. You can review your condition and refer to instructions from your care team. If you need to ask your doctor or nurse follow-up questions, you can do so easily and securely through the portal.

“At MU Health Care, we know that better health is a journey in which technology plays a bigger role than it ever has before,” said Mitch Wasden, EdD, chief executive officer of MU Health Care.

The MU network of hospitals and clinics has received many accolades for leading the way in technology among hospitals and health systems. In 2015, MU Health Care received the global HIMSS Enterprise Nicholas E. Davies Award of Excellence for health care technology innovations that are improving patient outcomes. For the fifth consecutive year, MU Health Care was also named among the nation’s “Most Wired” by the American Hospital Association’s “Hospitals & Health Networks” magazine.

To access your information, visit MU Healthe at muhealth.org/muhealthe.
When she steps onto the Pediatric Intensive Care Unit at MU Children's Hospital, Maya Quattrocchi is among friends. And it's not just because she's carrying two dozen doughnuts each time she visits.

The 8-year-old Columbia girl spent nearly two months in the unit after a March 2014 automobile accident. During that time, she developed lasting relationships with members of the care team who helped her recover from multiple traumatic injuries.

The story of her care and remarkable recovery is considered a shining example of how an intensive care unit should serve patients and was recognized in February 2016 with the ICU Heroes award from the Society of Critical Care Medicine.

Each Saturday since her discharge, Maya has visited the unit to thank “the angels” — the health professionals who were there when she needed them most.

“We come here every week to feed the angels,” Maya said. “I love coming here.”

Each week, those same health professionals who cared for Maya marvel at her recovery and are reminded why they chose careers in health care.

“In those visits she brings doughnuts to the entire unit and tells us all about her Barbie doll collection,” said Abdallah Dalabih, MD, the pediatric critical care physician who nominated Maya, her family and the care team for the award. “In her first visits, she had a significant limp. We were able to witness this changing to running in the hallways of the PICU and jumping to give high-fives and hugs to her nurses and doctors.”

From cardiac arrest to skipping outside

Maya was run over by a vehicle on March 30, 2014, when she was 6 years old. She was rushed to MU Health Care’s Frank L. Mitchell Jr., MD, Trauma Center with multiple bone fractures and injuries to her heart, lungs, esophagus, liver and kidney. She received multiple blood transfusions and underwent surgery to stanch severe blood loss. After she was stabilized, Maya was transferred to the MU Children’s Hospital Pediatric Intensive Care Unit (PICU).

Upon arrival at the PICU, Maya went into cardiac arrest. Her heart function returned after brief CPR, but this was just the beginning of what doctors called a “rough” two months.

Venkataraman Ramachandran, MD, a pediatric surgeon at MU Health Care, said he was unsure whether Maya would survive her injuries.

“On a scale of 1 to 10, with 10 being the sickest, she was a 9,” he said. “For the first two weeks, we didn’t have a lot of positive news, and we didn’t know if she would make it.”

Ramachandran said the care Maya received in the Pediatric Intensive Care Unit was a team effort and was built on the standards instituted by Frank L. Mitchell Jr., MD, a forefather of modern trauma care at MU. They are regularly refined by trauma surgeons at MU Health Care today.

“One person cannot do this,” he said, noting that dozens of people contributed to Maya’s care and rehabilitation.

Maya breathed with the assistance of a ventilator for four weeks, with the final two on minimal sedation, before receiving a tracheostomy. All told, she underwent more than 40 procedures during her 59 days in the unit.

Ramachandran, whom Maya calls “Uncle Ram,” performed more than 30 of Maya’s...
procedures. He said his young patient’s personality shined through during her time at the PICU.

“She was always bubbly and outgoing, and that’s what kept her going,” he said.

Audi Ruffel, RN, one of the nurses who cared for Maya, was on the receiving end of several hugs and high-fives during a recent visit. Ruffel said the care team, which numbered more than a dozen, did well, but the outcome might not have been the same with a different patient.

“We provided the care, but it was really Maya who did the hard work,” she said.

“Maya always exceeded our expectations.”

Heroes among us

Maya’s family traveled to Orlando, Florida, in February to receive the ICU Heroes award with hospital staff members. During the awards ceremony, which was part of the Society of Critical Care Medicine’s Critical Care Conference, Maya strode onto the stage confidently and gave the presenter a high-five before her parents and caregivers joined her. Maya and the ICU team leader were awarded “ICU hero” medals as well as plaques.

“There were hundreds and hundreds of doctors in the audience,” Frank Quattrocchi said. “She did great; I was bawling like a baby.”

Frank said his daughter loved the trip to Orlando, especially getting to see all of her friends from MU Children’s Hospital and getting to eat alligator for the first time.

Maya is like many other girls her age; she loves to dance, play with her Barbie dolls and watch movies. She’s an above-average student and attends school full time. The only visible signs of her ordeal are a few scars.

When Maya describes her long hospital stay, she likens it to a hotel where she watched movies and made new friends. She has no fear of the hospital and looks forward to bringing doughnuts to “the angels” every Saturday.

“I love it,” she said of the visits.

Carroll King, MD, marveled as she watched Maya skip around the unit during a visit in March. King was one of Maya’s doctors when she was a patient in the PICU.

