

Peggy Lillis Foundation's

FIGHT C. DIFF 7TH ANNUAL GALA

Leadership Award presented to
Mount Sinai Health System

Innovators Award presented to
Northwell CDIFFerently Care Team

Advocates Award presented to
New York State Senator Martin J. Golden
Former New York State Senator Ruth Hassell-Thompson



Peggy Lillis Foundation

THE PEGGY LILLIS FOUNDATION IS WORKING TOWARD A WORLD WHERE C. DIFF
INFECTIONS ARE RARE, TREATABLE, AND SURVIVABLE.

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*and its mission of fighting &
preventing C. diff through
awareness, education and
advocacy.*



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PROGRAM

Cocktail Reception

Welcome

Liam Lillis, Co-founder, Peggy Lillis Foundation

Leadership Award Presented to Mount Sinai Health System

*Presented by Christian John Lillis, Executive Director,
Peggy Lillis Foundation*

Innovators Award Presented to the CDIFFerently Care Team of Northwell Health

*Presented by Helen Beigel, Board member,
Peggy Lillis Foundation*

Advocate Award Presented to Senator Marty Golden

*Presented by Victoria Amari, Board member,
Peggy Lillis Foundation*

Advocate Award Presented to Senator Ruth Hassell-Thompson

*Presented by Rich Dexter, Advocates Council member,
Peggy Lillis Foundation*

Looking to 2017

*Christian John Lillis, Executive Director,
Peggy Lillis Foundation*

Dessert & Dancing

Raffle Winners Announced

Welcome

to the **Peggy Lillis Foundation's 7th Annual FIGHT C. DIFF Gala**. Nearly seven years after losing our mother to a clostridium difficile infection (CDI), we have accomplished a great deal. Peggy Lillis Foundation (PLF) has greatly extended our online presence and reach. Traffic to our website has increased by more than 250%. We are regularly invited to speak with leadership and staff at the country's leading healthcare systems and companies. Our volunteer Advocates Council is growing and making its presence felt across the country. At the national level, we are increasing our engagement with the Centers for Disease Control & Prevention as well as building new relationships, including with the Centers for Medicare and Medicaid Services to ensure that CDIs are at the top of their agenda.

While we're very proud of the strides we've made since last year's Gala, and collectively over the past seven years, combating CDIs remains an uphill battle. Though healthcare workers and policymakers increasingly recognize the urgency with which we must address this disease, **77% of Americans have never heard of C. diff**. As we learned with the tragic death of our mother, it is impossible to prevent a disease you don't know exists. The general public's ignorance of *C. diff* is maintained in part by the taboo against speaking about feces. People are understandably reticent to discuss a disease for which the primary symptom is diarrhea.

Over the past year, we have focused on antibiotic stewardship and tracking and public reporting of infections. Scientists have long warned that overusing antibiotics is leading to bacteria increasingly resistant to even our strongest drugs. Despite some truly scary headlines about a "post-antibiotic future," most prescribers and patients still over- and mis-use antibiotics. While that post-antibiotic future seems remote, *C. diff* infections harm hundreds of Americans every single day.

In addition to low public awareness on these issues, a multi-part Reuters investigation "The Uncounted," brought to a wide readership what those of us working to combat these infections already knew: **state and federal agencies largely do not track deaths from C. diff and antibiotic resistant infections**. We assisted Reuters in identifying other Americans like our mother whose death certificate doesn't include the infection from which they died. We know from other health-related movements such as those for HIV/AIDS and breast cancer that having an accurate count of related deaths is key to securing public and private funding, raising awareness, and rallying support for treatments and cures. As Reuters' investigation makes very clear, the 29,000 deaths attributable to *C. diff* in 2013 is very likely the tip of the iceberg. While the CDC and other agencies do their best with limited surveillance resources, as long as state health departments do not require infections to be documented, a national estimate will always be guesswork.

On a more celebratory note, tonight's honorees epitomize what it takes to make a difference in the fight against *C. diff*. **Leadership. Innovation. Advocacy.**

Over the past 18 months, **Mount Sinai Health System** has demonstrated that true leadership at every level of hospital and clinical operations can have an enormous and lifesaving impact in reducing *C. diff* infections. Since 2014, Mount Sinai has reduced its hospital-acquired

C. diff infections by more than 40%. This reduction not only saved the health system money, it also prevented a great deal of harm.

