

GATE MIDDLE SCHOOL COUNSELING RESOURCE NEWSLETTER

April 2019 Edition: Misdiagnosis

Julia Molodt, School Counselor



As the GATE middle school counselor, I am sending a monthly newsletter with tips, resources, strategies, and interventions to support GT students. This month's newsletter provides resources and information on the topic of misdiagnosis of gifted children. SENG (Supporting Emotional Needs of the Gifted) is a nonprofit organization dedicated to help guide gifted and talented individuals reach their goals. Since 2012, SENG has launched an initiative to raise awareness about the possible medical misdiagnosis in gifted children, and it provides a wealth of information on this topic such as a video entitled "The Misdiagnosis of Gifted Children" (link below), an informational brochure (attached in English and Spanish), a mental health provider directory, and various articles on the topic.

Featured Resources (attached):

1. **"The Misdiagnosis of Gifted Children"** – video - <https://youtu.be/9XN710teagI>
2. **"Decreasing Medical Misdiagnosis in Gifted Children"** – brochure in English and Spanish - https://docs.wixstatic.com/ugd/69689e_b64a7557c70f4eaeae92bdb00181bc1f.pdf
3. **"Misdiagnosis"** – article by Ruth Carlstrom - <https://www.sengifted.org/post/misdiagnosis>
4. **"Where Does a Pediatric Doctor Fit in the Care of Gifted Children?"** – article by Marianne Kuzujanakis - <https://www.sengifted.org/post/where-does-a-pediatric-doctor-fit-in-the-care-of-gifted-children>

Featured Books:

1. **Misdiagnosis and Dual Diagnoses of Gifted Children and Adults** by Webb et al (2005) – this book addresses the relationship between giftedness and ADHD, Bipolar, OCD, Asperger's, Depression, and other disorders.

GIFTED...It Need Not Be an Elitist Word:

*Let's not disillusion our
brightest minds before they
even get a chance.*

Educate Yourself About Giftedness:

*Pediatric clinicians play a pivotal
role in promoting healthy growth
and development in gifted children.*

- Enhance future interactions with gifted children and their parents.
- Obtain tangible educational measures to help address concerns efficiently.
- Decrease misdiagnoses and promote greater sensitivity in providing services.
- Improve medical care and support for gifted children and their families.



SENG Helps Improve Your Clinical Skills

- FREE SENG library of articles and brochures
- Low-cost professional SENGinars
- Annual national family conference
- Certified C.E. Courses and SMPG Facilitator Training
- FREE SENGvine Newsletters
- FREE Misdiagnosis video (<http://bit.ly/SENGMisdiagnosis>)
- FREE Misdiagnosis Lecture at University of Wisconsin/Madison Grand Rounds (<http://bit.ly/MisdiagnosisLecture>)
- Misdiagnosis and Dual Diagnosis of Gifted Children and Adults (Webb, et al)
- Join our SENG Community:



SENG

P.O. Box 488,

Poughkeepsie, NY 12570

www.SENGgifted.org

A 501(c)3 nonprofit organization



SENG

*Supporting Emotional Needs
of the Gifted*

**Decreasing
Medical Misdiagnosis
In Gifted Children**



Gifted Children Can Be At Risk for Medical Misdiagnosis

- Gifted children are in every pediatric medical practice.
- These children possess advanced aptitudes, yet can present in complex ways, making identification challenging.
- They can develop negative coping skills due to lack of support and understanding.
- Typical gifted behaviors may resemble behavioral disorders, while certain medical disorders may be minimized or go unnoticed.
- Gifted children then can be incorrectly diagnosed and treated, overlooked or misunderstood.



Early Recognition & Intervention are Crucial

The Challenge for Clinicians

- Clinicians seldom receive formal instruction about giftedness.
- Parents may feel boastful discussing giftedness with their child's doctor.
- Behaviors directly associated with giftedness may mimic medical or mental health disorders.
- Some gifted children do have medical and mental health conditions (2e, twice-exceptional), and differentiating between an actual diagnosis and a misdiagnosis can be challenging.

