



In only two days, Mary left lessons for a lifetime

By Linda Schulz

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Linda Schulz originally wrote the following as an entry in her journal, something a grief counselor suggested after Linda's daughter, Mary, died unexpectedly of neonatal hemochromatosis – a genetic disorder.

When we were expecting our fourth child, we were filled with joy and anticipation. After having an ultrasound and amniocentesis, we thought we had reassurance that soon we would be holding our healthy baby. The birth of a baby is a beautiful miracle that perhaps we have come to take for granted.

For months we prepared for our baby's birth. Mary was born, and passed away two days later. Nothing could have prepared us for this. We left the hospital with empty arms and in a state of shock.

Life doesn't always go as we plan, but it is from our hardest challenges that we grow. This was the time that I was supposed to teach Mary about life, but instead she is teaching me. Days after Mary passed away, I read in one of my "Empty Arms" books that life will never be the same. In that time of shock and despair, it scared me to hear that. Did that mean the unbearable pain would never go away?

All those years I bought sympathy cards for others that said "May God give you strength and comfort during this difficult time," I never once really knew the meaning of that. Now, I know that is exactly what happens. Instead of me praying for Mary, she is praying and watching over her family.

I will never forget the week after Mary died, my neighbor gave me an angel charm. That night when I put it on, this incredibly peaceful feeling overcame me. It felt like Mary was entering my heart; like I had a part of heaven so very close to me.

I have come to learn that grieving brings about a vast array of emotions.

I'm beginning to understand the ups and downs of the grieving process. When things, songs,

babies remind me of her not being here with us, the pain is quite unbearable. But then there are the memories of her in our arms, the memories of her beautiful birth, the memories of her response to my voice that are so precious. I never want to forget that. Knowing her spirit lives on in heaven gives me a sense of peace I have never known before. Mary brings a piece of heaven in my heart and I know that someday we will be together again.

Although we wish we could enjoy her physical presence, we try to remain focused on her spirit. Our children have, on their own, found ways to do so, too. On our 4-year-old son's birthday, the children picked flowers, tied them on the string of a helium balloon and let it go. They told me they were sending flowers to Mary. In many ways, they show that she is a big part of their lives.

Once, when with a friend, we were laughing and she asked me, so are you over Mary now? In astonishment, I thought nothing could be further from the truth. You never forget, you never get over it and you are never the same. But you do go on with life, you make peace and cherish the memories that you have.

So can life ever be the same after such a tremendous loss? No, it cannot. You learn that life is sacred and you can never take that for granted again. Mary only has been gone from us for a few months and although the grief can be so overwhelming, she has already made me a stronger, better person.

As I go through life, I truly cherish my children and other people. Little things don't upset me as much. I am more empathetic toward others and I feel a closer relationship to God as I felt His great presence comfort me. As Mary would want, I will use this strength to be a better parent to our children and a better person to all.

Thank you, Mary, for these lessons of life. I am grateful for your presence in our lives. ❖

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The possibility of hope

By Andrea Gambill

Reprinted with permission, *Bereavement Magazine* May/June 1994, Bereavement Publishing Inc., 8133 Telegraph Drive, Colorado Springs, Colorado 80920

As spring transitions into summer, we are encouraged by the warmth of the sun to open our frozen hearts to the possibility of hope.

An ancient fable tells about an argument between the sun and the wind. . . .

The sun and wind often quarreled about which was the most powerful. Finally, the sun persuaded the wind to a challenge. Whichever of them could cause the man walking on the road below them to remove his cloak would be the most powerful.

The arrogant wind rose to the occasion, thinking himself stronger than the sun.

As the wind began to blow, the man clutched his garment around his shoulders. The wind blew more fiercely and the man drew his cloak ever more tightly around himself. At last, the angry wind attacked the poor man until he nearly was blown off the road, but the man resisted, doggedly protecting himself with his guardian cloak.

Finally, in disgust, the wind admitted his failure, but mockingly challenged the sun to produce a better result.

Gradually and ever so gently, the sun shone down on the man trodding along the path. Soon, the warm rays of the sun began to invade his bones and in a short

time, the man released his tight grip on the cloak. In a few minutes, the cloak was open, welcoming the sun's gentle and gracious presence. Finally, the man removed his cloak completely and spread it on the grass next to the path. He laid down to rest and basked in the pleasant warmth.