“It’s amazing,” King said. “You can’t even tell she was severely injured. Maya is our totem for hope. When things are bad, we think of Maya.”
Man of Many Talents
Whether wrangling cancer or an opponent on the judo mat, Ellis Fischel Cancer Center’s director is driven to succeed

Ellis Fischel Cancer Center director Kevin Staveley-O’Carroll, MD, PhD, grew up in a small town in Oklahoma, where he learned how to work hard, strive for success and that you should listen to your mother — no matter how old you are.

It may be tempting to refer to him as Dr. O’Carroll, but take it from him — it’s not a mistake you want to make. At the behest of his mother, he and his five siblings were given the hyphenated surname to keep the Staveley family name alive.

“My very first day as an intern at Johns Hopkins Hospital, I decided I was just going to go as ‘Dr. O’Carroll,’” Staveley-O’Carroll said. “And the very first page I got, I answered, ‘This is Dr. O’Carroll.’ Sure enough, it was my mother, who was a doctor as well. She answered in a stern Irish accent, ‘It is not — it’s Dr. Staveley-O’Carroll.’ Well, that was the end of that.”

I went away to train at Johns Hopkins, and I fell in love with academic medicine. I was attracted to the idea of creating new therapies, doing research to see what therapies worked the best and training the next generation. I became very passionate about that during my time there, and that changed my whole career path.” – Dr. Staveley-O’Carroll

Staveley-O’Carroll is the son of two doctors, psychiatrists who emigrated from Ireland to Vinita, Oklahoma. Perhaps known more for its novel McDonald’s restaurant suspended above Interstate 44 than its medical community, Vinita was a childhood home to Staveley-O’Carroll. In the small ranching community, he grappled with calves and wrestlers alike, and in what would become his typical fashion, he excelled at both. At age 12, he won a national championship for calf roping and followed that up with a state wrestling championship in high school.

Staveley-O’Carroll left the plains of Oklahoma for South Bend, Indiana, to attend the University of Notre Dame, where he was recruited for wrestling, but he soon returned to the Sooner state. He earned his medical degree from the University of Oklahoma College of Medicine before being accepted as a surgery resident at Johns Hopkins in Baltimore. There, he refined his medical interests and completed surgical training, a PhD and a fellowship in surgical oncology.

“When I was in medical school, I very much wanted to be a small-town surgeon,” Staveley-O’Carroll said. “If you read my medical school yearbook, it says that I wanted to be a general surgeon raising a family on a ranch in a small town. I went away to train at Johns Hopkins, and I fell in love with academic medicine. I was attracted to the idea of creating new therapies, doing research to see what therapies worked the best and training the next generation. I became very passionate about that during my time there, and that changed my whole career path.”
Competitive edge

Staveley-O’Carroll joined MU in September as the Hugh E. Stephenson Jr., MD, Chair of Surgery and director of Ellis Fischel Cancer Center. Serving in multiple roles comes naturally to Staveley-O’Carroll. Prior to MU, he worked at the Medical University of South Carolina in Charleston, where he served as chief of oncologic and endocrine surgery, medical director of the Hollings Cancer Center, chair of clinical oncology and a medical school professor. Before that, he spent more than a dozen years at The Penn State University in Hershey, where he was chief of surgical oncology, director of multiple programs and a professor.

Staveley-O’Carroll’s work ethic is palpable, but the lifelong competitor has proven he still has an edge outside of the hospital, too. Although he finished his wrestling career at Notre Dame, his athletic drive took on a new form.

“For most of us, wrestling ends after school,” Staveley-O’Carroll said. “You don’t ever say to your friend, ‘Hey, let’s do takedowns this afternoon.’ Wrestling just isn’t a lifelong sport.”

But judo is another story. While taking his children to a judo lesson in Pennsylvania, Staveley-O’Carroll decided to join the adult class. Today, he has a black belt in judo and awards and titles in an array of combat competitions, including 2002 Eastern Open National Judo Champion; 2004 International Schuai Jiao (Chinese wrestling) Champion; 2005 Consolation Finalist at World Masters Judo Championship; and 2010 Masters, Advanced Division, Eastern National Submission Fighting Champion.

“I don’t know why I’ve always been so interested in sports like wrestling and judo, but I’ve always liked them,” Staveley-O’Carroll said. “To me, the movements are beautiful and elegant, almost like dancing or surgery.”

Innovation, research and a place to call home

Staveley-O’Carroll was attracted to Ellis Fischel Cancer Center because of its 75-year history and standing as the first cancer center west of the Mississippi River.

“The fact that it was established by a surgeon, Ellis Fischel, resonates with me,” Staveley-O’Carroll said. “It is an honor to get to participate in its future.”

He cites several key distinctions that set Ellis Fischel apart. For example, he said the center’s affiliation with the MD Anderson Cancer Network is “a real opportunity to develop state-of-the-art clinical infrastructure.”

Perhaps even more important, according to Staveley-O’Carroll, is Ellis Fischel’s position as one of six places in the country where the medical school, the veterinary school and the law school are located on a large research-based undergraduate campus. Faculty and students also have immediate access to agriculture and engineering colleges along with the country’s most powerful university nuclear research reactor.

“This depth and breadth of expertise gives us an enormous advantage in creating cancer research programs,” he said.

Staveley-O’Carroll wants to grow and solidify Ellis Fischel’s national reputation. Although it’s already home to many high-caliber specialists, he’s putting a focus on innovative clinical procedures, research and clinical trials.

