

HOPE

2025 YEAR IN REVIEW

HOPE IN ACTION

Highlights from a year of milestones, innovations, discovery and community

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HOPE



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**Chair of the Department
of Pediatrics, System Pediatrician-in-
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Juan C. Salazar, MD, MPH

**Surgeon-in-Chief and Chair of the
Department of Pediatric Surgery**

Jeffrey Upperman, MD

Senior Vice President for Development

Mary Beth Thompson

Editor

Christina Echegaray

Contributors

Danny Bonvissuto, Evan Dorian, Christina Echegaray, Nancy Humphrey, Jessica Pasley, Sarah Thornton, Paige Turner

Director of Publications

Christina Echegaray

Photography

Evan Dorian, Donn Jones, Erin O. Smith,
Susan Urmey

Design and Art Direction

Diana Duren

Executive Director of Digital Media

Wayne Wood

Advisory Board Members

The Monroe Carell Advisory Board is an advocacy, fundraising and advising group.

Members educate constituents in the community and do outreach to secure resources to support the mission of

Monroe Carell. Learn more at VanderbiltHealth.org/advisoryboards.



Celebrating
another
stellar year
of awards and
recognitions.



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Webb Puricelli has navigated numerous blood tests, infusions and hospital stays for his rare lung disease. Read on page 16 how his family is giving back to support research. Photo by Erin O. Smith.

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The doctors, nurses and staff at Monroe Carell who dedicate their lives every day are such an inspiration.”

- KIX BROOKS, PAGE 20

THOUGHTS ON HOPE

MISSION MOMENT

Meg Rush, MD, MMHC

Retired President, Monroe Carell Jr.
Children's Hospital at Vanderbilt



As you open the pages of this edition of *Hope*, you will find familiarity and also see signs of change. Several months ago, at my last town hall for Monroe Carell team members, I spoke about transitions and the opportunities they bring. I have had the true honor of serving as a senior leader at Monroe Carell for 18 years and have contributed to this publication through

Jamie Phillips, MHA, FACHE

President, Monroe Carell Jr.
Children's Hospital at Vanderbilt



It is with great honor, profound humility and genuine excitement that I step into the role of President of Monroe Carell Jr. Children's Hospital at Vanderbilt.

For countless families, this hospital is much more than a medical facility — it is a sacred space, a promise of hope, a source of unwavering strength, and a compassionate partner during your family's most challenging and most triumphant moments. That promise, which came before me, will continue, and I am honored to now lead an institution committed to ensuring every child has the opportunity to grow, thrive and dream without limits.

this letter for most of those years. We have shared stories of hope through the lens of our patients, families and our health care heroes who deliver excellence through care delivery, discovery and education. As you read through these pages, you will find these familiar stories, highlighting just some of 2025. This edition also marks my transition, as I closed out 2025 with retirement. So, as I write to you for the last time, I share these reflections.

You are the community that has embraced Monroe Carell, helping us build programs, grow the hospital and clinics — not once, but twice during my tenure — strengthen our ability to train specialists, and ensure we can continue cutting-edge research. Your efforts helped us mature from a new children's hospital to a nationally ranked and well-respected leader in children's health care, ranking again as the No. 1 children's hospital in Tennessee for the 19th consecutive year and breaking into No. 20 nationally in 2025. This is a remarkable achievement for a hospital that is only 22 years old in its current structure.

My leadership philosophy is deeply rooted in the belief that true excellence begins with listening. I am inherently a listener, guided by the conviction that understanding the experiences of those on the front lines of care is the foundation for breakthrough achievements. I thrive on building collaborative environments where empathy, transparency and clinical brilliance converge. What truly drives me is the profound responsibility we share — to transform moments of challenge for a child and their family into enduring hope and healthier tomorrows — a mission that continually fuels my dedication and energy.

Looking ahead, my excitement for our future in serving children and families is boundless. We stand at the precipice of remarkable advancements, and my vision is to amplify the impact we already have across the region and beyond. We will continue to invest heavily in the discovery and implementation of innovative treatments, ensuring that our patients have access to the most advanced care available. This includes expanding our clinical footprint and leveraging cutting-edge technology to improve the patient experience, making the path to healing as smooth and supportive as possible.

However, the future is not solely about technology and buildings; it is about people. It

You are the community that surrounds us with care when we need it (think COVID-19 pandemic) and nudges us when we need to fill a gap in care for children (think pediatric inpatient rehabilitation and behavioral health). You are the community that always stands by us and responds.

You have heard me say that we truly can't do our work without you. I have been blessed with a rich career, and this last chapter has been truly amazing. I am so grateful to this community for your commitment to children. Through your unwavering support, you have enabled our hearts, minds and hands to provide hope and healing every day. I look forward to joining this community of supporters and watching others continue this amazing story as we transition to your new President, Jamie Phillips.

With heartfelt gratitude to you and wishes for a wonderful 2026,



is about supporting our incredible nurses, physicians, researchers and team members, who are the true heart of Monroe Carell. It is about actively listening to our families and integrating their voices into how we evolve our care models. We will continue to champion a holistic approach to health, recognizing that emotional, mental and physical well-being are all interwoven in a child's journey toward recovery and lifelong health.

We are entering a promising new era, one defined by collaboration, discovery and an enduring commitment to the singular promise of providing hope and healing. As my husband, Greg, and I settle into Nashville, we look forward to becoming deeply involved in this vibrant community. We are excited to partner with all of you — our patients, families, donors and the broader community — to ensure Monroe Carell remains the premier destination for pediatric care.

I am eager to begin this journey and work side by side with you.

With heartfelt hope and commitment to the future,



Children's Heart Care

At Monroe Carell Jr. Children's Hospital at Vanderbilt



Cardiovascular birth defects in Tennessee have increased nearly 40% in recent years, driven by the state's population boom.



One of the busiest pediatric cardiac surgical programs in the country

Each year, our program sees approximately: **20,000+ children** served at our 10 satellite clinics



840+
hospitalizations

46
children each day



500 cardiac surgery patients, including 16 heart transplants

1,150+
catheterization and electrophysiological studies



26,000
echocardiograms and **2,000+** fetal echocardiograms

MILESTONE MOMENTS

A YEAR OF CELEBRATIONS

From left: Meg Rush, MD, MMHC, and Jamie Phillips, MHA, FACHE, attend a recent Children's Hospital Association meeting.