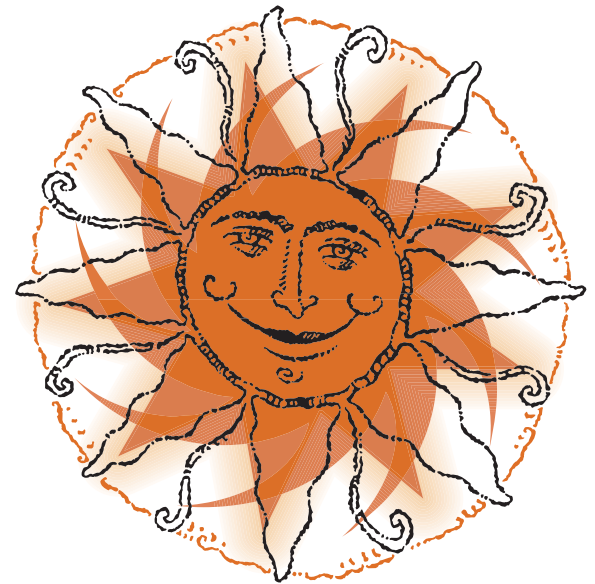
Light, warmth and gentleness always will vanquish ferocity and aggression if only we have the patience and tenacity to hang on.

Grief has been our fierce wind, but the gentle, pleasant sun rays can warm and comfort the most resistant heart. Look now at the flowers, the grass, the blueness of the sky, the white, fluffy clouds and see hope.

Smell the freshness of new life and be reminded nothing really is lost, only changed for awhile. Warmth and chill often may trade places in the dance of life, but hope always will call the steps.

For those whose pain is fresh and raw, it is hard to imagine there ever will be a better time, but the testimony of veteran grievers can be encouraging. Like the hard and frozen ground of winter, suffering softens with the gentle rain and sunshine of spring. Not necessarily on the timeline of the actual seasons, but gradually healing.

Those who have crawled through the broken glass of grief bear witness that the excruciating journey eventually is over as the shards diminish and even disappear. We are left with our scars, but the initial pain no longer has power over our lives. The "summer" of grief can be a mellowing and growing time if we allow hope to prevail in our hearts. Our experience teaches



us to widen our horizons and we learn to let compassion billow around us like chiffon in a gentle breeze.

It generally is in summer we see rainbows, but they almost always are preceded by storms. It is in summer we see the results of our late-winter and early-spring planting and investing of emotional efforts.

Grief is hard work, but when we have attended to the task it requires, summer grief can give us a time of rest and renewal. Like the seasons, we know our pain may come around again and again, but each time we are encouraged by our experience which proves we should never give up. Often, a new perspective lies right around the next rainbow.

Continually we learn, we grow, our souls are weathered and we become stronger and more resilient as we forever follow on the trails of hope. ❖

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By Ralph A. Franciosi, MD – *Franciosi is a pathologist at Children's Hospital of Wisconsin and a professor of Pathology and Laboratory Medicine at the Medical College of Wisconsin.*

Stillbirths are devastating events

Interest in the issue of fetal deaths, specifically stillbirths, seems to have increased recently. A stillborn baby is a fetus who dies in utero after 20 weeks of gestation. There are no signs of life present after or before birth. A stillbirth is a devastating event to families who must cope with such a tragedy.

Dr. Willinger, chief of the Pregnancy and Perinatology branch at the National Institute of Child Health and Human Development, presented a paper titled "New Directions in Fetal and Infant Mortality Research." She indicated that there are 6.2 million pregnancies a year that result in 26,702 fetal deaths. About half have an undetermined cause of death. Currently there is no significant ongoing funding for research into the etiology and/or cause of stillbirth. The objective of her talk was to set a national agenda for stillbirth research.

The rate of fetal death (the number of fetal deaths /1000 births) shows a racial disparity. Caucasians have a rate of 5.7 for every 1000 live births, while African Americans have a rate of 12.3

for every 1000 live births. This disparity decreases with late fetal deaths (more than 7 months gestational age) to 3.1 and 5.3 respectively.

The risk for stillbirth increases with maternal age, obesity, cigarette smoking and maternal diseases such as diabetes, infection, placental abruption and preeclampsia. However, the cause of stillbirth, in most cases, is unknown. A specific group of sudden intrauterine unexplained fetal deaths particularly is troublesome when they occur in the last month of pregnancy, because research studies suggest a relationship to Sudden Infant Death Syndrome (SIDS). It is important that the potential relationship between SIDS and stillbirth continue to be explored. To identify the relationship, research would need to look at physiological, genetic and environmental factors.