As chair of the Department of Surgery, he hopes to bolster the faculty’s already-established programs, such as tumor immunology — one of his specialties. He also plans to grow the outcomes research program, simulation-based efforts and the biodesign program.

“I think physician scientists are key to our success,” Staveley-O’Carroll said. “Right now, we’re such a strong hospital that runs very, very efficiently, and we want to grow our national reputation.”

Although the judo champion hasn’t returned to the martial arts mat since moving to Columbia, Staveley-O’Carroll is settling into his roles at the hospital and medical school, saying he and his family have fallen in love with the mid-Missouri area since moving here in 2015.

“Columbia is just such a lovely place to live,” he said. “My wife and I walk downtown a lot, and we love to try the local restaurants. We’ve made a habit of going salsa dancing on Friday nights at the Tiger Hotel. Columbia really is our home now.”

FAMILY
Wife, Julie Staveley-O’Carroll; two sons, ages 23 and 22; and two daughters, ages 20 and 15

FAVORITE QUOTE
“Darkness cannot drive out darkness; only light can do that. Hate cannot drive out hate; only love can do that.” — Martin Luther King Jr.

FAVORITE MOVIES To Kill a Mockingbird and Big Country
FAVORITE BOOK A Course in Miracles
FAVORITE ACTOR Gregory Peck
FAVORITE MUSIC Country, salsa, the Saw Doctors and the Grateful Dead
IF I COULD TRAVEL ANYWHERE, I WOULD VISIT Chile
THREE WORDS TO DESCRIBE ME Compassionate, tenacious and driven
PERSON WHO GREATLY AFFECTED MY LIFE Mamma
Standing Strong
Ankle replacement helps retiree return to walking, fishing

As he was growing up, Bill Lewis of Macon, Missouri, watched his father build, paint and install signs to support his family — all with a wooden leg, the result of a motorcycle accident in 1924.

“I feel lucky to be 80 years old and see all the things I have in the medical world,” Bill said.

Fast forward nearly a century, and Bill is the proud recipient of a new ankle. Built of metal and plastic instead of wood, that ankle, he said, has restored his quality of life.

Before the replacement, Bill struggled to walk and stand without fear of falling because of pain in his right ankle. A new fishing dock sat unused because he was afraid he would topple into the lake.

“I’d get out of bed every morning and struggle to the kitchen table and then limp to the recliner,” Bill said. “I was hardly able to do anything.”

He knew he wanted an ankle replacement, and over the course of five years, he talked about it with family members and friends and met with several doctors. He and his wife of 60 years, Reba, knew they found the right surgeon when they met Kyle Fiala, DPM, at the Missouri Orthopaedic Institute. Fiala specializes in foot and ankle surgery.

“Few people think an ankle replacement is a possibility,” Fiala said. “Everybody knows about knees because knee replacements are so common.”

One reason ankle replacements are less common, Fiala said, is that only a small percentage of people meet the medical criteria for the procedure. Eligible patients must be age 55 or older. Good blood circulation is essential for success of the operation and long-term outcome, so the best candidates are patients who do not smoke and do not have diabetes. Weight is a factor, too. Because the ankle supports a person’s entire body and the components wear over time, ankle replacements are not recommended for patients weighing more than 250 pounds.

Fiala said with recent advances made in surgical techniques and implant parts, he anticipates physicians will recommend more ankle replacements, known as total ankle arthroplasty, in the future.

Surgery and recovery

Leading up to his surgery in October 2015, Bill underwent CT scans of his right foot and ankle, which were used for precise placement of the components in his new ankle. During the procedure at the Missouri Orthopaedic Institute, Fiala made an incision in the front of Bill’s ankle and recreated his
ankle joint using the metal and plastic components. The operation took about three hours.

"Dr. Fiala did a great job," said Bill, who stayed in the hospital for two nights. "We were satisfied from beginning to end with Dr. Fiala. I had very little pain and took just a few pain pills."

"Few people think an ankle replacement is a possibility. Everybody knows about knees because knee replacements are so common."

- Kyle Fiala, DPM

The next day, Bill checked into Rusk Rehabilitation Center, located just a few miles from the Missouri Orthopaedic Institute in Columbia, where University of Missouri Health Care doctors — specialists in physical medicine and rehabilitation — oversaw his recovery.

"Rusk was such a blessing," Reba said.

Doctors and physical therapists at Rusk Rehabilitation Center guided Bill through his recovery and exercises to get him back on his feet and ready to return home. He wasn't allowed to bear weight on his new ankle for six weeks, so he used a knee scooter to move around.

"They really worked well with me at Rusk, but I think maybe they thought I was too much of a hotrod with that scooter," Bill quipped.

After returning home, Bill attended physical therapy sessions until he was cleared at a follow-up appointment with Fiala in February. It was a long recovery, but Bill said it was worth it.

"They're really satisfied with the way I can bend my ankle and do everything now," he said. "This ankle replacement has worked great for me. I've been able to go around wherever I want."

Soon after returning home, Bill tested his stamina by taking a walk at one of his favorite places — a nearby hardware store.

"I'm in great health for a person my age," he said. "I want to start walking more and, of course, go fishing more. People say they don't think I'm older than 50 when they see me walking around."

MU’s Foot and Ankle Specialists

Don’t let painful feet or ankles keep you down. The specialists at the Missouri Orthopaedic Institute determine the best treatment for patients, ranging from nonsurgical care to surgery.