SUBMITTED PHOTO

Passing the baton

[Meg Rush, MD, retires after 41 years; Jamie Phillips named next President of Monroe Carell Jr. Children's Hospital at Vanderbilt](#)

After more than four decades of service, Meg Rush, MD, MMHC, President of Monroe Carell Jr. Children's Hospital at Vanderbilt, retired Dec. 31, 2025. She spent her entire career at Vanderbilt Health, beginning as a neonatology resident in 1984 and rising through leadership roles to become President of Monroe Carell in 2020. Rush's tenure was marked by unwavering commitment to children's health and transformative growth for Monroe

Carell. Under her leadership, the hospital earned national recognition as Tennessee's No. 1 children's hospital and shared the top spot for the Southeast region for five consecutive years in *U.S. News & World Report* rankings. Monroe Carell also achieved Leapfrog Top Hospital status in 2025, a distinction held by only 15 children's hospitals nationwide.

Rush guided major expansions, including a four-floor, 160,000-square-foot addition completed in 2025, and championed initiatives such as Tennessee's first pediatric inpa-

tient rehabilitation unit for children under 13. Today, Monroe Carell serves more than 1,800 children daily across 30 off-site locations.

“It’s really a pretty simple recipe: I believe what’s most important is staying anchored in the mission, our why — to provide excellent clinical care and support of children who come to us for their health needs — and caring for and connecting with each other as caregivers,” she said. “And this is more than just a place you come to work — it is a special place of hope.”

Rush’s contributions earned numerous honors, including recognition as a “Woman to Watch in Medicine,” a Top 10 Woman in Business, and Distinguished Alumni from the University of Cincinnati College of Medicine. While retiring from her official role, Rush plans to continue advocating for children’s health.

Jamie Phillips, MHA, succeeded Rush as President on Jan. 12. Phillips brings nearly 30 years of health care administration experience, most recently as President and System Chief Operating Officer at Seattle Children’s Hospital. She previously held leadership roles at UCSF Benioff Children’s Hospitals, Nationwide Children’s Hospital, and Cincinnati Children’s Hospital Medical Center. Phillips earned her Master of Health Administration from The Ohio State University and is a fellow of the American College of Healthcare Executives.

“I am truly honored to join this remarkable team of professionals committed to providing compassionate care and advancing innovative research,” said Phillips. “I want to acknowledge the extraordinary leadership of Dr. Meg Rush, whose decades of service built a foundation of excellence and compassion. My goal is to carry this legacy forward while working alongside all of you to reimagine care, research and innovation for the children and families we serve.” 🦋



“This is more than just a place you come to work – it is a special place of hope.”

– MEG RUSH, MD, MMHC

Cancer center renovations in progress

Monroe Carell Jr. Children’s Hospital at Vanderbilt efforts to expand and renovate its pediatric and adolescent cancer care spaces are underway, thanks to generous community support through the “Campaign Against Childhood Cancer.”

Once complete, the project will create a dedicated sixth-floor outpatient area with 25 private infusion rooms, 25 exam rooms, and family-friendly features like a consult room, Child Life space, and nutrition area. Designed with input from patients and families, the new space offers privacy while allowing social interaction through adjustable partitions.

Inpatient areas are also being modernized with brighter lighting, updated cabinetry, and improved parent accommodations. This expansion addresses a growing patient population — up from 90 new cases in 2008 to 250–300 annually — and supports research and training initiatives. Renovations will enhance efficiency, comfort, and morale for patients, families and staff, making cancer treatment more age-appropriate and compassionate. 🦋

Monroe Carell reaches new heights — final floor complete

Ten years after launching the Growing to New Heights Campaign, Monroe Carell Jr. Children’s Hospital at Vanderbilt has completed its four-floor expansion with the opening of the 12th floor on

Feb. 24, 2025. The new 38-bed, 40,000-square-foot floor was one of two originally shelved for future growth and will be home to neonatal intensive care and medical/surgical beds, including spaces designed for behavioral health needs. Features include family rooming-in options, an infant playroom, lactation rooms, and team workspaces.

The expansion brings Monroe Carell’s footprint to over 1 million square feet and 363 beds, making it Tennessee’s largest pediatric hospital. Since its 2004 opening, demand for pediatric care has surged alongside Middle Tennessee’s population growth, with more than 1,800 children cared for daily. The \$40 million campaign, supported by the Carell family and community donors, made this project possible. In honor of the Carell family legacy, the Ann Scott Carell Pavilion spans each of the expansion floors.

This expansion not only increases capacity but also enhances specialized services, ensuring that children receive advanced, family-centered care in a healing environment. 🦋

Best children’s hospital — 19 years in a row

Monroe Carell Jr. Children’s Hospital at Vanderbilt was named the No. 1 children’s hospital in Tennessee, while sharing the top spot in the Southeast in the 2025-2026 *U.S. News & World Report* Best Children’s Hospitals rankings.

Middle Tennessee’s only freestanding children’s hospital and comprehensive nonprofit pediatric provider, Monroe Carell has appeared on the list

for 19 consecutive years. This year, it ranks nationally in 10 of 11 pediatric specialties, with urology in the top 10.

For the fifth year, it leads the Southeast region, which includes 19 hospitals across nine states. Monroe Carell also achieved its highest national ranking ever at No. 20 overall.

Monroe Carell’s pediatric specialties ranked in the Top 50 are cancer; cardiology and heart surgery; diabetes and endocrinology; gastroenterology and GI surgery; neonatology; nephrology; neurology and neurosurgery; orthopaedics; pulmonology; and urology. Also, this year urology moved into the top 10 in the nation.



Monroe Carell leaps to the Top

Monroe Carell Jr. Children’s Hospital at Vanderbilt was named a 2025 Leapfrog Top Hospital, reaffirming its national leadership in safety and quality for the fourth consecutive year. For 2025, Monroe Carell was one of only 15 children’s hospitals nationwide to earn this distinction.

Leapfrog has recognized Top Hospitals since 2006, and this marks Monroe Carell’s ninth time receiving the honor.

Leapfrog advocates for transparency and excellence in hospital safety and quality. Its Top Hospital designation is based on rigorous standards measured through the annual Leapfrog Hospital Survey.

The 2025 Leapfrog Top Hospitals list includes 156 hospitals: 15 children’s, 52 general, 16 rural, and 73 teaching hospitals. More than 2,400 hospitals were considered. 🦋

Tennessee's first pediatric inpatient rehab unit

Monroe Carell Jr. Children's Hospital at Vanderbilt announced plans to open Tennessee's first inpatient pediatric rehabilitation unit, ensuring children can recover closer to home after life-altering illnesses or injuries. Currently, more than 100 children each year must travel out of state for intensive rehabilitation, creating significant hardships for families.

"This new unit bridges a critical gap in care, allowing Tennessee's children to receive rehabilitation and comprehensive health services under one roof," said Meg Rush, MD, MMHC, President of Monroe Carell (at time of announcement). The project is made possible by generous donors, including the Carell family, Cal Turner Jr., Walmart, Mariel and Bucky Ingram, Joe Galante and the Junior League of Nashville.