I presented a poster presentation at a conference attended by representatives of a nationwide network of state Maternal and Child Health programs to address the issues of pregnant women and their children. At that time I pro-

posed that the study of stillbirths be given greater prominence and the existing network of SIDS programs and services be expanded to accommodate such a study. Such a move would build on the infrastructure in place and could further better understanding between SIDS programs and research groups.

The nation-wide network of SIDS centers would coordinate this initiative. Each program would be a statewide, public health program under the direction of the Maternal and Child Health Bureau. Key to such an effort would be the dedication of resources to allow for such an initiative to become a reality.

The health and well-being of women and their children has been poorly served. If our future is to be invested in our children we have an obligation to guard their welfare. The initiatives on fetal mortality by the NICHD are a start in the right direction. ❖

Opportunity Amidst Crisis: Keeping Hope Alive

Reprinted with permission, Department of Health and Family Services: www.dhfs.state.wi.us/dph_bcd/Bioterrorism/Coping.htm

September 11, the many alerts and the war following have been difficult for everyone. Many changes have occurred as a result and families who have experienced the death of their child are dealing with multiple stresses. We are providing this abridged version of an article that can be found on the Department of Health and Family services Web site to help families deal with their response to the threats of terrorism. You also may want to use this to help your child understand and deal with the death of a brother or sister.

In these difficult times, people are trying to deal with intense feelings. Terrorism intends to fill people with fear. Our response is to foster ways for people to turn their fear into opportunities for growth.

We offer the following as a guide to develop a sense of security and safety, to reach out to others in deeper ways, to listen more intently and to respect each other's views with greater sensitivity. These messages are built on the following assumptions:

Resiliency: Resiliency is the capacity to stay healthy in the face of adversity. Studies of people who have endured severe hardships demonstrate the potential for human beings to bounce back. Resiliency can be learned. All people have the capacity to become resilient. Resiliency is not reserved just for individuals, it is a process that begins with the individual and incorporates the influences of family, community and society. Children especially are resilient, but they're also vulnerable. Adults have a responsibility to bring out resiliency in children.

Community: Now more than ever we need to come together as authentic communities. Social support, service and civic commitment are of vital importance in promoting the health of all. When people feel they matter, they are more likely to be healthy – physically, mentally and emotionally. Americans are challenged to model a high level of treating each other with dignity and respect rather than with

stereotyped judgment.

Need for information and trust: People want clear and accurate information. False reassurance undermines trust. Candor based on facts should be the foundation for communication.

For all adults:

Make connections: Draw on and deepen your relationships. Take more time to spend with family, neighbors, co-workers, and friends. Become involved in your community.

Look for meaning: Find meaning in events. When thinking about the September 11 attacks, try not to dwell on the horror of the deed, but focus on the humanity and generosity that has resulted.

Avoid denial: Don't shut out the reality of what has happened, but put it in perspective. Find ways to share your feelings in ways that elicit meaning rather than fear.

Practice respect: What better time to treat others with dignity and respect. The way we engage in relationships impacts our health. Positive relationships will help us all stay healthier.

Limit media: Try to avoid stimuli that exaggerate and reinforce fear. Limit access to media that may expose you to repeated sights and sounds that only provoke fear.

Take care of yourself: People can't reach out to others unless they are healthy themselves. Eating well, exercising, getting plenty of sleep and engaging in activities that bring joy and inspiration are more important than ever.

For parents, teachers and caregivers

Listen: Take time to listen to your children about what they have seen and heard. Pay attention to what they are feeling. Listen carefully to their fears and ask questions that encourage critical thinking. They need to know the adults in their lives love and honor them and will do everything they can to keep them safe. Be honest and genuine about your feelings, giving factual answers when possible. If adults are not genuine with children during this time of ongoing uncertainty and fear, many of

them will become alienated, anxious and depressed. Help them try to see the good things that have come out of the tragedy and find meaning in the events that are happening.

Talk: You may be confused about how you feel at times – this is normal. Don't be afraid to express your feelings. Try not to focus on fear, but on all the good things that have come about – like people working together and giving to others.

Act: Encourage children to express their feelings by drawing pictures, playing music, taking photographs, writing letters or in journals. Suggest they volunteer for a fund-raiser, write a letter, attend events that are planned in your neighborhood, or hug a friend.

Spend time: Spend time with your children, and encourage them to spend time with trusted adults and friends.

Create a supportive environment: Reassure them of their safety and let them know they are loved and cared for. Become more involved with their schools. Maintain schedules and routines as much as possible. This gives children a sense of security.