Conditions they treat include:

- Ankle arthritis
- Bunions
- Flat feet
- Foot or ankle pain
- Hammer toes
- Heel spurs
- Traumatic foot and ankle injuries
- Ankle arthritis
- Bunions
- Flat feet
- Foot or ankle pain
- Hammer toes
- Heel spurs
- Traumatic foot and ankle injuries

To make an appointment, please call the Missouri Orthopaedic Institute at 573-882-BONE (2663).
Intensive Caring

Longtime nurse applauded for compassionate care

When Sheri Ardini, RN, saw a 19-year-old patient at University Hospital and his sister overwhelmed and far away from home, she quickly stepped in to ease their nerves.

“My favorite part of my job is making people at ease,” said Ardini, who has worked at MU Health Care for 24 years. “When I met Max and Cassidy, there were so many coincidences that I had to take it as a sign I was supposed to be their surrogate mom.”

Max Goldner and Cassidy Goldner, 22, attend college at the University of Missouri in Columbia, more than 1,300 miles from their home in Duxbury, Massachusetts. On Feb. 1, Max became violently ill and quickly learned that he needed emergency surgery to have his appendix removed. Sheri soon welcomed them at University Hospital.

“Mrs. Ardini is very nice,” Max Goldner said. “I liked how she stayed with us even after she finished her shift. She made my sister and me feel more comfortable. She made the process feel more enjoyable — as enjoyable as a hospital stay can be.”

The coincidences Ardini shared with the Goldner siblings started with their hometown and didn’t end there. Ardini grew up in a neighboring Massachusetts town. Ardini’s husband and Cassidy, who transferred to MU, both attended the same college on the east coast. Ardini’s son, C.J., is also a sophomore at MU like Max. Both are members of the Theta Chi fraternity.

Inspired by the compassion she witnessed, Brown nominated Ardini for a DAISY Award for nursing excellence. Ardini’s coworkers clapped and cheered as she was surprised with the award at an impromptu ceremony at University Hospital on April 14.

“The role of the nursing profession is to be present. The nurse is the individual who is readily available, quickly called upon and responds, and advocates for the patient and the family on the needs observed, assessed or heard.” - Deb Pasch, RN

Nurses can be nominated in 19 categories. The MU Health Care nurses honored during the previous four years are:

Jennifer Hanford, RNC
2013 Critical Care Nurse of the Year
Gregory Alexander, RN, PhD
2013 Clinical Informatics Nurse of the Year
Sarah Cammack, RNC
2013 Critical Care Nurse of the Year

Tina Bloom, RN, PhD
2012 Women’s Health Nurse of the Year
To nominate an excellent MU Health Care nurse, please visit muhealth.org/daisy.

Before going home to Massachusetts for summer break, Max Goldner visits Sheri Ardini, RN, at University Hospital in May. Goldner said he appreciated Ardini’s compassion when he was in the hospital for emergency surgery in February.

Matt Waterman, director of surgical services, second from left, presented Sheri Ardini with the DAISY Award for nursing excellence April 14 at a surprise ceremony with her coworkers.

Are you a nurse interested in joining MU Health Care? Discover the difference YES can make in your career. Apply today at muhealth.org/nursing.

for the patient and the family on the needs observed, assessed or heard. Each health care profession certainly has an integral role in the caring for the members of our community. Nurses, however, enjoy the touch points and seeing the difference they make in the lives of others.”

The DAISY Award’s history is rooted in patient appreciation. The family of J. Patrick Barnes, who were impressed with the clinical skills and compassion of the nurses who cared for Patrick, created this international award to thank nurses everywhere. Patrick died of an autoimmune disease at the age of 33. DAISY is an acronym for “diseases attacking the immune system.”

Lori Lampe, RN
2014 Pediatric Nurse of the Year

Sue Scott, RN, PhD
2014 Infection Control and Quality Risk Management Nurse of the Year

Jean Sword, RN
2014 Surgical Services Nurse of the Year

Heather Dennis, RN
2015 Pediatric Nurse of the Year

Helen Jankowski, RN-BC
2015 Clinical Informatics Nurse of the Year
“DR. DUAN IS THE IDEAL PERSON YOU WANT RESEARCHING ANY TYPE OF DISEASE. HE IS EXCEPTIONALLY RATIONAL, EXTREMELY WELL-TRAINED, AND HE NEVER FORGETS THE PERSONAL ELEMENT OF IT.” – BOB MCDONALD, MD
It’s Personal
Friendships with patients motivate researcher to find a cure for Duchenne muscular dystrophy

It’s a milestone moment for all parents: the moment their baby lets go of the hands that have supported him through months of wobbly shuffles and takes his first steps on his own. But as Bob and Annette McDonald watched — and waited — for their son Mark to take his first steps, they feared it was a developmental milestone that would never come.

Parents to eight other children, the couple knew something wasn’t right, even when the pediatrician told them not to worry. Mark wasn’t walking because he had older siblings carrying him around, the doctor said.

But Bob, a University of Missouri School of Medicine alumnus who has served as a clinical faculty member at the school, wasn’t satisfied with the doctor’s explanation for Mark’s delays. “We had a large cohort — a collection of people to compare to — having nine kids, and it was apparent that Mark was a little bit behind,” Bob said. “I was worried he might have a neuromuscular disease, and the one I was most fearful of was Duchenne. I was hoping I was wrong.”