CLINICAL TRAIT	POSSIBLE GIFTED EXPLANATION	POSSIBLE MEDICAL MISDIAGNOSIS
High activity level	Passionate learner, kinesthetic learner	ADHD
Low impulse control, impatient, interrupts others	Asynchrony, judgment lags intelligence (delay of prefrontal cortex)	ADHD
Worries frequently	Idealistic, grapples with moral, ethical, philosophical issues, spiritual issues	Anxiety disorder, depression
Extra-sensitive to loud noise, clothing tags, fluorescent lights	Dabrowski's overexcitabilities	Sensory-motor integration disorder, auditory-processing disorder
Difficulty relating to classmates, atypical humor	Asynchrony, unusual interests and passions	Autism spectrum
Distractible, fails to complete tasks, refuses to do schoolwork	Daydreams, active imagination, needs to be intellectually challenged	ADHD, learning disability, auditory-processing disorder, conduct disorder
Stubborn, averse to transitions	Independent, high expectations, deep interests, drive to learn	Obsessive-compulsive personality disorder, autism spectrum
Highly emotional, moody, argumentative	High sensitivity, intensity, asynchrony, needs increased challenge	Mood disorder, conduct disorder
Fine motor coordination delays, poor handwriting	Asynchrony, mind quicker than hand	Dysgraphia, dyslexia, learning disability
Atypical sleep pattern	Low need to sleep, won't stop learning to sleep, nightmares, vivid dreams	Sleep disorder, ADHD, mood disorder
Atypical eating pattern	Too busy learning to eat, averse to food textures	Food allergies, eating disorder, mood disorder
Speech delays	Asynchrony	Autism spectrum



SOBREDOTADO...no es sinónimo de "elitista":

*No desalentemos a las mentes
brillantes sin antes
brindarles una oportunidad.*

¡Infórmese sobre la realidad del sobredotado!

*Los profesionales de la salud son un
vínculo clave para promover el
crecimiento y desarrollo saludable
de los sobredotados.*

- Enriquezca y profundice la comunicación con los sobredotados y sus padres.
- Adquiera recursos que le permitan identificar y tratar eficientemente al sobredotado en su entorno.
- Ayude a disminuir el diagnóstico equivocado y a promover mayor sensibilidad en la consulta.
- Reconozca las características de los sobredotados y sus familias y ofrezcales atención médica de acuerdo a sus necesidades y singularidades.



SENG le amplía sus conocimientos a través de:

- Acceso gratuito a la biblioteca electrónica de SENGL
 - Acceso a SENGinars o seminarios electrónicos a bajo costo
 - Un congreso familiar anual
 - Cursos certificados de desarrollo profesional y entrenamiento para facilitar encuentros de padres de niños sobredotados (SMPG)
 - Acceso gratuito a la revista mensual electrónica SENGvine
 - Acceso gratuito al video por expertos sobre "Misdiagnosis" (<http://bit.ly/SENGMisdiagnosis>)
 - Acceso gratuito al video de la conferencia sobre "misdiagnosis" por el psicólogo James Webb, en el Hospital de la Universidad de Wisconsin, Madison (<http://bit.ly/MisdiagnosisLecture>)
- Consulte el libro: *Misdiagnosis and Dual Diagnosis of Gifted Children and Adults*. (Webb, et al).

¡Intégrese a la comunidad SENGL



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SENG

(Supporting Emotional Needs of the Gifted)

*Apoya el Desarrollo
Emocional
del Individuo Sobredotado*

**Disminuye el diagnóstico
médico equivocado en los
niños sobredotados**



Los Niños Sobredotados Corren el Riesgo de Ser Diagnosticados Incorrectamente por los Médicos

- A diario, son atendidos en la consulta médica sin ser percibidos o reconocidos como tal.
- Poseen aptitudes avanzadas y complejas, lo cual hace difícil diagnosticarlos debidamente.
- Pueden desarrollar actitudes negativas debido a la falta de apoyo y comprensión.
- Sus comportamientos típicos pueden aparentar ser desórdenes de conducta, minimizando o encubriendo verdaderos trastornos médicos.

Por lo tanto, estos niños pueden ser malentendidos, menospreciados o diagnosticados y tratados incorrectamente.



La identificación e intervención temprana son imprescindibles

El Reto para los Profesionales de la Salud

- A los profesionales de la salud por lo general no se les instruye acerca del individuo intelectualmente sobredotado.
- Los padres de familia usualmente no quieren aparentar presumir de los avances de sus hijos al consultar con el médico.
- Comportamientos del niño sobredotado pueden parecer trastornos mentales o médicos.
- Algunos niños precoces si padecen de trastornos físicos o de salud mental (e.g., sobredotados con deficiencias psicomotoras y/o de comunicación) y determinar el diagnóstico acertado es un desafío.