Located on the hospital's eighth floor and named in honor of Kathryn Carell Brown, the unit will feature 12 private patient rooms designed for children recovering from complex injuries or illnesses. The space will include a state-of-the-art rehabilitation gym, areas for practicing activities of daily living such as dressing and eating, and therapy spaces for physical, occupational and speech therapy. Wraparound services will include psychological support, child life specialists, facility dogs, nutrition services, music therapy, and school programming – all within one dedicated space.

Physical rehabilitation restores essential skills like walking and eating, often requiring weeks or months of care. Currently, only half of recommended patients receive inpatient rehab, and 80% must leave Tennessee. "Having a dedicated unit will fill a significant gap and showcase the full potential of Monroe Carell's resources," said Elizabeth Martin, MD, medical director of Pediatric Rehabilitation.

The unit will feature the latest equipment and advancements to ensure comprehensive care and healing. While construction gifts have been secured, additional philanthropy will support programming and staffing. This initiative, backed by the Children's Hospital Alliance of Tennessee, will transform pediatric rehabilitation statewide. 🦋

Artist rendering of the gym area for the new inpatient pediatric rehabilitation unit at Monroe Carell.



COURTESY BLAIR + MUILOW ARCHITECTS

WELCOMING OUR NEW CHAIR

The Monroe Carell Jr. Children's Hospital at Vanderbilt Advisory Board, along with Monroe Carell leadership and supporters, gathered for a welcome reception for Juan C. Salazar, MD, MPH, the new chair of the Department of Pediatrics at Vanderbilt Health and system pediatrician-in-chief for Monroe Carell. Salazar joined Vanderbilt Aug. 15, 2025. A nationally and internationally recognized pediatric infectious diseases specialist and investigator, Salazar joined Vanderbilt Health with more than three decades of experience in academic leadership, medical education and National Institutes of Health-funded research.

The reception was hosted by Toni and Seth Bernstein at the AllianceBernstein headquarters in downtown Nashville. Toni Bernstein serves on the Monroe Carell Advisory Board, and Seth Bernstein is President and CEO of AllianceBernstein.

Salazar shared his vision for the department and expressed gratitude to the Advisory Board members and supporters in the community. Salazar's spouse, Olga Toro-Salazar, MD, MBA, has also joined Monroe Carell as professor of Pediatrics in the Division of Pediatric Cardiology, director of Pediatric Cardiac Dimensional Imaging and director of the Pediatric Cardio-Oncology Program. 🦋



DONN JONES



Sheridan Clawson and her son, Casey, in the NICU at Monroe Carell Jr. Children's Hospital at Vanderbilt.

Innovative infant lung care

Specialized NICU unit opens for infants with complex lung disease

Monroe Carell Jr. Children's Hospital at Vanderbilt has long been a leader in innovative care for the tiniest patients. Sheridan Clawson credits the hospital for saving her son, Casey, born Jan. 30, 2025, at 26 weeks gestation, weighing just 420 grams. After two months in an East Tennessee hospital, Casey was transferred to Monroe Carell for treatment of bronchopulmonary dysplasia (BPD), a chronic lung disease common in premature infants.

Home to one of the nation's largest Level IV neonatal intensive care units (NICU), Monroe Carell treats about 1,500 infants annually. Over the past decade, referrals for preterm babies with severe lung disease have grown steadily. In August 2025, the hospital opened the Complex Infant Lung and Airway Disease Program — a 15-bed unit dedicated to infants with BPD, pulmonary

hypertension, or airway malformations. The unit is already full, reflecting Monroe Carell's role as a national referral center.

"Much of that can be attributed to the fact that we have become a referral center for this population of patients because of the expertise of our pediatric surgical, pulmonary and ENT (ear, nose and throat) colleagues," said Dupree Hatch, MD, MPH, associate professor of Pediatrics and medical director of the NICU. "We have been providing this type of care for decades. In the past 10 years, we have seen a consistent growth in the volumes of older patients in the NICU with severe lung or airway disease.

"We needed a unit that would specialize in the care for this specific patient population from a developmental and a respiratory standpoint."

About 25% of babies born at 22-32 weeks develop BPD, requiring long-term respiratory support. Monroe Carell reports a 52% survival rate for infants born at 22 weeks, comparable to other leading NICUs. Patients in the new unit often stay months or years, many needing tracheostomies or mechanical ventilation before going home.

"This specialized unit allows us to focus on infants who require the most resources," said Paul Moore, MD, director of Pediatric Allergy, Immunology and Pulmonary Medicine. Moore is holder of the Janie Robinson and John Moore Lee Directorship in Pediatrics. The program brings together neonatology, pulmonary, ENT, respiratory therapy, and social work for coordinated, state-of-the-art care. Planning began four years ago and was made possible by Scott and Sandi Borchetta's generosity. The unit will eventually move to the new 14th floor, named in their honor.

The design supports family involvement, with parents able to stay in-room and learn complex care skills. A Neonatal Command Center will provide remote consults and guidance for referring hospitals, smoothing transitions for families traveling from across the Southeast.

For Clawson, the ability to remain by Casey's side has been invaluable. "I can sleep here, learn his care, and talk to other families," she said. Now 13 months old, Casey was discharged in December 2025 after his mother completed training and a 72-hour independent stay. 🦋

Pom-poms for a new era

Briceton Latta's next cystic fibrosis chapter

Briceton Latta, 19, didn't wear a cap and gown or march to "Pomp and Circumstance" for his graduation. Instead, he celebrated his transition from the pediatric cystic fibrosis (CF) clinic at Monroe Carell Jr. Children's Hospital at Vanderbilt to the adult CF clinic with cheers and purple pom-poms. This milestone marked the end of his journey in pediatric care and the beginning of a new chapter in adult CF management.

Latta has lived with cystic fibrosis his entire life, a genetic disorder that affects secretions in the body, especially in the lungs and pancreas. While there is no cure, CF patients manage their condition through rigorous treatments, medications, fitness and nutrition. Medical advance-

ments have significantly increased life expectancy for CF patients, rising from 37 years in 2006 to 65 and beyond today.

Latta's transition is a victory not only for him but for the broader CF community. Monroe Carell and Vanderbilt Health collaborate to ensure a seamless handoff between pediatric and adult care teams. Both clinics are accredited by the Cystic Fibrosis Foundation for excellence in care, research and innovation.

To honor the milestone, the pediatric CF team launched a formal graduation ceremony in the spring. Graduates receive a framed refrain celebrating hope, perseverance and resilience. They ring a purple bell, symbolizing CF awareness, marking their achievement. "It's special, and it's a major milestone," said



DONN JONES

Stefanie Rushing, MSN, RN, coordinator of the Pediatric CF Program.

