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Photographers: Emma Frank and Roy Ortiz J. C. Montgomery, Jr. Writers: Kristi Shewmaker and Taheera Washington President Emeritus

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PUBLICATION CREDITS

Senior Editor: Hayley Hair

Editor: Kristi Shewmaker

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Send editorial comments to:

Designer: Peter Henry

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LETTER FROM THE PRESIDENT



ROBERT L. WALKER President/CEO

Working in health care is a calling of service to others, and at Scottish Rite for Children, it is a call to serve children and their families. Giving children back their childhood means partnering with patient families to give their children the ability to reach their fullest potential in the future, while celebrating their accomplishments today. To achieve this, we care for the whole child - body, mind and spirit.

Our pediatric psychologists and mental health navigators are integral members of a child's multidisciplinary clinical team. They focus on the patient's mental, emotional and behavioral needs. Psychologists help patient families cope with diagnoses and treatment, aid in medical decision-making, prepare children for surgery, assist in rehabilitation, and provide pain and stress management, among many other services.

Our Family Services team assists families as their dedicated advocates and liaisons. Social workers offer emotional support, as well as referrals to a host of community resources. Medical interpreters and translators provide verbal interpretation and written translation to help families communicate with their medical teams. Medical consult coordinators provide referrals to patient families for services that are not offered at Scottish Rite but are necessary for their

children's treatment plans.

When a family receives a diagnosis for their child, it can be overwhelming. For more than 25 years, the Christi Carter Urschel Family Resource Center has served as a haven for families to find answers about their child's condition. The medical librarian provides health information, and a social worker connects families to support groups and community agencies. Through our Peer Support Program, they connect patients to

other Scottish Rite families who have children experiencing the same condition. This exceptional program helps children and families find support, giving them hope and the realization that they are not alone.



Medical interpreter Conchita Arroyo-Sanchez (left) provides interpretation

services, we connect families to the appropriate care.

Earnestly caring for children and their families is not only Scottish Rite's specific call to service — it is simply who we are. It is our privilege to answer this call, working together to heal muscles, joints and bones with a compassionate and humble heart.

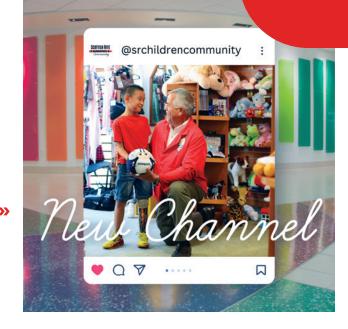






CONNECTED TO THE CARE

The new Scottish Rite for Children Instagram Community Channel shares inspiring stories about our donors, upcoming events, ways to get involved and so much more. Follow us @srchildrencommunity to embark on this fresh adventure!





The TSC Alliance established the Steven Sparagana Legacy Fund to honor the retirement of Steven Sparagana, M.D., a neurologist who served as the tuberous sclerosis complex clinic director at Scottish

Gabby and Izzy, of Big Sandy

Scottish Rite for Children Sports Medicine Therapy Services expanded to The Star in May to offer additional services. Therapy

Services at The Star will serve patients through sports physical therapy to help children recover from a sports injury or improve their performance.

> L to R: Physical therapist Samantha Plaster, Assistant Director of Therapy Services Laura Saleem and physical therapists Nicole Shively, Destini Lunsford and Kristyn Morrison

Nursing Jason Sawa, Registered Nurse Manager Tabetha Rowe, and Vice President and Chief Nursing Officer Angie Buckmeier

nrc

L to R: Director of Clinical Quality and Performance Improvement Charu Sharma, Director of

EXCELLENCE IN Patient Experience AWARD - 2024

> NRC Health honored Scottish Rite for Children with the Excellence in Patient Experience Award in the nationwide pediatric category for the eighth time. Honorees are recognized for their efforts to consistently deliver outstanding patient experiences and have shown their commitment to individualized, patient-centered care. Earning top satisfaction ratings from patients and their families, Scottish Rite was chosen based on its Net Promoter Score, specifically the question of whether patients would recommend the organization to friends and family. Scottish Rite staff members accepted the award at NRC Health's Human Understanding Beyond conference in San Diego, California.



Pediatric orthopedic surgeon Corey S. Gill, M.D., M.A., served as a faculty member for an orthopedic training course in Zambia, Africa, as a part of the **Pediatric «** Orthopaedic Global Outreach Committee. Dr. Gill

trained local orthopedic surgeons who are interested in becoming their country's future leaders in pediatric orthopedic surgery.