Rasgo Clínico	Posible Explicación	Posible Diagnóstico Médico Equivocado
Alto nivel de actividad	Deseoso de aprender, aprende estando activo	Trastorno por déficit de atención con hiperactividad (TDAH / ADHD)
Falta de control, impaciente, interrumpe a otros	Desarrollo intelectual más avanzado que su sentido común (demora en el desarrollo de la corteza pre-frontal)	Trastorno por déficit de atención con hiperactividad (TDAH / ADHD)
Se preocupa frecuentemente	Idealista, se preocupa por asuntos de ética, moral, filosóficos, espirituales	Ansiedad, depresión
Extrema sensibilidad a ruidos fuertes, costuras y etiquetas de la ropa, la luz fluorescente	Sobreexcitabilidades expuestas por Dabrowski	Trastorno de integración sensorial y sensorial, trastorno del procesamiento auditivo
Dificultad para relacionarse con sus compañeros de clase, atípico sentido del humor	Asincronía en el desarrollo, muestra intensa curiosidad en temas no usuales para niños de su edad	Trastorno del espectro autista
Se distrae fácilmente, no termina sus trabajos en clase, rehúsa cumplir con sus tareas	Distraído, tiene imaginación activa y necesita retos a nivel intelectual	TDAH, incapacidad en el aprendizaje, trastorno del procesamiento auditivo, trastorno de la conducta
Intransigente, rehúsa cambiar de una actividad a otra	Independiente, tiene altas expectativas, profundiza y sus estudios e intereses lo absorben	Trastorno del espectro autista
Muy sensible, intenso, y de temperamento variable	Sensibilidad intensa, desarrollo asincrónico, necesita ritos continuos	Trastorno del estado de ánimo, trastorno de la conducta
Atraso en su coordinación motora, dificultades con la escritura	Desarrollo intelectual, más avanzado que sus habilidades sensoriomotoras	Disgrafía, dislexia, incapacidad en el aprendizaje
Patrones atípicos para dormir	Duerme poco por envolverse en actividades de su interés, tiene sueños vívidos y/o pesadillas	Trastorno del sueño, TDAH, trastorno del estado de ánimo
Gustos y patrones atípicos para comer	Se enfoca en aprender y se olvida de comer, adverso a ciertas texturas en los alimentos	Alergia a ciertos alimentos, trastorno de la alimentación, trastorno del estado de ánimo
Retraso del habla	Desarrollo asincrónico	Trastorno del espectro autista


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[Ruth Carlstrom](#)

Feb 22, 2016 3 min read



Misdiagnosis

By Ruth Carlstrom

The many faces of the gifted, to borrow the theme of the 2003 SENG Conference, can cause what has been labeled a modern tragedy. *Misdiagnosis and Dual Diagnoses of Gifted Children and Adults* is a book, hot off the press, which addresses this.

The term “gifted” is a broad category used to describe a diverse population of persons who, according to the National Association of Gifted Children, “show, or have the potential for showing, an exceptional level of performance” in one or more of the following areas:

- General intellectual ability
- Specific academic aptitude
- Creative thinking
- Leadership ability
- Visual or performing arts

Seldom is any one person gifted equally in all areas but many show quite unusual abilities and potential in two, three, or sometimes even four of them. Complexity is added to identification of these individuals by the profoundness of their abilities. And this complexity is compounded by those persons who have exceptional potential but do not exhibit it. Thus gifted children and adults wear many faces, which can cause the serious problem of misdiagnosis and wasting of lives from the inappropriate treatment that follows.

High degrees of intensity, sensitivity and overexcitability are characteristics that most gifted children and adults have in common. These people tend to be intense about everything to the point that they are labeled “excessive personalities.” Leaders in the field of gifted education have observed that children and adults with high intelligence are more likely to have inborn intensities that result in heightened responses to stimuli. They may love movement for its own sake and show a surplus of energy exhibited by rapid speech, wild enthusiasm, intense physical activity, and a need for action. This behavior can be misdiagnosed as ADD/ADHD.

Children’s intensities may also frequently be played out in strong-willed behavior or an exaggerated sense of justice, which lands them into debate that can be mistaken for Oppositional Defiant Disorder.

Divergent thinking and learning styles can also lead to misdiagnosis. If a child is an auditory-sequential learner the curriculum and most teaching styles will fit his style. If a child is a visual-spatial learner she can be out of step with a curriculum that is highly sequential because she needs to see the whole picture first and then add the pieces in a way that makes sense to her. Gifted children who prefer the visual-spatial thinking styles use a different kind of logic than



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their auditory-sequential thinking style peers. If their high intelligence is masked by reading

blems, poor writing skills and problems with small motor skills, the resulting misdiagnosis may have these visual-spatial learners spending their time only in remediation. Their talents and intelligence may be wasted. Visual-spatial learners do best when they are presented with rigorous, complex curriculum. If their intelligence is misdiagnosed they may not have the opportunity for higher curriculum that will be best for them. The special skills exhibited by visual-spatial learners are the skills that fit the world of technology we are moving into. Without appropriate challenge and direction their gifts will be unrecognized and lost to society.