A blood test confirmed Bob’s suspicion — 2-year-old Mark received a diagnosis of Duchenne muscular dystrophy. Mark began walking only a short time earlier at 19 months. “It’s been tough for the family,” Bob said. “You go along in life. It’s not always easy. But when all of a sudden, one day, you get that diagnosis, it affects everybody.”

Duchenne muscular dystrophy (DMD) is the most common form of muscular dystrophy, a group of diseases characterized by muscle weakness. It primarily affects boys, and, in most cases, symptoms appear between the ages of 2 and 5. As the disease progresses, many kids lose the ability to walk. Eventually, muscles in the heart and lungs stop working. Many with Duchenne don’t live past 18.

In medical school, Bob studied DMD and knew the bleak outlook for kids with the disease. He began researching Duchenne intensely and, to his surprise, found an article by researcher Dongsheng Duan, PhD, at MU.

Bob, a head and neck surgeon in Jefferson City, drove to Columbia to meet with Duan. That was eight years ago. Since then, their friendship has grown — and so has Duan’s research.

Duan’s goal is to cure the disease at the genetic level before symptoms ever take hold. He’s successfully treated dogs with Duchenne, and the next step is translating the treatment to humans. Although a cure still could be years away, he’s confident he’s on the right path.

Muscular dystrophy is caused by gene mutations, and kids with Duchenne have a specific gene mutation that interrupts the production of dystrophin, a protein that maintains muscle integrity. Without dystrophin, muscle cells become weak and eventually die.

Through gene therapy, Duan replaces the faulty genes with healthy ones. Dystrophin is tricky to replace, though, because of its large size. It is an incredibly long gene, containing nearly 10 times the amino acids of a typical human protein. “Due to its size, it is impossible to deliver the entire gene with a gene therapy vector, which is the vehicle that carries the therapeutic gene to the correct site in the body,” Duan said. “Through previous research, we were able to develop a miniature version of this gene called a microgene.”

It has taken Duan’s team more than a decade to find a method to successfully distribute the microgene to all affected muscles in dogs. Like humans, dogs develop DMD naturally. Because of the similarity in size between dogs and small children, successfully treating dogs with DMD offers hope for treating the disease in humans.
In a study published last fall, Duan’s team showed how a common, harmless virus effectively carries the microgene to all muscles in the bodies of diseased dogs. “The virus we are using is one of the most common viruses; it is also a virus that produces no symptoms in the human body, making this a safe way to spread the dystrophin gene throughout the body,” Duan said. “It’s important to treat DMD early before the disease does a lot of damage, as this therapy has the greatest impact at the early stages in life.”

The researchers injected puppies with the virus carrying the corrected microdystrophy gene when the dogs began displaying symptoms of DMD at about 2 to 3 months of age. Those same dogs, now nearly 1 year old, still are developing normally.

Duan said he is pleased with the results and eager to translate his findings to kids with DMD. He said human trials could begin in a few years.

Pathway to a cure

Now 11, Mark McDonald is a “funny, happy-go-lucky kid” who loves to swim and play with Legos, his dad said. “Mark has a lot of good things going for him,” Bob said. “He has a horrible disease, but it doesn’t have him.”

Coincidentally, Mark and Duan share something special: Christmas birthdays.
“Every birthday, Mark sends me a birthday card, handwritten,” Duan said. “We are birthday buddies. We have become good friends.”

Bob confirmed the friendship.

“Every birthday, Mark sends me a birthday card, handwritten,” Duan said. “We are birthday buddies. We have become good friends.”

Bob confirmed the friendship.

Mark's birthday cards are displayed in Duan's office, along with pictures of other families and friends affected by muscular dystrophy.

“Especially when you see patients, you become friends of theirs and the families,” Duan said.

Another of those friends is Lixing Reneker, PhD, associate professor of ophthalmology at the MU School of Medicine. Reneker's son, Joe, 18, is a freshman engineering student at MU. He also has muscular dystrophy.

“He knows all our struggles,” Lixing said of Duan. “He constantly is telling me our story inspired him to work harder. When you have a close friend who has a son with a disability related to what his research is and what he can accomplish, it adds more meaning to what he's doing.”

Duan remembers telling Joe about his research on treatments for muscular dystrophy.

"I told Lixing's son that the cure is around the corner," Duan said. "Then a few years later, her son asked me, 'How big is that corner?'"

Duan said it can be difficult for him to see patients and their parents who are waiting for a cure. But it's motivating, too. “The parents want it to be cured tomorrow,” Duan said. “I'm so glad that, along the way, we have identified different problems and tried and solved problems, and now we're so close. One day, we're going to get to there.”

Bob said he's confident in Duan and his abilities.

“From the time we diagnosed Mark until now, it's amazing the stuff that is available and what is on the horizon," he said.
Need a family doctor? MU Health Care can help.

We offer several locations in Columbia as well as clinics in Fulton and Fayette. Use this guide to help you select the provider who is right for you and your family.