Reflecting on his journey, Latta expressed gratitude for his care team. "They've been like family," he said. His mom,

Sherry, became emotional recalling holidays spent at Monroe Carell. Latta assured the team he would visit, promising, "It's just a 10-minute walk across the plaza." 🦋

A CALL ANSWERED

When Christina Huff answered her phone one evening in May 2025, she expected an automated reminder. Instead, she heard: "We have a liver and pancreas for Jordyn." Jordyn Williams, 16, was born with cystic fibrosis (CF), a chronic disease that damages lungs, other organs and the digestive tract. At age 11, she developed CF-related diabetes requiring insulin. In 2022, thyroid cancer treatment further weakened her liver, worsening her CF. Frequent lung infections kept her hospitalized for weeks at a time.

"I knew since birth she'd need a transplant," Huff said. "Even after she was listed, setbacks delayed everything. We didn't think it would come so soon."

On May 2, 2025, Jordyn became the first patient at Monroe Carell Jr. Children's Hospital at Vanderbilt to receive a combined pancreas and liver transplant. The

milestone places Monroe Carell among an elite group of pediatric hospitals performing multi-organ transplants, expanding lifesaving options for children with complex conditions.

"Our highly experienced teams strive to lead in organ transplantation while broadening access for our region," said Saeed Mohammad, MD, director of the Pediatric Solid Organ Transplant Center. He credits collaboration with Vanderbilt Transplant Center, one of the Southeast's largest programs, for enabling innovative pediatric care.

Initially hesitant about Jordyn being "the first," Huff ultimately trusted the team she'd known since Jordyn's birth. "We talked through the benefits. I was confident in her doctors."

Today, Jordyn is home and improving daily. She still does breathing treatments and takes CF vitamins but no longer needs insulin or pancreatic enzymes. "That's a

big win," Huff said. "She has more energy and wants to go out. Before, she stayed in her room."

For Huff, who is incredibly grateful that her daughter will have a better quality of life, she recognizes it came at a heart-wrenching cost to another family.

"It makes me emotional to think about it," said Huff, choking up. "Probably the biggest thing outside of being grateful for the transplant itself — is that there are people who are organ donors.

"None of this would be possible without those people. It's hard to compartmentalize that someone's loss became our great gain." 🦋



SUBMITTED PHOTO



Ten-year-old Niah Carver, born with a complex congenital heart defect, found unexpected relief from medical anxiety through Squid, a facility dog at Monroe Carell Jr. Children's Hospital at Vanderbilt. During a heart test, Squid's calm presence helped Niah focus and regulate her emotions. She later relied on a plush version of Squid for comfort at school. Squid's support, along with guidance from his handler, Leslie Grissim, MA, CCLS, empowered Niah's resilience and transformed her coping strategies. 🦋

GROWTH + INNOVATION

TRANSFORMING PEDIATRIC HEALTH CARE



Brittany Saunders at home with her son, Bennett.

Bridge to home

Innovative program brings NICU babies home sooner

Bennett Saunders was born three months early March 2025, weighing 1 pound, 9 ounces. Considered a micropreemie, he spent 103 days in the Neonatal Intensive Care Unit (NICU) at Monroe Carell Jr. Children’s Hospital at Vanderbilt.

Before discharge, Bennett had to reach milestones — breathing on his own, regulating temperature, tolerating feeds and gaining weight. With two goals left, his mother, Brittany Saunders, enrolled in the NICU Bridge to Home program, a remote monitoring and telehealth initiative supporting families during the transition from hospital to home.

“It was definitely an easy decision to enroll, but we were a little nervous,” said Saunders. “They explained every single thing, trained us and made sure we were comfortable. By the time we left, we were ready. This program allowed us to come home, which was a huge blessing.”

During his final NICU days, Bennett began breathing on his own. He went home June 18,

2025, working on bottle feeding, which typically would have extended his stay. The Bridge to Home team monitored his weight and feeding routine through weekly telehealth sessions. “He’s inching closer to coming off the feeding tube,” Saunders said last summer. “In the hospital he was taking 25% of his bottles. Now his normal is 60%, and he’s 10 pounds, 10 ounces!”

Since launching in 2024, 43 patients have enrolled. Most are infants with feeding challenges, some requiring home sedation weaning. The program aims to reduce hospital stays while maintaining continuity of care through remote monitoring and telehealth follow-ups.

“This program supports families as they transition home,” said Julia Peredo, DNP, APRN, the primary advanced practice provider. “Getting a family back into a routine in their own environment is so important. There is less stress. They are able to bond. For many, the NICU journey feels powerless. But this program is empowering.”

Peredo is joined by a multidisciplinary team that includes Meagan Casey, DNP, APRN, program manager, and Dupree Hatch, MD, MPH, associate professor of Pediatrics and NICU medical director.

Families receive an iPad with the Locus Health app and a Bluetooth scale to log weight and feeding volumes, complete telehealth appointments, upload concerns, and access educational materials. Caregivers undergo rigorous training before discharge. “We want to set our families up for success,” said Meagan Casey, DNP, APRN, program manager.

Hailie Carroll, the first parent to enroll, said her daughter Millie thrived after coming home.

“Once we were able to come home and I was doing all of her feeds, she seemed to pick it up faster, and there was that consistency,” said Carroll. “I couldn’t be at the hospital 24 hours a day because I had a 3-year-old, and I was juggling my time.

“I really think it helped Millie to come home and be with me and our family,” she said. Millie celebrated her first birthday last summer.

As the program grows, the team is exploring expansion. 🦋



“They explained every single thing, trained us and made sure we were comfortable. By the time we left, we were ready. This program allowed us to come home, which was a huge blessing.”

- BRITTANY SAUNDERS

Creative cardiac care

New technique renews hope for teen

The Pediatric Heart Institute at Monroe Carell Jr. Children’s Hospital at Vanderbilt has grown accustomed to caring for the sickest children in the region. For decades the program, led by some of the most experienced pediatric heart surgeons in the country, has pioneered innovative heart procedures.

During a recent case, the team explored a nontraditional therapy to give a dying 13-year-old patient the best chance at making it to heart transplant. Today Van Sung, a rising eighth grader, is recovering at home with her family, who credits the team at Monroe Carell with giving their daughter a new lease on life.

Born with hypoplastic left heart syndrome, Sung had undergone a series of surgeries to repair the flaw. The final repair, called a Fontan procedure, was done in 2013 when she was 2 years old. For more than a decade all was well.

In December 2024 her parents noticed facial puffiness and weight gain. They learned she was in heart failure. “When we came to the hospital, we were hopeful,” said Sung’s mother, Rem Kumthar. “At one

point, we were worried that we would lose her.”

Sung’s heart failure worsened. “Time was of the essence,” said Rachel Harris, DO. “She began having life-threatening arrhythmias, and so she needed more support to safely get her to transplant.”