Many highly gifted people lead lonely lives during their school years because their thought processes are advanced beyond that of their age peers. They may think and act on such a different level that they have difficulty in social interactions. This can be misdiagnosed as Asperger's. But while the person with Asperger's does not realize that he has difficulty with social interaction, the highly gifted person realizes that he is a social misfit and feels terrible about it.

James T. Webb, Ph.D., Edward R. Amend, Psy.D., Nadia E. Webb, Psy.D. Jean Goerss, M.D.M.P.H., Paul Beljan, Psy.D. and F. Richard Olenchak, Ph.D. have co-authored *Misdiagnosis and Dual Diagnoses of Gifted Children and Adults* (Great Potential Press, Scottsdale, AZ). It covers a wide spectrum of characteristics and the misdiagnoses that can accompany the many faces of the gifted. It is written in an easy to read and interesting style with many stories of individuals. The authors, several of whom are affiliated with SENG, are donating half of the royalties from the sales of the book to SENG. This is a book that parents of gifted children, educators, psychologists, and physicians need to read. It can be purchased through the publisher or wherever books are sold.

For further reading about misdiagnosis, SENG recommends these articles from our online library:

[Gifted Students with Attention Deficits: Fact and/or Fiction? Or, Can We See the Forest for the Trees?](#)

[Misdiagnosis and dual diagnosis of gifted children](#)

[Misdiagnosis of Asperger's Disorder in gifted youth: An addendum to Mis-Diagnoses and dual diagnosis of gifted children by James Webb, Ph.D.](#)



Misdiagnosis

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Marianne Kuzujanakis

Jan 19, 2012

7 min read



Where Does a Pediatric Doctor Fit in the Care of Gifted Children?

By Marianne Kuzujanakis, MD, MPH.

Citation: First published in the SENGvine, October 2011.

I wear two hats: One—as a pediatrician. The other—as a parent of a gifted child. To be honest, there are days when neither hat fits comfortably, if at all. There are days when my medical knowledge just isn't enough to understand my child, and other days when being a parent hasn't always provided all the answers.

Can there be a synergy of these two roles?

Gifted kids do not suddenly become gifted on the first day of Kindergarten, nor are they gifted only during school hours. Most, if not all, parents may admit they felt hunches about their child's abilities well before school age. Some parents may have even had concerns or questions about their child's giftedness during these early years, yet they didn't always know to whom to turn. Raising a gifted child can at times be a lonely and demanding journey for parents, and growing up as a gifted child is frequently fraught with challenges. Reaching out for an understanding voice may be difficult. Thus, many parents seek out organizations like SENG, as well as close friends and family members who can offer advice and support.

A sometimes overlooked individual who is ideally positioned to offer parents advice and support is the child's medical doctor. These doctors may be pediatricians, family practitioners, naturopaths, or other allied health professionals. Many happy parents already find great comfort and advice from their children's doctors, though others, for a variety of reasons, do not. Some parents may never have broached the subject of giftedness with their child's doctor, considering giftedness not a medical issue, or feeling that discussing giftedness is marked with elitism. Doctors may feel likewise, and avoid the topic altogether. Some parents may also recall uncomfortable conversations with their child's doctor or a previous doctor when giftedness was brought up, then quickly dismissed, and that made them hesitate to ever again discuss the subject. Some doctors, upon hearing about a child's giftedness, may simply respond with "That's wonderful. You must be lucky to have such an easy child to raise." Argh.

By the time a child is five years of age, a child has typically seen his or her pediatric doctor a dozen times for healthy visits. With an average physical exam lasting twenty minutes, this amounts to four hours of face-to-face contact in those first five years, then one visit per year thereafter. Each visit is an opportunity – or missed opportunity – to address social, emotional, and developmental issues.

But is it important that pediatric doctors understand and address giftedness?

Medical doctors diagnose and treat a wide variety of acute and chronic medical conditions.



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Most are highly trained to do their job. Lectures and study about giftedness are not routinely part of the curriculum in medical training programs, yet giftedness can often play a significant role in the health and emotional well being of a gifted child. Reports indicate that doctors usually perform developmental assessments only 50% of the time, and these assessments primarily look at children not meeting the minimum standard developmental milestones. Many parents may be equally unaware that there is no specific pediatric medical record code (ICD or DSM) for "gifted." Most doctors are compensated by the codes they indicate in the medical record. Having no specific medical code, many doctors, already overworked and pressed for time, have little incentive to discuss giftedness further.