FAIRVIEW GENERAL INTERNAL MEDICINE CLINIC
101 South Fairview Road, Columbia, MO 65203
(573) 882-4464

KATHERINE AUSTIN, MD
LAURA HENDERSON, MD
NANCY MABE, MD
TURI MCNAMEE, MD

WOODRAIL GENERAL INTERNAL MEDICINE AND PEDIATRICS CLINIC
1000 W. Nifong Blvd., Building 3, Suite 130 Columbia, MO 65203
(573) 884-2356

CLAYTON BUTCHER, MD
ABIGAIL EMERSON, MD (patients up to age 24)
ROBERT LANCEY, MD
STEVEN KEITHAHN, MD (patients up to age 24)
FAMILY MEDICINE-CALLAWAY
110 N. Hospital Drive
Fulton, MO 65251

(573) 642-5911

LAURA MORRIS, MD
JAMES STEVERMER, MD
JACK WELLS, MD

FAMILY MEDICINE-FAYETTE
308 S. Church Street
Fayette, MO 65248

(660) 248-2217

ROBERT BUFFALOE, MD
KEVIN FRAZER, MD

To learn about the education and expertise of physicians listed in this directory, please visit muhealth.org/providers and type a provider’s name in the search box.
FAMILY MEDICINE-KEENE
305 N. Keene Street, Columbia, MO 65201

(573) 882-8000

OVAIS HASAN, MD
NATALIE LONG, MD
SONAL PATIL, MD
LYNN WUNG, MD

FAMILY MEDICINE-SMILEY LANE
2325 Smiley Lane, Columbia, MO 65202

(573) 884-8980

JOSEPH BECKMANN, MD
SARAH CALHOUN, MD
MELINDA HECKER, MD
PETER KOOPMAN, MD
RICHELLE KOOPMAN, MD
JAMIE OGDEN, MD
CARIN REUST, MD
CASEY WILLIAMS, MD
To learn about the education and expertise of physicians listed in this directory, please visit muhealth.org/providers and type a provider’s name in the search box.
University of Missouri School of Medicine students simultaneously ripped open the sealed envelopes that contained their fates as future doctors on March 18 during the school’s annual Match Day.

The school’s gallery was overwhelmed with hugs, high-fives and tears from families and friends as fourth-year medical students celebrated the start of a new chapter in their lives.

Match Day is one of the most anticipated and exciting days for the 85 fourth-year medical students at MU and thousands more nationwide. It’s the day they find out where they will spend the next several years in their first jobs as physicians, training in their chosen specialties.

The 2016 class of medical students from the MU School of Medicine was highly sought after: 100 percent of the class received a residency program match, meaning many hospitals and health systems chose graduating MU medical students as their top residency candidates.

At 100 percent, the number of MU School of Medicine graduates matched with residencies is above the national average match rate of approximately 94 percent.

The MU School of Medicine filled all of its residency positions in the match. Many of those physicians – 30 percent of MU School of Medicine’s class of 2016 – will stay on the MU campus for their residency training.

Forty percent of the MU School of Medicine 2016 class will remain in Missouri, and 42 percent of this graduating class selected residency programs in high-need primary care fields, including internal medicine, pediatrics and family medicine.

The National Resident Matching Program conducts an annual match process designed to optimize the choices of medical students and residency program directors. Students rank their residency program choices in order of preference, and program directors rank students. In the third week of March, results of the matches are announced. More than 42,000 medical school graduates compete for approximately 30,000 residency positions each year.
A recent study from MU shows that better sleep could lead to better behavior for kids with autism spectrum disorder (ASD). Children with autism often have trouble sleeping at night, which can make it hard for them to control their behavior during the day. Micah Mazurek, PhD, led a research study finding clear associations between trouble sleeping and behavioral problems in kids with ASD.

“Research on children without autism has found that lack of sleep can contribute to these behavioral problems,” said Mazurek, an assistant professor of health psychology in the MU School of Health Professions and the Thompson Center for Autism and Neurodevelopmental Disorders. “In this study, we were specifically interested in whether sleep is related to challenging behavior in children with autism.”

To study the connection between sleep and behavioral problems, Mazurek and co-author Kristin Sohl, MD, associate professor of child health, surveyed parents of 81 children with autism. They examined common sleep problems, including trouble falling asleep, trouble staying asleep and other specific sleep issues. Then they examined whether these issues were related to common behavioral problems in kids with ASD, including aggression, irritability, inattention and hyperactivity.

The researchers also found that children who awakened frequently throughout the night had the most trouble regulating their behavior. The research on sleep and behavior in children with ASD is ongoing, and future research will examine what could be causing these difficulties and which treatments may work best. In the meantime, Mazurek and Sohl encourage parents to talk to their doctors about their children’s sleep.

“If parents are noticing that their children are having behavioral problems, it may be helpful to make sure they are sleeping well at night,” Mazurek said. “For all children with ASD, it is important that parents and professionals routinely screen for sleep problems. Addressing these issues will help children be at their best during the day.”

The Journal of Autism and Developmental Disorders published Mazurek and Sohl’s study, “Sleep and Behavioral Problems in Children with Autism Spectrum.” An Autism Speaks cooperative agreement funded the research, which Mazurek and Sohl conducted through the Autism Speaks Autism Treatment Network.

The MU Thompson Center is a national leader in confronting the challenges of autism and other developmental conditions through its collaborative research, training and service programs. Based on the medical home model, MU Thompson Center’s diagnostic, assessment and treatment services emphasize family-centered care that is comprehensive, coordinated, compassionate, culturally sensitive and accessible. The center aims to support families from the point of initial contact through access to needed services in the community with routine follow-up care over time to ensure the best possible outcome for children and their families.
When he entered into the traditionally “female” field of nursing in the 1970s, Gregory Lind experienced firsthand what it feels like to be in the minority. According to Lind, the Sinclair School of Nursing has long supported diversity and inclusivity. Now he and his wife, Diane, are helping to foster that positive, healthy environment — with a gift that helps nursing students today, in order to provide better care for patients tomorrow.