Limit television: Limit the time your child spends watching TV. Often children may not realize they are seeing the same event over and over, but may think it is happening again. Monitor your child's access to the news and talk about what they see.

Promote self-esteem: Help children find ways they feel they can be involved. Support their decisions to be involved in memorials, rituals, activities or donations of time or money.

Appreciate what you have: Try to keep things in perspective. Things may be scary and you may be worried, but remember that while there are scary things out there, there is much more good and the chances of anything happening to you or your family are small. Know that your family, teachers and many other people are doing everything they can to protect your children and keep them safe. ❖

“Am I still a big sister?” by Joanne Caacciatore

“How many brothers do you have”, they ask her.
“I have three brothers,” she says.
“Wow! And how many sisters do you have?” they ask again.
“I have one sister. But she’s in Heaven taking care of us,” she replies proudly.



These were words that made my eyes fill with tears when I heard them. My daughter, 6 years old, has fearless strength I often envy.

I feel my efforts to encourage questions and communication was beneficial for our children. Children may be too frightened to ask without assurance. We kept our answers honest and simple.

Another factor I feel was extremely beneficial for our children was our “open emotion” policy. I allowed myself to cry, wherever and whenever I felt the need to. As a parent, they looked to me as an example. I was able to set a standard for them.

My openness validated their feelings of loss and despair. It made them feel comfortable to come to me when they felt overwhelmed. I cried many, many times in front of them.

And then I would let them see me laugh again. The expression of grief is not something to be hidden, nor is it reason to be ashamed. The life and death of their deceased sibling certainly is worth acknowledging the pain.

In times when my children wanted to express their grief, I encouraged them to cry, yell, punch a pillow, and accompany me on a walk or anything else they felt would help them through the difficult

time. On several occasions, I encouraged them to draw a picture or write a letter to their sister, which we then would take to the cemetery. In this way, they were able to express a great deal more than attempting to verbalize an emotion difficult for them to communicate.

Another helpful idea for siblings is to offer them a special remembrance token of their sibling. For example, give them their sibling’s favorite rattle or toy. It is a tangible reminder of a love that will never be forgotten.

Every Christmas, our children choose a special ornament in memory of their sister to hang on our tree. It is engraved with her name and the year. They know we have not abandoned her memory, nor will they.

Reassure your children they are still a big brother or big sister even after the death of their sibling and always will be. Take time, even years later, to reminisce together and share memories of your precious child. The pictures of our beloved daughter and sister still hang on our walls. They have become a permanent fixture in our home. Despite outside pressure, they remain. She is a significant part of our past, our present and our future. I want our children to know their sister. I encourage them to remember her and the beauty she gave our lives. Her surviving siblings have a simplistic and genuine gift of discernment for grieving. Everyday, I strive to become more and more like my children.

Reprinted with permission from Wings, June 1999.

My Guardian Angel

I feel so alone
My heart is in two
Though I have grown
I miss you Boo
I have to take time
To go on with my life
Everytime I hear cries
I think of losing your life
I wish I could have seen your smile
I wish I never had lost a child
You are always on my mind
When it is cold or
When I look up at the sky
I wanted to see you grow old
I cannot go back in time
What is meant to be will be
As I said you are always on my
mind
At least I know you are free
My guardian angel
Watching over me
I picture your halo
And the day you would turn three
I know I cannot change what
happened
But I always look back and think
How would it have been
If I had done something differently
As the years go on it may hurt less
But you my son are truly blessed.

*In loving memory of
Josiah Chance Ludka-Montanez
May 31, 2001*

Center and satellite summaries

U P D A T E

Infant Death Center and South/Southeastern Region

Anne Harvieux: (414) 266-2746 or
Larry Uglow: (414) 266-2745.

Educational programs

Presentations on SIDS, risk reduction strategies, grief/loss issues and services provided by the Infant Death Center of Wisconsin were given on:

Feb. 5, 6 and 7 – Daycare provider training, Milwaukee County.

March 5 – Southwest Key, Milwaukee.

March 11 – Mequon daycare training.

March 14 – Northeastern Technical College, Green Bay.

March 15 – Little Learners Daycare Center, Lake Geneva.

March 27 – Meta House, Milwaukee.

April 2 – New Concept, Milwaukee.

April 22 – Catholic Charities, Milwaukee.

April 30 – Concordia College, Mequon.

May 14 and 16 – Discussion on fetal infant mortality review findings and implications for care, with staff at Children's Hospital of Wisconsin.