DR. SUCATO REPORTS





DANIEL J. SUCATO, M.D., M.S.Chief of Staff

Shaping the Future of Care Through Expert Education

Scottish Rite for Children shapes the future of pediatric orthopedic care by offering best-in-class, specialized training to medical professionals. By combining innovation with education, we prepare the next generation of medical experts to push the boundaries of care and make an impact on children's lives around the world. This process begins with an environment where learning is ongoing, and excellence in teaching is an everyday practice. Scottish Rite's multidisciplinary team of surgeons, therapists and researchers supports diverse perspectives to best serve patients' needs.

Scottish Rite fellows make a unique commitment, specializing in treating children's muscles, joints and bones — because children are not simply small adults. Each year, our Dorothy & Bryant Edwards Fellowship in Orthopedics and

Scoliosis program selects five fellows to become integral members of Scottish Rite's team. We are excited to introduce the 2024 - 2025 cohort, pictured at left. These outstanding individuals have joined one of the oldest and the largest pediatric orthopedic fellowships in the world. Thanks to the Edwards' generous donation, 190 fellows have graduated since the program's inception in 1978. Of these fellows, approximately 35 hold leadership positions at children's hospitals across the country, and 17 practice internationally in Canada, Puerto Rico and Ireland.

To ensure top-quality care for the pediatric orthopedic population, Scottish Rite is dedicated to training medical professionals across various fields. In 2025, our first Orthopedic Sports Medicine fellow will join us to meet the growing need for sports surgeons

who also desire subspecialty training in the care of young and growing athletes. In addition, our education programs cater to various roles and levels of medical training, including medical, nursing and physical therapy students, residents, psychologists and more. Although a fellowship or residency is a brief chapter in a young professional's medical career, its impact is lasting. At Scottish Rite, our patients come first, and our fellows carry this key mindset with them as they advance in their careers and improve treatment for children, ensuring a touch of Scottish Rite worldwide. **«**





Courage in Motion

Eight-year-old Déborah aspires to be an athlete like her role model Darlene Hunter, a 2016 Paralympic gold medalist for Team USA's wheelchair basketball team. Déborah actively engages in dance, golf, tennis, softball and swimming with recreational teams in Dallas, like Team IMPACT for softball and the Dallas Wheelchair Tennis Club. "I am Déborah's No. 1 fan," says her mother, Michelle. "I know she will be great at any sport. She has always defied the odds since the womb."

Originally from El Salvador, Déborah was born with no left arm or leg. Her parents searched for care after her birth throughout Central America, and, in 2019, they discovered Scottish Rite for Children.

Déborah's multidisciplinary care team includes experts from Occupational and Physical Therapy, Scoliosis, Orthotics and Prosthetics, and Therapeutic Recreation. Her passion for sports was fueled by Director of Therapeutic Recreation Dana Dempsey and recreational therapist Karla Palacios-Reagor. "I can't say enough about the dedication of Dana and Karla," Michelle says. "They are extremely special and make teaching children how to love a sport easy."

Therapeutic Recreation services empower children to engage in recreation, leisure and sports in their communities. Déborah's goals included using community leisure resources, boosting her strength and confidence, and maintaining independence. While Karla designed the exercise plan, Déborah challenged herself to tackle different sports.

Déborah recently accepted the challenge of learning to ride a bike. She trained with an adaptive hand bike, tailored for her limb absence. Building coordination, upper body strength and balance were key to independently ride. "Déborah would come to my sessions and flex her arm or stand up by herself to show me how strong she is," Karla says. "It is great to see her confidence boost." After six months, Déborah rode her bike fearlessly with minimal help, completing her Therapeutic Recreation journey!

The possibilities are endless regarding which sport Déborah will try next, and Michelle is behind her to celebrate every triumph. "Never let a physical condition determine the bright future your child will have," Michelle says. "We are extremely grateful and blessed to find the best care for our greatest treasure." «



Emily Claire's Transformation

A Pain-Free Knee and a New Life Path

by Kristi Shewmaker

Emily Claire, of Plano, spends most of her time raising two pigs — Dolly and Kenny, named after Dolly Parton and Kenny Rogers. Like the country legends, Dolly and Kenny are not related. Every morning and evening, the 17-year-old drives to the barn to take care of them where they show their affection for her in different ways. "Dolly gets the zoomies," Emily Claire says. "She'll run laps in her pen, but Kenny just sits there with puppy dog eyes looking at me. He also likes to cuddle. Dolly, not so much, but Kenny will lay across my lap."