The **CDIFFerently Care Team of Northwell Health's** innovative approach to assembling and mobilizing a multidisciplinary team on the 6 Monti unit reduced *C. diff* infections by 50% in a single year. The team is now working to spread its successful innovation to other parts of Northwell Health.

We are thrilled to recognize two exceptional elected officials and lifelong advocates. **Senator Ruth Hassell-Thompson's** career, first as a pediatric nurse, then as a successful executive, and, most recently, serving 16 years as the state senator from New York's 36th district, exemplifies public service. She is also a *C. diff* survivor, having battled the disease following knee surgery. Senator Hassell-Thompson retired from the senate in July to serve as Special Advisor for Policy and Community Affairs, for New York State Housing and Community Renewal.

Senator Martin J. Golden was our mother Peggy's representative. Senator Golden has long been an advocate for the public school system that Peggy loved as well as a fervent champion for our state's senior citizens. As Chairman of the Senate Aging Committee, Senator Golden was credited by nationally recognized advocacy groups for championing the rights of senior citizens through the Assisted Living Law of 2004. Under his leadership, a number of significant bills affecting older Americans have been enacted, including a new Elderlaw, the Senior Bill of Rights; Long Term Care Reform, internet posting of retail prescription drug prices and a single EPIC/Medicare prescription drug card.

Sadly, there is an absence tonight. **On August 12th, our beloved grandmother (and Peggy's mother) Dorothy Daly died at the age of 93.** Our Nanny grew up during the Great Depression, served as a switchboard operator during WWII, and with our late grandfather, raised Mom and her eight siblings. Though Nanny never fully recovered from losing Mom, she looked forward every year to being at "Peggy's Party." She was incredibly proud of how her family rallied together to transform her daughter's death into a living legacy committed to sparing other families our pain.

Thank you for being with us tonight and joining our movement to ensure that *C. diff* infections are rare, treatable and survivable.

Christian John Lillis
Co-chair

Liam Lillis
Co-chair



Peggy with her mother, Dorothy Daly.

LEADERSHIP AWARD RECIPIENT



**Mount
Sinai**

Mount Sinai Health System. The Mount Sinai Health System is an integrated health care system providing exceptional medical care to local and global communities. Encompassing the Icahn School of Medicine at Mount Sinai and seven hospital campuses in the New York metropolitan area, as well as a large, regional ambulatory footprint, Mount Sinai is internationally acclaimed for its excellence in

research, patient care, and education across a range of specialties. Its mission is to provide compassionate patient care with seamless coordination and to advance medicine through unrivaled education, research, and outreach in the many diverse communities they serve.

In 2014, Mount Sinai introduced a multifaceted transdisciplinary approach to reduce hospital-onset Clostridium difficile infection (HO CDI) across its seven hospitals. This successful program involved senior leadership, teams across many disciplines led by physician-nurse pairs, standardized protocols for CDI testing, antibiotic stewardship, use of evidence based practices, and checklists with timely feedback of data. To prevent the spread of CDI, patients were placed on contact precautions in a single room or with another CDI patient as soon as they showed symptoms. Gowns and gloves were made readily available, hand hygiene with soap and water was performed and rectal thermometers were eliminated.

Teams used Joint Commission Targeted Solutions Tool methodology to improve compliance with hand hygiene requirements. Cleaning practices using a hypochlorite-based disinfectant were standardized and categorized into high-touch surfaces, the bathroom, elements unique to infection control, and tasks to be performed upon completion of cleaning. Mount Sinai also incorporated the innovative use of a fluorescent marking tool that simulated germs in order to assess the quality of cleanliness. Checklists to assess compliance were used and monitored through direct observation.

By using these methods, Mount Sinai significantly decreased its hospital onset CDI rates between 2014 and 2016. Across seven hospitals, the HO CDI rate decreased from 7.3 per 10,000 patient days in 2014, to 4.4 through July 2016. Direct costs incurred for HO CDI were estimated to decrease from \$5.8 million in 2014 to \$3 million in 2016.

INNOVATORS AWARD RECIPIENT



CDIFFerently Care Team of Northwell Health.