May 15 – Rosalie Manor, Milwaukee.

June 3 – Grief and children, All People's Church, Milwaukee.

June 14 – Risk Reduction to Infant and Young Child Committee, Wisconsin Association for Perinatal Care.

June 20 – Safenow Safety Services, Milwaukee.

July 10 – Respite Center, Madison.

July 10 – Voices United Foster Parent Group, Milwaukee.

Informational displays

Displays were provided or staffed on:

March 10 – St. Joseph's Community Hospital, West Bend.

March 13 – Richard Kluge Health Fair, Milwaukee.

April 5 – Up Connection Health Fair, Milwaukee.

May 18 – World of Women Conference, Milwaukee.

June 12 and 13 – Wisconsin Public

Health Association meeting, Appleton.

June 14 – Wisconsin Coroners and Medical Examiners Association annual training.

August 10 – Dr. Martin Luther King back to school festival, Milwaukee.

Programs for families

A support group for families meets at 7 p.m. the fourth Tuesday of the month at Children's Hospital. For more information, call Larry Uglow, (414) 266-2745.

Other

June 21 – Statewide community council meeting, Portage.

June 28 – Participated in the Gathering, a program of the two Wisconsin Healthy Start Projects.

Collaborations

The center continues to be involved with:

- 4Cs of Milwaukee County.
- Association of SIDS and Infant Mortality Program Professionals.
- Dane County Pediatric Death Review.
- Great Lakes Intertribal Council Honoring our Children Project.
- La Causa.
- March of Dimes.
- Milwaukee Fetal Infant Mortality Review Project.
- Milwaukee Healthy Beginnings Steering Committee, Data Evaluation Committee and Consortium.
- State of Wisconsin Bureau of Health Information.
- State of Wisconsin Division of Public Health.
- Supporting First Time Parents.
- The African Infant Mortality Workgroup.
- Wisconsin Child Care Resource and Referral Network.
- Wisconsin Early Childhood Association.
- Wisconsin Maternal and Child Health Coalition.
- Wisconsin Public Health Association.

Western Region

Phillip Nielsen: (608) 791-9410.

Educational programs

Presentations on SIDS, risk reduction strategies, grief/loss issues and services provided by the Infant Death Center of Wisconsin were given on:

Jan. 29 – Train the Trainer presentation in Eau Claire for child care workers.

March 2 – Presented "Babies Sleep Safest on Their Backs" at the "Caring for Kids...Yesterday, Today & Tomorrow Conference" sponsored by the Rochester Childcare Resource & Referral, Inc.

April 20 – "Grief Through the Eyes of a Child" – A workshop that provides information to parents/families about children's grief, ways to support their needs and ways to provide children an opportunity to acknowledge their grief. This is a semi-annual collaborative event.

May 14 – Sparta High School students, Franciscan Skemp's Parenting and Child-care Workshop.

Media

Feb. 22 – Was interviewed by the La Crosse Tribune for an article about SIDS risk reduction training for child care providers.

Feb. 22 – Was interviewed by WKBT-TV regarding the Wisconsin legislation requiring SIDS risk reduction training for child care providers.

Programs for families

The La Crosse support group has resumed meeting the third Thursday evening of each month from 7 p.m. to 8:30 p.m. Registration is necessary, but there is no cost to attend. Call the Western Region Satellite Office at (608) 791-9410 to register, or for more information.

A children's grief workshop "Grief Through the Eyes of a Child" will be held this fall at the Children's Museum of La Crosse. For more information, or to register, call the Western Region Satellite Office at (608) 791-9410.

Northeastern Region

Beth Tourville: (920) 969-7903.

Educational programs

Center updates cont.

Presentations on SIDS, risk reduction strategies, grief/loss issues and services provided by the Infant Death Center of Wisconsin were given on:

March 14 – Child care provider training, Northeastern Technical College.

Programs for families

We are seeking a new location for our support group and will notify families when a location has been secured. If you are interested in attending a support group, please call Beth Tourville at (920) 969-7903.

Northern Region

Dora Gorski: (715) 843-1877

Educational programs

Presentations on SIDS, risk reduction strategies, grief/loss issues and services provided by the Infant Death Center of Wisconsin were given on:

April 28 – Training for public health nurses and community health nurses and outreach workers at Lac du Flambeau, in cooperation with the Great Lakes Inter-Tribal Council.

Other

May 20 – Attended the Child Fatality Review Team meeting in Marathon County.

June 9 – Attended the Great Lakes Inter-Tribal Advisory Council meeting in Lac du Flambeau.