Emily Claire is president of the FFA Plano chapter and secretary of Area V's District VII for the state of Texas, which is part of the National FFA Organization, historically known as Future Farmers of America. She recently attended the Texas FFA State Convention in Houston. "It's a lot more than just showing animals or being a farmer," she says. Through FFA, she has engaged in leadership and career development events that will serve her throughout her senior year of high school and beyond.

As a young teen, Emily Claire had her heart set on playing softball. She played for school and select teams and had dreamed of playing at the collegiate level. But, she started experiencing pain in her knee, leading to multiple incidents of partial dislocation. The first time, she was crossing the street. "My kneecap slipped out, and I fell to the ground, literally in the middle of the street," she says. "It was embarrassing." The second time, she fell at softball practice, but each time, her kneecap went back into place. Then, in the fall of 2021 during her freshman year of high school, her kneecap fully dislocated at catcher practice. "I was in my squat throwing down to second base, and I popped up to throw, and my kneecap just locked out," she says. "I couldn't move it. I didn't know what was happening, and I was freaking out."

Continued on the next page

TREATING KNEECAP INSTABILITY

An established patient at Scottish Rite for Children Orthopedic and Sports Medicine Center in Frisco, Emily Claire was initially treated with a brace and a specific exercise program. Unfortunately, she experienced increasing episodes of instability in her kneecap, or patella. Recurrent episodes of patellar instability often require surgery. Henry B. Ellis, M.D. — pediatric sports medicine surgeon, sports medicine fellowship director and medical director of clinical research — performed medial patellofemoral ligament (MPFL) reconstruction surgery on Emily Claire's left knee.

"MPFL reconstruction is common for us in pediatric sports and those that take care of kids because kneecap instability is very common in kids," Dr. Ellis says. "In our practice at Scottish Rite, it is one of the most common conditions that we treat."

When Emily Claire's kneecap dislocated, it tore an important ligament that holds the patella in place. In surgery, Dr. Ellis replaced the torn ligament with a new one to give her kneecap stability. However, patellofemoral instability is complicated. Sometimes, it requires more than simply replacing a ligament. At the end of the femur, or thigh bone, is a groove called the trochlear groove. The patella fits into this groove, and when the knee bends or straightens, the patella slides up and down in the groove. Emily Claire's kneecap was not aligned in the groove because of the position of her tibial tubercle, the bony bump on the upper part of the shin where the patellar tendon attaches. "Her kneecap was living off to the side," Dr. Ellis says. To mitigate this problem, he performed a procedure to shift Emily Claire's tibial tubercle, which aligned her kneecap in the groove and ensured that it would track and glide correctly.

REHABILITATING BODY, MIND AND SPIRIT

MPFL surgery stabilized and corrected Emily Claire's kneecap. What came next would change the direction of her life. Her knee injury and rehabilitation served as a catalyst that led her to discover her dream career. Throughout her care journey, she received treatment from Dr. Ellis and a multidisciplinary team, including physician assistant Ben Johnson, registered nurse Tammy Norris, physical therapist Katie Sloma, child life specialists, psychologists and athletic trainers, among others.

After surgery, Emily Claire met physical therapist Katie Sloma for a physical therapy evaluation. "I remember talking to Katie and asking her questions," Emily Claire says. "I was really curious about her job." For weeks, Emily Claire was on crutches, wore a brace and could not bear weight on her leg. "I got a really good tan line at the softball field with stripes going across my leg," she says. "It was very humbling having two different size guads."

Katie worked with Emily Claire on quad strengthening, range of motion and mobility through manual therapeutic exercises and aquatic therapy. "Emily Claire always came in with a smile and ready to work," Katie says. "She was curious about the process and liked to remain informed, which was cool for us to see."

For several months, Emily Claire could not play softball. Then, slowly, she was reintroduced to the game part time, but ultimately, her team broke up during her sophomore year. "I was like, 'OK, I don't know what I'm supposed to do now,'" she says. She recalls trying out for other teams, but her knee had not fully recovered. "I wasn't getting called back," she says. "It was like nobody wanted me, and that was really degrading, and I was like, 'Am I even supposed to play softball anymore?'"

Things began to change in 2023 when Emily Claire attended the FFA Collin County show. "Everybody there was just so nice and comforting. It felt like a place that I belonged," she says. "So, I went home and cried about it a lot, and I was like, 'I just don't think softball's for me."