The Linds gave a $122,500 gift to the University of Missouri Sinclair School of Nursing in 2015, creating the Gregory and Diane Lind Diversity in Nursing Program. It is aimed at establishing scholarships for underrepresented minority students pursuing undergraduate degrees in nursing. Research shows that health care staff with diverse backgrounds improves care quality and patient satisfaction, plus increases job satisfaction and staff retention.

A Seattle resident, Lind said his gift is meant to help create a sense of belonging for all nursing students at MU.

“It is evident that many people are reluctant to talk about race, and even when they do, it is difficult to move into action,” Lind said. “With this gift, Diane and I hope to move beyond mere conversation into real action.”

Lind also hopes to build on the ideals of his alma mater.

“The Sinclair School of Nursing has long been a place of diversity and inclusivity, and we want to help continue and expand that tradition,” Lind said. “All students deserve a sense of belonging, to feel safe and nurtured in their educational environment. Hopefully this gift will help foster that among nursing students.”

The Lind Diversity in Nursing Program will provide financial awards for underrepresented minority nursing students who complete a two-credit elective course on academic success. It also will provide annual stipends to student ambassadors to serve as coaches and mentors for underrepresented minority nursing students.

With its goals in place, the programs and scholarships officially rolled out in the spring 2016 semester. Judith Fitzgerald Miller, PhD, RN, dean of the MU Sinclair School of Nursing, said this gift will help support increased diversity within the school.

“All students deserve a sense of belonging, to feel safe and nurtured in their educational environment. Hopefully this gift will help foster that among nursing students.”
- Gregory Lind

“Enhancing diversity is one of the core values of the Sinclair School of Nursing,” Miller said. “This program will provide financial assistance, support with implementing an academic success course as well as funding for diverse student ambassadors who will provide ongoing student mentoring. The Linds have a longstanding commitment to the Sinclair School of Nursing. We are thrilled and so grateful for their support.”

The first student to graduate from the University of Missouri’s master’s program in nursing, Lind entered the nursing field in 1980 with a specialty in family health. He has been an active member of the Sinclair School of Nursing Dean’s Advisory Council and the Capital Campaign Steering Committee and received a Citation of Merit award from the school in 2010. As an advanced registered nurse practitioner, he began his own primary care-based walk-in clinic in 1990, which currently serves more than 70 patients a day. He also provides wellness exams for firefighters at Snohomish County Fire District 1 in Everett, Washington.
**Healthy Bites**

Add color to your grill this summer and nutrients to your backyard meal.

“This year, try expanding your menu past hot dogs and hamburgers and try a recipe for kebabs,” said Aftan Bryant, RD, LD, CDE, a clinical dietitian at MU Health Care. “Kebabs are a great way to include fruit and vegetables. The more colorful the kebob is, the better — so load up on any fruit or vegetable you like with a lean protein.”

**Lean proteins that work well on the grill include:**

- Chicken
- Fish
- Extra firm tofu
- “Loin” and “round” cuts of beef and pork
- Turkey burger

“Don’t be afraid to put fruit on the grill,” Bryant said. “Peaches, pineapple and plums all add great flavor to a dish and loads of vitamins and minerals.”

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**Rosemary-Peach Chicken Kebabs with Orange Glaze**

**MAKES** 4 kebabs  
**NUTRITION** Per serving (1 kebab): 202 calories, 5 g fat, 73 mg cholesterol, 206 mg sodium, 14 g carbohydrates, 25 g protein

1 lb. boneless, skinless chicken breasts, cut into 16 1 1/2-inch pieces, all visible fat discarded  
2 large peaches (ripe but firm), cut into 16 1-inch wedges  
1 large green bell pepper, cut into 16 1 1/2-inch squares  
1/4 tsp. pepper  
1/8 tsp. salt  
Cooking spray  

Glaze:  
3/4 tsp. grated orange zest  
3 Tbsp. fresh orange juice  
3 Tbsp. chopped, fresh rosemary  
1 1/2 tsp. honey  
1 1/2 tsp. canola or corn oil

1. Lightly spray the grill rack with cooking spray. Preheat the grill on medium.
2. Meanwhile, thread the chicken, peaches and bell pepper alternately onto four 14- to 16-inch metal skewers. Sprinkle the pepper and salt over the kebabs.
3. In a small bowl, whisk together the glaze ingredients. Set aside half the glaze (about 2 tablespoons). Brush both sides of the kebabs with the remaining glaze.
4. Grill the kebabs for 6 to 8 minutes, or until the chicken is no longer pink in the center and the vegetables are almost tender, turning once halfway through and brushing with the reserved 2 tablespoons of glaze, using a clean basting brush. Reduce the heat or move the kebabs to a cooler area of the grill if they are cooking too fast.
By the Numbers in 2015

Missouri’s premier academic medical center began when University Hospital opened in Columbia in 1956. Today, University of Missouri Health Care comprises five hospitals and more than 50 clinics. Patients from every county in Missouri and the city of St. Louis received care at MU Health Care in fiscal year 2015.

Statistics are reported for Fiscal Year 2015, from July 1, 2014, to June 30, 2015.