Programs for families

July 14 – The SAID Group hosted a family potluck picnic at Marathon Park in Wausau for families who have lost an infant.

The Infant Death Center thanks the following individuals for their generous donations in memory or honor of a special child or person. **These donations were received between Jan. 1 and May 30, 2002.**

In memory of Jack Michael Cleveland

Mr. & Mrs. John A. Marzion
Mr. & Mrs. Chad M. Wiedmeyer

Jared Ryan Finnegan

Mr. & Mrs. Joseph Finnegan

Matthew Alexander Gauthier

Mr. Michael N. Buresh

F Michael Groth

Ms. Judith A. Cline
Mr. & Mrs. William L. Cook II
Mr. & Mrs. J.T. Graf
Ms. Barbara S. Grande
Mr. & Mrs. John Herod
Ms. Mary Hunt

Mr. Jeffrey Killberg
Ms. Megan Kilps
Mr. & Mrs. David M. Lichterman
Marshall & Ilsley Corporation
Mr. & Mrs. Jeffrey C. McClellan
Ruth & Mississippi Monteith
Kris E. Oates
Ms. Gail C. Piche
Mr. & Mrs. James H. Rowe
Ms. Ellen Donahue Ryan & Ms. Mary
Donahue Kelly
St. Joseph Hospital - Care
Management
Ms. Virginia M. Stone
Ms. Nena Tally
Mr. John C. Wagner
Ms. Laura Weismueller
Ms. Gerry Woody

Celine Elizabeth Groves

Mr. & Mrs. Simon J. Neicheril

Kera Jo Haase

Mr. & Mrs. Kevin R. Colwell &
Family
Mr. & Mrs. Bruce A. Otterberg

Ellen Marie Hoffmann

Mr. & Mrs. Warren L. Wilson

Mamie Kallin

Mr. & Mrs. Richard P. Larsen

James Herbert Lucht

James H. Lucht Benefit

To make a gift

Children's Hospital Foundation is available to assist you if you or your organization is interested in making a donation to the Infant Death Center of Wisconsin in memory of a child or other person. Annual giving and memorials are handled through the foundation and recognition opportunities are available. To reach the foundation office, call (414) 266-6100.

Periodically throughout the year, you may receive mailings from the foundation seeking support. Often there is a card enclosed with options for giving. Please feel free to check the Infant Death Center as an option, or write in the center if it is not listed on the card.

The center also can be chosen as an option on your United Way designation form, however, it must be written in on the designated form. Your support of the program allows us to provide a continuum of services throughout the state. Please know this support is most appreciated.

Many companies provide a match to donations given by their employees. You may wish to check with your employer to see if such a program is available to you.

Wisconsin Perspectives is the newsletter of the Infant Death Center of Wisconsin. The goal of this newsletter is to promote the statewide exchange of information regarding infant death issues.

The Infant Death Center of Wisconsin is funded by Children's Hospital of Wisconsin and a MCH Title V Services Block Grant, through the Maternal Child Health Bureau of the Health Resources and Services Administration, Department of Health and Human Services.

If you are receiving this newsletter for the first time, it is because you have been referred to the center at Children's Hospital of Wisconsin. Please contact us at (414) 266-2743 if you wish to be removed from the mailing list. With any questions or comments about the program or newsletter, call Anne Harvieux, program administrator, at (414) 266-2746.

To reach the center and the South/Southeastern regional office, call Anne Harvieux at (414) 266-2746 or Larry Uglow at (414) 266-2745. To reach the satellite center in your region, contact Phillip Nielsen in Western Wisconsin at (608) 791-9410, Dora Gorski in Northern Wisconsin at (715) 843-1877, or Beth Tourville in Northeastern Wisconsin at (920) 969-7903.

New arrivals:

Congratulations to the following families on their new additions:



Conswella Bragg was born Feb. 8 to Nia Iman and Niyla Milan Phillips.

Riley Joseph Szozda was born March 11 to Michael and Heather Szozda.

Alec Charles Hotchkiss was born April 10 to Tasha and Craig Hotchkiss.

Parker James Smith was born April 10 to Janell and Daniel Smith.



Andrew Yaccarino was born April 10 to Dennis and Karen Yaccarino.

Madison Elizabeth Peters was born April 16 to Melissa and Michael Peters.

Shelby Anne Becker was born April 20 to Jennifer and Paul Becker.



Mavrick Paul Kreager was born June 12 to Julianne and Keith Kreager.



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