Open-heart surgery to implant a ventricular assist device or using ECMO were considered high risk, said Garrett Coyan, MD. The team explored adapting newer heart pumps designed for adults. Sung seemed to be a candidate.

Using a new access technique, they implanted an Impella device into her left carotid artery — the first time in a Fontan patient so small. “It offered the best chance of getting Sung to transplant,” said Coyan.

Feb. 17, 2025, was unforgettable. “On that very same day, we received an offer of a heart,” Harris said. One month later, Sung was discharged. “We remind her that the doctors say she has a bright future,” said her mother.

“This was hard,” Sung said softly. “I know God led me through it, and I want to help others who need transplants.” 🦋

Patient Van Sung with her parents, Nathan and Rem Kumthar.





Greg and Monica Barton at home with their sons, Carter, left, and triplets Matthew, John and Weston.

Coordinated care

When triplets couldn't wait for Nashville

When Greg Barton received a call that his wife, Monica, was having contractions at just 26 weeks pregnant with triplets, he didn't panic — until her one-word text: "Hurry."

Greg rushed home to find Monica in severe pain, desperate not to give birth on the spot. Their plan was to deliver in Nashville, an hour away, but at a crossroads, Greg faced a critical decision: turn left toward their hospital or right to Vanderbilt Tullahoma-Harton Hospital (VTHH), just 10 minutes away.

"I didn't think we had much time," Greg said. Though nervous about delivering high-risk triplets at a small regional hospital, he called 911 and alerted VTHH. "The dispatcher kept saying, 'Don't have her push,' which was easier said than done. I remember saying a quick prayer in my head to help me get there safely and to help her hold on. Babies' lungs aren't fully developed at that point, so my mind was racing."

Monica had started the day planning curtains for the nursery and Bible camp for her 4-year-old son, Carter. But when contractions hit hard, she knew: "I'm going to have these babies today." Terrified, she moved Carter to her room, called her OB-GYN, and waited for Greg.

At VTHH, nurses were ready. Monica was rushed to the operating room as staff scrambled to assemble a team. "It got very exciting, very quickly," Monica said. "They all just kept begging me to keep holding the babies in. It would come in waves, and I would think I don't know if I can do it. And then I'd have a relaxed moment; then it'd hit again."

"The dispatcher kept saying, 'Don't have her push,' which was easier said than done."

- GREG BARTON



H. Mather Bennett, MD, the on-call obstetrician that day, told Monica that part of the reason they wanted her to wait as long as she could was that they were trying to get as many staff members on-site as possible.

"Everyone was so kind," she said. "I knew once they told me to wait so they could get everything they needed that the boys were going to be okay."

Greg connected with their Nashville doctor. Together, they agreed: The triplets would be born at VTHH. Monica delivered Matthew Keith naturally, then John Michael and Weston James via cesarean section. At birth, Matthew weighed 2 pounds, 2 ounces; John 1 pound, 8 ounces; and Weston 1 pound, 14 ounces.

"Everybody's energy level was through the roof," Greg recalled. "They said, 'Brain and breathing are the main focus.' I credit them for taking charge."

All three boys were stabilized and transported to Monroe Carell Jr. Children's Hospital at Vanderbilt. Naming them while Monica drifted in and out of anesthesia was a surreal moment for Greg.

The NICU journey was long: Matthew went home after 105 days, Weston after 127 days, and John after 130 days. "They had to train their bodies to do things that would've naturally happened if they'd been born later. You don't realize how much their bodies need that time. But it's amazing to see that their bodies were able to learn things based on what the NICU had and what the nurses and doctors were able to offer," Monica said.

Today, the triplets are thriving, each with a distinct personality. "My boys are alive because of the care at VTHH and Monroe Carell," Monica said. "They needed to see my boys succeed just like I did. And they did."



Radiation restores hope

Team effort saves toddler with rare brain tumor

It was June 24, 2024, when 2-year-old Ryleigh Budde's family noticed alarming symptoms. "I knew something was wrong," said her mother, Heather Budde. "She had stopped walking and talking. Her whole left side wasn't working."

That day, Ryleigh was admitted to Monroe Carell Jr. Children's Hospital at Vanderbilt, where a biopsy revealed a low-grade glioma in her brain stem — a rare diagnosis that changed everything.

"Brain tumors are rare in children, and brain stem tumors account for less than 5% of all cases," said Leo Luo, MD, assistant professor of Radiation Oncology. Because surgery wasn't possible, her case was reviewed by a multidisciplinary tumor board, including pediatric neuro-oncology, neurosurgery, radiation oncology, pathology and

radiology. The team recommended radiation therapy.

Ryleigh underwent six weeks of daily radiation using intensity-modulated radiation therapy, an advanced technique that targeted the tumor while sparing critical brain functions like hearing and hormone regulation. Each session required precise coordination among radiation therapists, pediatric anesthesiologists, nurse anesthetists and acute care nurses.

"Only a small fraction of children with brain tumors receive radiation only," Luo noted.

By August 2024, treatment was complete. Two months later, MRI scans showed a significant decrease in tumor size. Today, Ryleigh, now 4, has regained her speech and motor skills, including running and climbing.



SUBMITTED PHOTO

"We will closely monitor her," said Luo. "Her outlook is very good. Without radiation, the tumor would have grown and caused more neurological deficits."

Heather Budde is deeply grateful. "No one wants to go to a hospital, but when we return, we look forward to seeing the

staff. We developed relationships. We couldn't be more thankful.

"Vanderbilt saved Ryleigh. She is completely recovered," Budde said. "My child is a miracle, and it wouldn't have happened without that team of doctors and staff." 🦋

PIONEERING ROBOTIC PROCEDURE

Surgeons at Monroe Carell Jr. Children's Hospital at Vanderbilt, working with Vanderbilt Health's adult robotic team, performed the hospital's first robotic pancreaticoduodenectomy (Whipple procedure) on a pediatric patient — a

milestone among only three such cases reported worldwide and one of the first in the U.S.

The patient, a 14-year-old girl, developed abdominal pain after a soccer injury and was diagnosed

with a benign pancreatic head mass in a challenging location. Irving Zamora, MD, MPH, assistant professor of Pediatric Surgery and director of Advanced Minimally Invasive and Robotic Surgery at Monroe Carell, identified the case as ideal for a robotic-assisted approach and partnered with adult surgical colleagues.

"Pancreatic head masses are rare in children and complex," said Zamora. "Over five years, we've built a strong minimally invasive and robotic program, positioning us to take on this challenge."

Traditionally, pancreatic surgery requires a large open incision, posing significant risks and prolonged recovery for children. Robotic surgery offers shorter hospitalization and faster recovery. The patient was discharged after only three

days — allowing her to return quickly to family, school and normal life.