OPTIMIZING CARE THROUGH EXPERT TEAMWORK

Emily Claire continued to gain strength and increase athletic conditioning by working with athletic trainers while participating in Scottish Rite's Bridge Program. "In our care of any youth athlete, one of the biggest advantages that we have at Scottish Rite is the ability to work together," Dr. Ellis says. "When someone presents a problem, we offer solutions, but we do it not just as a physician to patient, but as Scottish Rite as a whole."

Physician assistant Ben Johnson agrees. "The care we provide is a team-based approach with all team members focused on a singular goal of getting patients like Emily Claire back to doing what they love to do without limitations," he says. The exceptional dynamic of Scottish Rite's continuum of care results in optimal outcomes for patients. "The key to Emily Claire's success is the fact that she had an opportunity to work with our team together," Dr. Ellis says.



Emily Claire strengthens and conditions in Scottish Rite's Bridge Program.



Emily Claire liked the team she worked with so much she decided to join it. Over the summer, she interned at the Frisco campus' Movement Science Lab, processing data for a neurocognitive research study. "I have received so much at Scottish Rite — and not just care," she says. "Everybody here is so kind and loving, and they want to help you not just get better and achieve your goals, but they're willing to help you learn."

Emily Claire's time at Scottish Rite has inspired her to become a physical therapist. "Instead of something that I had to go to, physical therapy became something that I looked forward to," she says. "Everyone was there for me." Katie shares that Emily Claire's interest in the field of physical therapy was rewarding to her as a provider. "It shows that her time at Scottish Rite made

a positive impact on her even when things got hard," Katie says.

Upon reflection, Emily Claire explains that her care journey also changed her mental health. "It showed me that I was more unhappy than I was happy playing softball, and that softball wasn't for me," she says. "I thought I was going to let so many people down if I didn't play, but it opened my eyes and showed me that I like doing FFA a lot more."

Recently, Emily Claire received the news that she was accepted to her college of choice, Tarleton State University, where she will pursue a degree in kinesiology. Upon graduation, she plans to attend physical therapy school. But for now, she is enjoying her senior year, beginning this fall, when she shows her superstars, Dolly and Kenny, at the State Fair of Texas. «



Physician assistant Ben Johnson, P.A.-C., A.T.C.; Emily Claire; physical therapist Katie Sloma, P.T., D.P.T., CSCS; and pediatric orthopedic surgeon Henry B. Ellis, M.D.



Cooper the Trouper: On a Mission To Mobilize

"I can't wait for you to see the little tricycle up in the ceiling," BJ said to his wife, Ashley, when they arrived at Scottish Rite for Children in January 2023. Ashley and BJ Burton drove from their home in College Station with their 2-month-old son Cooper to see Scott Oishi, M.D., FACS, hand surgeon and director of the Center for Excellence in Hand.

BJ was referring to the "Flying Machine," a giant dirigible, or airship, powered by aviators and teddy bears that hangs from the ceiling in the Atrium of Scottish Rite's Dallas campus. The "Flying Machine" has delighted children and families since 1978. It represents mobility for the patients of Scottish Rite. BJ remembered it fondly from his time at the hospital as a child when he received treatment for a rare form of congenital

arthrogryposis, a condition that affects the joints and causes contractures that limit movement. His case affected his hands and feet.

When Ashley was 30 weeks pregnant, a 4D ultrasound revealed that Cooper's hands were, in BJ's words, "drifting." Ulnar drift is a hand deformity that occurs when the joints contract and cause the fingers to bend toward the pinky finger, a symptom of arthrogryposis. "We noticed his hands first, so we started to prepare ourselves," BJ says. When Cooper was born, BJ saw that his feet were deformed as well. "I knew they weren't clubfeet because I had clubfeet," he says. "The people at the hospital didn't know, and they were spitting out all kinds of disheartening things. Obviously, that's not what you want to hear less than 24 hours into the birth of your child."

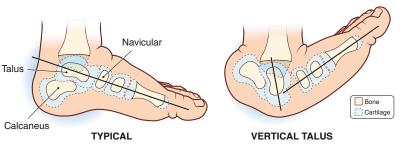
At Scottish Rite, where BJ had found hope years ago, Dr. Oishi evaluated Cooper and confirmed a diagnosis of arthrogryposis. The Burtons learned that when Dr. Oishi came to Scottish Rite, his mentor was hand surgeon Marybeth Ezaki, M.D., who was BJ's physician when he was a child. Scottish Rite for Children was the first pediatric orthopedic facility in the United States to employ full-time hand surgeons. "It was really comforting for me," BJ says. "Knowing that I got great care at Scottish Rite, I knew that care would transition to Cooper as well."