When a child's gifted needs are not served, the result can be expressed in a physical or emotional symptom. Many gifted children may experience bodily complaints as a result of a mismatch in their educational situation, or due to an unfulfilled emotional or social need. Stomachaches and headaches are common school avoidance symptoms. Eating disorders can be a result of poor self-esteem. Depression and suicidal attempts may result from feeling different or isolated or even bullied. Sensory intensities and the asynchrony of gifted children may be exhibited in extreme ways, sometimes making diagnoses difficult for those without knowledge of giftedness, and resulting in incorrect labeling of the gifted child. In other cases, a medical condition or learning disorder may almost completely hide one's giftedness, as is seen in many twice-exceptional gifted children.

When worrisome health issues present at a pediatric doctor office, and if the doctor has a strong background knowledge of giftedness, he or she will be better positioned to understand and differentiate the symptoms from signs of giftedness, thus resulting in fewer misdiagnoses and fewer inappropriate medical treatments. If a doctor remains unsure of a presenting diagnosis, strong background knowledge of giftedness will still make it far easier to appropriately make any needed referrals, thus finding quicker answers for the parents and child.

Pediatric doctors are drawn into their careers by the thrill of working with children. They are among the most beloved of medical practitioners, and they do not take the privilege of caring for the youngest among us for granted. Many doctors are also gifted, and may understand the developmental paths of their gifted patients. They can be lifesavers for many parents who are anxious and exhausted by the enormous responsibility of raising these intense and complex children.

At the same time, many parents do not feel a need to discuss giftedness with their child's doctor. Some parents feel able to be their own strong supportive advocates for their gifted children, and may also be gifted. Their children may have many friends who are gifted, and the stages of growing up are less bumpy, and more balanced. The personal need to discuss giftedness with one's pediatric doctor in these situations may diminish.

But can parents do something to help make their good interactions better, or to improve their unsatisfying interactions, or even to help other more needy gifted families?

If parents of gifted children want or require more from their child's doctor, they do not need to let the status quo remain. They may open an active dialogue about giftedness if they are aware that a doctor's time is limited. Parents can slowly begin a conversation by staying focused on exactly what is needed at each particular visit, and to concisely articulate any specific questions.

Other suggestions for both parents who are already satisfied with the support they receive, and also for parents seeking greater support, include:

- Do your homework ahead of time when asking about topics such as testing, evaluation for a learning disability, consulting for depression, or other specific situation or information need

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consider asking your child's doctor if he or she would be willing to allow an informational sheet or brochure to be posted in the office waiting room for other parents. SENG has several brochures, including one made in collaboration with NAGC called "Is My Child Gifted?"

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- If needed, gently offer to educate your doctor about giftedness by putting together a brief typed listing of gifted resources such as SENG, NAGC, Davidson Institute, Hoagies Gifted, online parent forums such as GT-Families, TAGFAM (and its associated subgroups), and your state gifted association. If your doctor approves, you may offer to post the list on the waiting room bulletin board.
- If you have a supportive doctor, consider asking your doctor if he or she would be willing to run a local community support group for parents of gifted children. Possibly even suggest having the doctor train with SENG through the SMPG program.
- If you are or become quite comfortable with giftedness, you, too, may consider training as a parent facilitator through SENG and the SMPG program, and then offering your services for other parents of gifted children within your local area.
- Again...start slowly. Very slowly. Consider not just the needs of your child, but also the needs of other families like yours in your community. Some parents may not even be aware of organizations like SENG, and may be highly appreciative of any and all information and support. Start a grassroots gifted revolution!

"Be the change you want to see in the world."- Mahatma Gandhi

Cultivating a satisfying relationship with your pediatric doctor in ways that fulfill the unique needs of you and your gifted child can be a warm ray of light upon everyone involved. No other professional has the potential to participate in the developmental course of a child for a longer time period. While many pediatric doctors already serve a vital role in the support of the gifted child, there is much more that can be done so all gifted families have similar support. If a professional such as a doctor truly appreciates, understands, and is available to offer advice when the road to adulthood becomes challenging, it can be life changing for a gifted child. By taking an active role in the cultivation of this relationship, every parent has the potential to play an important role in improving the lives of not just their own children, but all gifted families. Start a grassroots gifted revolution!

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SENG Director Marianne Kuzujanakis is a board-certified pediatrician with long-standing interests in parent and clinician education. Her residency training was at the Mid-South's busy pediatric center in Memphis, TN, including Le Bonheur Children's Hospital, St. Jude Children's