Zamora credits Sekhar Padmanabhan, MD, assistant professor in Surgical Oncology and Endocrine Surgery at Vanderbilt Health, for enabling the groundbreaking procedure. Padmanabhan introduced the robotic Whipple at Vanderbilt Health in 2021 and launched the robotic program in 2023.

Robotic procedures represent a generational shift, with more surgical residents trained in robotics and only a few centers performing robotic Whipple surgeries. "We're now recognized as leaders in pediatric robotic surgery," said Zamora.



Mom gives son life twice

Margaret Drewes accomplished something many mothers cannot claim — she gave her son life twice.

Everett was born with Eagle-Barett syndrome, a rare condition with underdeveloped abdominal muscles and urinary tract abnormalities leading to kidney complications. Doctors anticipated he would need a transplant.

At age 3, Everett received a kidney from his father, Matthew Drewes, but it failed within days. In efforts to save it, Everett suffered heart damage, making him ineligible for the transplant waitlist. He was placed on dialysis until his heart healed.

Once stable, Everett rejoined the list — and so did his mom. “Once he was stable enough, and his heart was repaired, he was back on the list for donation, and I listed with him,” said Margaret Drewes, who joined a kidney donation chain. The chain connects incompatible donor-recipient pairs so recipients receive a compatible kidney from an altruistic donor.

Finding Everett’s match launched a chain involving six people. Margaret’s kidney went to someone in Virginia; Everett’s came from Pennsylvania. On April 9, 2025, Everett underwent his second lifesaving transplant. For the first time, he has a fully functioning kidney.

“We are so grateful,” said Margaret. “He has more energy than ever — Everett 2.0.”

Margaret, chief business officer for Vanderbilt’s Department of Ophthalmology and Visual Sciences, has worked at Vanderbilt Health for 14 years. Donating a kidney requires major surgery and recovery, but as a marathon runner, she said it was easier than expected. “The need is so great. We only need one, and if you are a candidate, it’s an incredible gift.”

The family enjoyed Everett’s 5th birthday June 19, 2025 — his first without food restrictions. “He is so excited for milk, cheese, ice cream and bananas. This is the first time he has a fully functioning kidney, and it’s remarkable.” 🦋

Margaret Drewes and her son, Everett, at home after recovering from their surgeries.



LOCKS FOR CHILDREN'S SAFETY

Firearms are the leading cause of death for children and teens in Tennessee, with more than 80 children dying each year due to gun-related injuries.

The continued rise in deaths pushed a team at Monroe Carell Jr. Children’s Hospital at Vanderbilt to do something.

The hospital launched Locks for Children’s Safety.

“Secure firearm storage is an evidence-based solution to reduce unintentional injuries, firearm-related suicide, and firearm homicides among children,” said Kelsey Gastineau, MD, MPH, assistant professor of Pediatrics at Monroe Carell. “One barrier to safe storage is access to affordable storage devices. This program provides free gun locks, no questions asked, to eliminate barriers and foster a safe, judgment-free space for families, employees and community members.”

To date, more than 8,600 gun locks have been distributed. The program first launched in 2024.

The locks are sourced from a variety of partnerships with state agencies and are available on all floors of Monroe Carell, the Emergency Department, Shade Tree Clinic, the General Surgery Clinic on Doctors’ Office Tower (DOT) 7th floor and in the Psychology consult service for Developmental Medicine on DOT 10.

“The overwhelming response to our gun lock program has been both humbling and inspiring,” said Gastineau. “The fact that we’ve distributed just over 3,000 locks over a four-month period shows just how much this resource is needed.

“Every lock represents a step toward a safer community, and we’re committed to expanding this program to meet families wherever they are.”

The team continues to explore additional storage device options to provide families with tools that make their homes safer for their children, as well as designate more locations within the hospital that families can access the devices.

“Exposure to firearm violence, directly or indirectly, can impact a child’s health in many ways causing physical, emotional and social symptoms. It can disrupt their sleep or hinder their ability to learn,” said Gastineau. 🦋



Patient Zoe Forman, right, and her mother, Heather Rossomme, back home in Alabama after Zoe's surgery.

Right place, right team

Quick action to treat young dancer's rare heart condition shows power of multidisciplinary care

Seventeen-year-old Zoe Forman was preparing for her final jazz routine at a Nashville dance competition in March 2025, when she suddenly couldn't breathe. "I can't breathe; I can't breathe," she told her mother, Heather Rossomme. Initially, bystanders assumed the healthy teen — a competitive dancer for six years — was overheated. But Zoe quickly worsened, becoming unresponsive. A doctor attending the event stayed with her until an ambulance arrived.

On the way to Monroe Carell Jr. Children's Hospital at Vanderbilt, Zoe went into cardiac arrest. Her heart stopped. At the hospital, the emergency team performed CPR for several minutes before restoring her heartbeat and placing her on ECMO, a machine that supports heart and lung function.

By morning, imaging revealed the cause: anomalous aortic origin of a coronary artery

"We were exactly where we were supposed to be."

- HEATHER ROSSOMME



(AAOCA), a rare congenital defect and the second leading cause of sudden cardiac death in young athletes. Zoe's left coronary artery had developed inside the aortic wall, compressing during exercise and restricting blood flow — a ticking time bomb.

Carlos Mery, MD, MPH, chief of Pediatric Cardiac Surgery and an AAOCA expert, led the effort. When he first saw Zoe, her heart function was only 8%. "We knew if we were going to give her any chance, we had to act immediately," Mery said.

The surgical team performed a six-hour procedure, switching Zoe from ECMO to bypass, stopping her heart, and unroofing the intramural segment to reposition the artery correctly. When her heart restarted, its function was nearly normal. By the next morning, Zoe was extubated — a remarkable recovery.

Within 48 hours, she moved to a step-down unit. A mild stroke was detected but resolved without lasting effects. Just a week after the incident, Zoe was discharged and is now back home in Alabama. She regained her strength and was able to return to dance in June 2025.

Rossomme credits faith and the seamless teamwork that saved her daughter. "We were exactly where we were supposed to be," she said. Mery agrees: "Her survival is a testament to what multidisciplinary teams can do."

Mery continues to advance AAOCA research and is building a comprehensive cardiac anomalies program at Vanderbilt Health, bringing together pediatric and adult specialists to improve care and outcomes for patients like Zoe. 🦋

RESEARCH + FUNDING

ADVANCING CARE FOR CHILDREN



The Puricelli family hosted “A Night of Harmony for Healing” to raise funds for the Webb of Hope Fund at Monroe Carell Jr. Children’s Hospital at Vanderbilt. Pictured here, from left, are Eleanor, Anne, Charlotte, Webb and Steve Puricelli.