For Cooper's hands, Dr. Oishi prescribed splints to wear at night and at nap time to stretch his fingers and keep his thumbs from tucking into his palms. For his feet,

"The Flying Machine" represents mobility for the patients of Scottish Rite.

Dr. Oishi referred the family to Anthony I. Riccio, M.D., pediatric orthopedic surgeon and director of the Center for Excellence in Foot.

Dr. Riccio diagnosed Cooper with congenital vertical talus, a rare, complex foot deformity that causes the sole of a child's foot to flex in a convex position, forming a rocker-bottom appearance. A bone in the ankle, the talus, connects the lower leg bone, or tibia, to the foot. "The talus is normally positioned at about a 90 degree angle to the tibia, but in a congenital vertical talus, the talus points straight down," Dr. Riccio says. "Because the talus is the central and most important bone in the ankle and foot, the bones around it fold up on either side, resulting in a V-shaped foot." Affecting 1 in 10,000 births, the condition can occur in children with no other conditions, as well as those who have a variety of syndromes, like arthrogryposis. "We had never heard of vertical talus," BJ says. "I knew that Cooper would face challenges, and I was torn apart because I felt responsible."



"I was terrified that he wasn't going to be able to walk," Ashley says, "but I remember Dr. Riccio saying, 'He will be able to walk. He will be able to play baseball,' and that meant a lot to us." The Burtons are a baseball family. BJ coaches varsity at A&M Consolidated, a local high school.

Cooper would need surgery on both feet, but first, Dr. Riccio prepared him for the operation by gently stretching and realigning his feet through manual manipulation and casting. For two months, the Burtons drove back and forth from College Station every week as Cooper received a series of seven casts. When Cooper was 6 months old, he underwent surgery. Dr. Riccio ensured that his joint was aligned, stabilized it with a pin and then released his Achilles tendon, which brought his foot into the correct position. Cooper came out of surgery with a long cast on each leg. After six weeks, the casts were removed, and he wore a boots and bar brace, which is comprised of special shoes, or boots, that are connected by a metal bar that kept his feet in the corrected position. He wore the brace 23 hours a day until he pulled up to stand when he was 10 months old.



Dr. Riccio examines Cooper's foot with Ashley, Cooper's mother.

To promote walking, Cooper transitioned to wearing an ankle foot orthosis (AFO) on each foot during the day and the boots and bar at night. "He started walking along the couch and pushing his little push toy," Ashley

says. And then, at 14 months old, Cooper walked on his own. "We thought he was going to be severely behind developmentally, but he's right on track," she says.

Today, Cooper is walking all over the place. "Nobody would ever guess he went through bilateral foot surgery," BJ says. "He's already hitting a ball off a tee and running to the front door like it's a base, and then he comes back with a huge smile on his face!"

Dr. Riccio says, "The outcome is exactly what I hoped it would be — it's a perfectly aligned foot." Cooper will continue to wear the AFOs as he grows and the boots and bar at night until he is 4. Because the condition can recur, Dr. Riccio will monitor Cooper's feet as he gets older, and Dr. Oishi will continue to treat his hands. "We definitely found the best of the best at Scottish Rite for everything," Ashley says. BJ concurs, "The moment we got there, we just knew that this was the place we were supposed to be." "





John G. Gunning knows the sea. He has piloted ships most of his life. "The phone would ring, and you'd have just a few minutes," he says. "You'd go down to the dock. The pilot boat would pick you up, and we would meet the inbound ship five or six miles out to sea. You'd climb up the rope ladder, go to the bridge and move the ship in." That is maritime speak for accompanying, or piloting, a large marine vessel from ocean waters into a port of call.

For four decades, Gunning served as a state of Texas branch pilot for Port Freeport in Freeport, Texas. He was initially commissioned in 1978 by the Texas governor and served until 2018. "Our job was to prioritize the interest of the state in safe navigation and efficient movement of all inbound and outbound commerce in the waterways of Texas," he says. Gunning has logged navigational control of more than 14,000 ships. "I've moved almost everything that floats — sailing ships, like the Elissa in Galveston, oil rigs, tankers, freighters, bulkers, chemical ships," he says. In 1998, he was elected president of the Texas State Pilots Association. "I had the privilege of representing our interests to legislators and in national forums that affected the profession," he says.