195,694 TOTAL PATIENTS

191,293 MISSOURIANS
4,401 OUT-OF-STATE

Our patients came from all 50 states and Washington, D.C., plus 5 countries outside the United States. 🚑 = 10,000 patients

538 BEDS
INTENSIVE CARE: 139
ACUTE CARE: 399

HOSPITALS

• Ellis Fischel Cancer Center
• Missouri Orthopaedic Institute
• Missouri Psychiatric Center
• University Hospital
• Women’s and Children’s Hospital

5,917 TOTAL STAFF
MEDICAL STAFF 618
OTHER STAFF 5,299

25,749 ADMITTED PATIENTS

6 MILLION PHARMACY ORDERS

2,495 CARDIAC CATHETERIZATION PROCEDURES
71,962 Emergency and trauma center visits

576 PATIENTS TRANSPORTED BY HELICOPTER

614,133 CLINIC VISITS (all sites)
279,655 RADIOLOGIC EXAMS AND TREATMENTS
23,472 MAJOR SURGICAL OPERATIONS
1.7 million LABORATORY TESTS

Statistics are reported for Fiscal Year 2015, from July 1, 2014, to June 30, 2015.

‘Most Wired’
University of Missouri Health Care is recognized as one of the nation’s “Most Wired” health systems, according to the 2015 Most Wired Survey. The survey was released in the July issue of the American Hospital Association’s “Hospitals & Health Networks” magazine, which recognizes hospitals making progress in adoption of information technology. MU Health Care also was named “Most Wired” in 2011, 2012, 2013 and 2014.

HIMSS Enterprise Nicholas E. Davies Award of Excellence
In 2015, University of Missouri Health Care received the global HIMSS Enterprise Nicholas E. Davies Award of Excellence for health care technology innovations that are improving patient outcomes. HIMSS — which stands for the Healthcare Information and Management Systems Society — is a global not-for-profit organization focused on better health through use of information technology.

Top in technology
University of Missouri Health Care has been recognized nationally for enhancing patient care through information technology.
Personalized drops offer new solution for dry eyes

People with severe dry eyes will see an average of five physicians before they find relief, according to experts at University of Missouri Health Care. MU Health Care is the only provider in mid-Missouri to offer patients a new solution — one personalized to their eyes.

“Artificial tears are a short-term fix, and many people with dry eyes need a better option,” said Frederick Fraunfelder, MD, director of MU Health Care’s Mason Eye Institute and chair of the Department of Ophthalmology at the MU School of Medicine. “With new autologous serum eye drops, which are made from properties found in a patient’s own blood, patients can get long-lasting relief without the irritation often associated with eye drops.”

Eyes naturally become drier with age, though individuals with conditions such as diabetes, rheumatoid arthritis or Sjögren’s syndrome, or people who take antihistamines or blood pressure medicine, are more prone to developing dry eyes. Dryness causes discomfort, and if left untreated, can result in ulcers, or craters, on the eye. If infected, these ulcers can cause vision loss.

“Dry eyes can be a temporary or chronic condition, but they aren’t something to be ignored,” Fraunfelder said. “After a simple blood draw at any one of our labs, we deliver the patient’s blood to Saving Sight, a local eye bank, where they extract the viscous serum from the blood. This serum is then mixed with a saline solution and delivered to the patient, usually in less than a week from their blood draw. The results are tremendous, and these really are the ultimate in personalized eye care.”

A supply of autologous serum eye drops generally lasts a patient two to three months, depending on the severity of their dry eyes. Because they are preservative-free, the drops must be stored frozen. Once thawed, the drops last one week and should be refrigerated when not in immediate use.

As part of its mission to save sight, Saving Sight works with physicians to provide autologous serum eye drops to patients throughout Missouri.

Community chips in for kids

The mid-Missouri community rallied behind MU Children’s Hospital and answered the call to be miracle makers, giving more than $185,000 during 10th annual Missouri Credit Union “Miracles for Kids” radiothon held March 17-18.

During the radiothon, MU Children’s Hospital patients and parents shared their stories of health and healing after unexpected diagnoses and injuries. All spoke about the caregivers at MU Children’s Hospital who helped make miracles happen.

MU Children’s Hospital teamed up with Children’s Miracle Network, the Missouri Credit Union and Zimmer Radio Group to host the fundraiser. Local Zimmer radio stations 93.9 FM The Eagle, 94.3 FM KAT Country, 99.3 FM Clear 99 and 106.9 FM Y107 broadcast the radiothon live from the lobby of MU Women’s and Children’s Hospital.

All proceeds from the radiothon stay at MU Children’s Hospital to help local patients. Children’s Miracle Network is a year-round fundraising program for hospitals providing health care for children. Created by the Osmond Foundation in 1983, Children’s Miracle Network includes 170 hospitals nationwide, with five in Missouri.

MU Children’s Hospital is the largest and most comprehensive pediatric health care center in mid-Missouri. It is the only facility in the area offering comprehensive, specialized children’s services such as neonatal transport, child life therapy, a pediatric intensive care unit, and a pediatric hematology and oncology outpatient unit.
When a severe knee injury put Adyson Sullivan’s walk down the aisle at risk, the Mizzou BioJoint team at Missouri Orthopaedic Institute vowed to do something about it. With their breakthrough BioJoint surgery, they utilized biological solutions developed and only available at Mizzou to allow Adyson to experience her dream—and make her first dance one to remember.

Find out if BioJoint is right for you. Visit MIZZOUBIOJOINT.COM or call (573) 884-3077