Webb of Hope

Special night supports pediatric rare lung disease research efforts

Soon after his 3rd birthday, Webb Puricelli was diagnosed with a rare lung disease, idiopathic pulmonary hemosiderosis (IPH), which affects 1 in 5 million people. IPH causes unexplained bleeding in the lungs and can lead to other health problems. Because of advancements in research, treatment options are now available to manage the condition.

In the five years since Webb received his diagnosis, he has navigated numerous blood tests, infusions and hospital stays. His doctors say that despite these challenges, he consistently greets his care team and the hospital staff at Monroe Carell Jr. Children’s Hospital at Vanderbilt with a positive attitude and cheerful smile.

Webb’s parents, Anne and Steve Puricelli, hosted “A Night of Harmony for Healing,” an evening of live music to raise funds for the Webb of Hope Fund at Monroe Carell that they established in Webb’s honor. The inaugural event was an opportunity to celebrate Webb’s story to inspire others and to raise funds to enhance the pediatric infusion experience for patients in the hospital receiving treatment. Proceeds will also help expand innovative programs and therapies, foster groundbreaking research, and help train the next generation of leaders in pediatric rare lung disease.

“We wanted a way to give back to Monroe Carell Jr. Children’s Hospital at Vanderbilt – a place that has done so much for Webb and our family.”

- ANNE PURICELLI



“We wanted a way to give back to Monroe Carell Jr. Children’s Hospital at Vanderbilt — a place that has done so much for Webb and our family,” said Anne Puricelli. “The Webb of Hope Fund and the ‘Harmony for Healing’ event is a way for us to honor Webb’s unflappable optimism in the face of a tough diagnosis and a way to build and inspire the web of supporters that surround us every day.”

Family, friends and supporters rallied around the Puricelli family at “A Night of Harmony for Healing,” including members of Webb’s care team like Lisa Buckley, MD, MSHP, assistant professor of Pediatrics in Rheumatology, and Paul Moore, MD, professor of Pediatrics and director of Pediatric Allergy, Immunology and Pulmonary Medicine.

“Patients like Webb are the reason that we do what we do each day,” said Moore, who holds the Janie Robinson and John Moore Lee Directorship in Pediatrics. “I cannot think of a more fitting name for this effort than Webb of Hope, as we seek to provide hope for families through support for expanded infusion space, discovery research and training the next generation of pediatric pulmonologists. I am so grateful to the Puricelli family and the community of sponsors, friends and family who supported the event for their commitment to making a difference for other children with rare lung diseases and their families.” 🦋



SUSAN URBAN

Kaile Meguiar, DO, MPH, an oncologist at Monroe Carell Jr. Children's Hospital at Vanderbilt, received a \$100,000 Hyundai Hope on Wheels Impact Award to study psychosocial and neurocognitive outcomes in survivors of pediatric, adolescent and young adult cancers. Hyundai Hope on Wheels has provided over \$2 million to Monroe Carell researchers since 2007. While 85% of children diagnosed with cancer now survive five years or longer, many face long-term challenges such as anxiety, depression, memory issues and impaired attention. Meguiar's research will identify risk factors and develop interventions to improve quality of life for survivors and caregivers. She joined Vanderbilt's faculty in July 2025 and aims to advance comprehensive long-term care for childhood cancer survivors. In this photo: Greta Ford, a patient ambassador, poses for a photo during the handprint ceremony as part of the Hyundai Hope on Wheels event. 🦋

My Health Passport gives pediatric patients a voice in behavioral health care

Each year, nearly 500,000 children and adolescents visit emergency departments nationwide for behavioral or mental health concerns. Many experience prolonged “boarding” stays in general inpatient units while awaiting psychiatric placement, often without personalized care.

To address this gap, Monroe Carell Jr. Children’s Hospital at Vanderbilt introduced My Health Passport (MHP) in 2017. This individualized care planning tool empowers patients to share preferences, coping strategies, and communication needs during hospital stays. Recently, the hospital’s Pediatric Behavioral Health and Intervention Team studied its effectiveness through a prospective cohort study led by Andrea Hughie, MSN, RN; Jessika Boles, PhD, CCLS; and Patti Runyan, DNP, MBA, RN.

The study, published in *BMC Pediatrics*, enrolled 100 patients (ages 8–17), 74 caregivers and 76 staff. Satisfaction averaged 7.72/10, with participants reporting improved experiences and outcomes. Patients said the one-page questionnaire helped them feel heard and understood, while caregivers and staff valued its insights and integration into workflows.

The tool, displayed at the bedside and scanned into electronic health records, asks about communication styles, triggers, calming strategies, favorite things and more. Researchers plan enhancements, including earlier introduction and extending use beyond inpatient care. As Hughie noted, “Kids just want a vehicle to be heard – and listening well can shape lifelong health care experiences.” 🦋



Bill Russell, MD, left, with patient and trial participant Spencer Mannahan and his father, Zach.

Future Forward Type 1 Diabetes Research

TrialNet Screens 250,000 for Type 1 Diabetes Risk

TrialNet, an international Type 1 diabetes (T1D) research network that includes Vanderbilt Health, reached a major milestone in January 2025, with more than 250,000 people learning about their risk of developing T1D through screening.

TrialNet offers screening to relatives of individuals with T1D, who face a 15-fold higher risk than those without a family history. T1D occurs when the immune system attacks insulin-producing beta cells in the pancreas, leading to insulin deficiency and high blood glucose. The earliest indicator of this autoimmune process is the presence of T1D autoantibodies, detectable in blood months or years before clinical onset. TrialNet tests for up to five autoantibodies.

“Screening isn’t age restricted — we test up to age 45,” said Bill Russell, MD, the Cornelius Vanderbilt Professor of Pediatrics. “In one case, a father screened positive for all five antibodies and later developed T1D.”

Beyond screening, TrialNet engages patients in clinical research aimed at delaying or preventing T1D. Over Vanderbilt Health’s 18 years in the program, participation has grown as families seek to help others. Trials often repurpose drugs used for other autoimmune diseases to assess their ability to preserve insulin production.

Spencer Mannahan enrolled in a study combining rituximab and abatacept to preserve beta cell function after his recent diagnosis. His father, Zach, was treated by Russell as a child with T1D. “It’s comforting because I know his care,” Zach Mannahan said.

Lauren O’Neal, a medical student diagnosed at 28, joined a TrialNet study testing abrocitinib and ritlecitinib. “I wanted to contribute to research that could help future patients,” she said.

TrialNet’s ultimate goal is a future without T1D. Current research explores targeted therapies to calm T cells that attack beta cells without suppressing immunity. “We want interventions that are tolerable and affordable, and prevent progression,” Russell explained.