Gunning was born in St. Cloud, Minnesota, and grew up in the Midwest. He graduated from Texas A&M University with a Bachelor of Science in Marine Transportation and earned a Master of Education at the University of Houston. At A&M, he completed the Navy ROTC program, and upon graduation, he

was commissioned as a naval reserve officer. He also obtained a U.S. Coast Guard license as a merchant officer and went to sea for several years, working on commercial vessels for ventures including Lykes Brothers Steamship Company, Transport Commercial Corporation and the U.S. Army Corps of Engineers. Later, he served as an associate professor and department head of oceanic and marine technology at Brazosport College in Lake Jackson, Texas, before becoming a branch pilot.

In 2010, Gunning became a Mason, and in 2014, he was appointed to the Scottish Rite for Children Board of Trustees, representing the Galveston valley. "Being a part of the board is the epitome of anything I could ever dream of," Gunning says. "Scottish Rite is a place where children receive care and compassion from the premier doctors in pediatric orthopedics. It is a place where families find hope."

Since 2017, Gunning has been a Certified Healthcare Trustee through the Texas Healthcare Trustees (THT), the oldest trustee organization in the country. THT is affiliated with the Texas Hospital Association and believes a knowledgeable board member enhances leadership, resulting in healthier communities. "Attending the THT Healthcare Governance Conference is an important way to stay informed regarding best practices and future solutions in the industry," Gunning says.

Gunning and his wife, Angela, are retired and live in University Park, Florida. They have 11 children, 14 grandchildren and one great grandchild. «

A Win-Win Way To Give From the Heart

"I've always had a soft heart for children," Dorinda McKnight says, describing why she and her husband Richard give to Scottish Rite for Children. The couple is enjoying their retirement in Little Elm, Texas. They give to Scottish Rite through a qualified charitable distribution, which is a giving opportunity that allows an individual age 70 ½ or older to transfer up to \$105,000 per year from their individual retirement account (IRA) to a qualified charity without having to pay income tax on the money.

Dorinda began giving to Scottish Rite to honor her late husband, John Carrington, who was a Mason, as well as her son, Jeff Carrington, who became a Mason to honor his father. In addition, the McKnights' granddaughter Hannah was a patient at Scottish Rite for Children Orthopedic and Sports Medicine Center in Frisco. When she was 6, she broke her elbow on the playground at school and received surgical treatment. "To this day, she plays soccer and does gymnastics," Richard says.

GIVING TAX-FREE THROUGH AN RMD

When the owner of an IRA turns 73, they must take a required minimum distribution (RMD), an amount that must be withdrawn annually. If the owner receives the amount, it is taxed as income, but if it is transferred directly to a qualified charity, it is tax-free. "When we reached the age where we had to start taking the RMD, we knew we didn't need all of the money," Dorinda says. "We found out about donating directly from our RMD, which not only helps the charity, but it reduces our taxable income." Because the gift does not count as income, it can reduce an individual's annual income level, which may help lower Medicare premiums and decrease the amount of Social Security that is subject to tax.

"My granddaughter had a great experience," Richard says, "and we feel that we need to support Scottish Rite for Children." Dorinda adds, "As long as we can, we're going to continue donating."

DESIGNATING AN IRA BENEFICIARY

Maureen Hyslop also contributes through her IRA. She connected to Scottish Rite through her late husband Robert, who was originally from Scotland and was a Mason in the Royal Order of Scotland. Maureen is originally from Ireland. The couple met in Canada, married and moved to New York. "When we were married a few years, I said, 'There's no kids coming this way. I think the right thing to do is to take care of the hospitals,'" Maureen says. Robert agreed.

DONOR SPOTLIGHT

Now, retired and living in Florida, Maureen gives 100% of her RMD directly to Scottish Rite for Children. "It's a win-win situation," she says. "The most important thing is you're giving to the kids. The benefit of using your IRA money to donate directly to the hospital is the government doesn't tax the money." Maureen has also designated Scottish Rite as a 100% beneficiary of her IRA.

"The little bit that I give, I know there's a child benefiting from it, and that puts a smile in my heart," Maureen says.

Maureen advises everyone to designate a beneficiary. "If you don't have anybody," she says, "please remember Scottish Rite for Children."

"Thank you to the McKnights, Mrs. Hyslop and all those who give to Scottish Rite for Children through their IRAs," says Stephanie Brigger, Vice President of Development. "Remembering Scottish Rite in your retirement years and beyond is a great kindness, and your generosity and compassion for our patients is enduring." «

For more information about ways to give during retirement, please contact Senior Development Officer Mike Stimpson at 214-559-7886.

This article is not intended as tax advice. For such advice, please consult your tax advisor.

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