The network’s efforts have already changed the risk equation: teplizumab, first studied by TrialNet, became the first Food and Drug Administration-approved drug to delay T1D onset. Funded by the National Institutes of Health, TrialNet continues to offer hope through screening and innovative trials. 🦋

Promoting Children's Safety

Kelsea Ballerini donates \$100,000 to Monroe Carell Jr. Children's Hospital at Vanderbilt

Five-time Grammy-nominated, multiplatinum singer-songwriter and producer Kelsea Ballerini has donated \$100,000 to Monroe Carell Jr. Children's Hospital at Vanderbilt to support its Pediatric Trauma Injury Prevention Program. The gift, made through Ballerini's Feel Your Way Through Charitable Fund, will help expand efforts to keep children safe across Tennessee and beyond.

As the region's only Level 1 pediatric trauma center, Monroe Carell provides specialized care for children and leads initiatives to prevent injuries, including firearm safety, teen driver education, and car seat programs. "I'm so inspired by Monroe Carell, not only for their medical efforts, but also for their passion and foresight to establish preventive measures to keep kids safe in an ever-changing world," Ballerini said.

During a recent visit, Ballerini met patients and families in Seacrest Studios, answered fun

interview questions, shared advice, and performed acoustic versions of her hits "Baggage" and "Love Me Like You Mean It." She then presented the check to Kelsey Gastineau, MD, MPH, and Heather Kreth, PsyD, who lead firearm safety and behavioral health initiatives.

The program's efforts include Locks for Children's Safety, launched in 2024 to distribute cable firearm locks — over 8,600 so far — through partnerships with state agencies. "This incredible gift will have both immediate and lasting impact," said Gastineau.

Kreth added: "Kelsea Ballerini's incredible gift allows us to further grow our work to meet this need."

Ballerini's Feel Your Way Through Charitable Fund, named after her bestselling poetry book, supports mental health initiatives and works to reduce stigma around seeking help.



Kelsea Ballerini visited with patients in Seacrest Studios at Monroe Carell.



DOWN JONES

\$5 million gift from Scott and Sandi Borchetta to support NICU program

Scott and Sandi Borchetta have pledged a \$5 million gift to support the neonatal intensive care program at Monroe Carell Jr. Children's Hospital at Vanderbilt.

Monroe Carell's Level IV Neonatal Intensive Care Unit (NICU), among the nation's largest and most advanced, treats 1,500-1,600 infants annually. Following a recent expansion, the hospital now has 131 NICU beds, including those on the new 14th floor, which is now named the Scott & Sandi Borchetta Floor.

Monroe Carell established one of the first NICUs in the U.S. in 1961, led by Mildred T. Stahlman, MD, a pioneer in treating lung disease in premature infants. That legacy continues today with highly specialized care for premature and critically ill newborns.

The Borchettas' gift has helped create the Complex Infant Lung and Airway Disease Program.

Longtime supporters of Monroe Carell, the Borchettas' latest philanthropy builds on their ongoing commitment to the hospital's NICU services. In March 2020, the hospital opened the Big Machine Neighborhood, a 23-bed NICU wing on the 11th floor of the hospital, made possible by the Borchettas and Big Machine Records.

"Children should never be sick, let alone not being ensured a safe entry into life in their golden hour," said Scott Borchetta, founder and CEO of Big Machine Records. "Sandi and I have taken great joy in the extraordinary success stories of the Big Machine Neighborhood, and we know the great team at Monroe Carell will put every dollar toward saving more lives."



Kix Brooks, center, is joined by patients and hospital leaders at the unveiling of his star on the Walk of Champions at Monroe Carell Jr. Children's Hospital at Vanderbilt.

A Champion for Children

Kix Brooks honored with star on Walk of Champions

Superstar country music artist Kix Brooks, of Brooks & Dunn was honored in October 2025 with a star on the Walk of Champions at Monroe Carell Jr. Children's Hospital at Vanderbilt. Brooks was celebrated for his longtime commitment to the hospital's patients and families. Presenting the award were representatives from Monroe Carell, as well as patient ambassadors.

The Walk of Champions, located on the hospital's main floor, was created to honor individuals from the entertainment industry who are lifelong advocates for Monroe Carell.

For over two decades Brooks and his wife, Barbara, have donated their time and resources to Monroe Carell, helping support the construction of the hospital in 2003, and then the recently completed four-floor expansion made possible through the "Growing to New Heights Campaign," a \$40 million philanthropic effort that Brooks co-chaired. He has also served on the Monroe Carell Advisory Board for more than 20 years and served as board chair from 2020-2022.

"I am truly excited to celebrate Kix with a star on our Walk of Champions," said Meg Rush,

"I can in all honesty say I have never been so humbled by any award as this. The doctors, nurses and staff at Monroe Carell who dedicate their lives every day are such an inspiration."

- KIX BROOKS



MD, MMHC, now retired President of Monroe Carell. "While we know him as an icon in the country music industry, I know him as an icon and friend for Monroe Carell. He has walked with us for well over two decades to ensure we achieve our vision.

"What sets Kix apart is his heartfelt connection to our mission and attention to our present or emerging needs. When we ask him to help, he does! I am so very grateful for his gifts of advocacy, time and philanthropy that have helped us become a leader in children's health care and that will sustain us for years to come. He is a true champion for children!"

As a co-owner of Arrington Vineyards, Brooks hosted the Arrington Vineyards Harvest Party for many years, raising funds and awareness for the hospital and its programs. A philanthropic leader in the community and within the music industry, he has either hosted or been a key supporter of other events for the hospital, including Behind the Music and Celebrity Golf Classic.

In addition to all this, Brooks has spent hours performing for patients, visiting hospital rooms and doing interviews at the hospital's Seacrest Studios.

"I can in all honesty say I have never been so humbled by any award as this," said Brooks. "The doctors, nurses and staff at Monroe Carell who dedicate their lives every day are such an inspiration. I know it has to be so meaningful for parents to have the hope that is within these walls. And to think that walking on these floors, that you're going to get to walk on Kix Brooks. Maybe you'll look down there, and it will make you smile one day. I am so proud to be a part of that." 🦋



Heroes bring hope for tomorrow

Turner's Heroes was created in memory of college football player Turner Cockrell who passed away from melanoma in 2018.

Known for his radiant positivity and love of superheroes, Turner's legacy lives on through Turner's Heroes, which recently teamed up with Monroe Carell Jr. Children's Hospital at Vanderbilt to support childhood cancer discovery through the Turner Cockrell Pediatric Cancer Research Fund.

Turner's Heroes also brings joy to the hospital by hosting special events for patients like Jurnee, pictured here.



You can be a hero for children and families, too. Give today to support tomorrow's breakthroughs. Scan the QR code or visit Give.VanderbiltHealth.org/childrens

HOPE

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Because you didn't just build a hospital.

You made a difference.



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