The CDIFFerently Care Team is a program at Northwell Health, a national health care leader, committed to excellence, compassion and improving the health of the community. Northwell Health strives to improve the health of the communities it serves and is committed to providing the highest quality clinical care; educating the current

and future generations of health care professionals; searching for new advances in medicine through the conduct of bio-medical research; promoting health education; and caring for the entire community regardless of the ability to pay.

CDIFFerently, started in the end of 2014, was created by frontline hospital staff to decrease hospital acquired Clostridium difficile rates. The CDIFFerently team found that their unit had fourteen hospital-acquired *C. diff* infections in 2014. They knew that for the safety and well-being of their patients, action was needed. They shared shocking data from the Centers for Disease Control and Prevention with their fellow staff: *C. diff* was estimated to cause almost half a million infections and 29,000 deaths within 30 days of the initial diagnosis in the United States in 2011. The CDIFFerently team knew that they were going to have to change the way they cared for patients with *C. diff* infections.

After educating staff and creating a multidisciplinary team to change their unit's process of caring for a patient infected with Clostridium difficile, they started to see a decrease in *C. diff* rates in their unit. They changed just about everything including who should be tested, how to isolate a patient who came back positive with the bacteria, hand washing and protective gear competencies, and most importantly, how they educated patients and their loved ones. They worked with patient logistics, environmental services, material operations, and infection control to improve their process.

In just one year, they were able to reduce *C. diff* infection rates in their unit by an impressive 50%. They have spread the CDIFFerently program throughout their hospital and are seeing great success. Currently, 6 Monti has had a 75% reduction in Clostridium difficile rates since the start of the program.

At the end of the day, programs like CDIFFerently are for patients. Patients should feel safe and be without the fear of developing a major hospital-acquired infection like Clostridium difficile. This infection is known to have great ramifications on patient health, but CDIFFerently has the power to stop it, starting with prevention.

ADVOCATES AWARD



Senator Martin J. Golden. New York State Senator Martin J. Golden (22nd District) is a retired New York City Police Officer who received numerous awards during his ten years with the Police Department. Marty was forced to retire in 1983, after suffering a serious injury while making a narcotics arrest.

As Chairman of the Senate Aging Committee, Senator Golden was credited by nationally recognized advocacy groups for championing the rights of senior citizens through the Assisted Living Law of 2004. Under his leadership, a number of significant

bills affecting older Americans have been enacted, including a new Elderlaw, the Senior Bill of Rights; Long Term Care Reform, internet posting of retail prescription drug prices and a single EPIC/Medicare prescription drug card. Senator Golden wrote the law that raised SCRIE from \$29,000 to \$50,000 for seniors and the disabled.

Yet, what distinguishes Marty Golden's career in public service is his emphasis on community service and ability to bring back funding for important community programs including health care, education, transportation, law enforcement and senior citizen programs.

Senator Golden procured \$36 million to create a dynamic and robust biotechnology industry in Brooklyn that holds the promise of thousands of high-quality career jobs in Brooklyn. Senator Golden continues to support the advancement of cutting edge industries that are creating jobs for the new marketplace. As such Marty works hard to ensure the continued expansion of the bio technology industry, the protection of tax breaks for businesses, and the full utilization of the commercial and retail space in locations such as the Brooklyn Army Terminal and Industry City.

From 1998 through 2002, Marty Golden represented the 43rd Council District in the New York City Council. In the days immediately after 9/11, Councilman Golden's office coordinated the shipment of more than 200 truckloads of food, clothing, and materials to the volunteers working at "Ground Zero" and helped to establish the first Community Emergency Response Team (CERT 1 NYC) in New York State.

Because of his leadership on a myriad of issues facing New York State and work as Chairman of the Steering Committee, Golden was appointed Secretary of the Republican Conference.

Marty Golden attended St. Patrick's and Our Lady of Angels Grammar Schools, New York School of Printing, and John Jay College. He is a graduate of St. John's University. Marty and his wife, Colleen, have two children, Michael and P.J.

ADVOCATES AWARD



Ruth Hassell-Thompson, Special Advisor for Policy and Community Affairs, for New York State Housing and Community Renewal, was first elected to the New York State Senate in 2000, where she brought years of public service and community involvement to her post as the Senator of the 36th Senatorial District; representing parts of the Bronx and Westchester Counties.

In 1993, Ms. Hassell-Thompson was elected to the Mount Vernon City Council, serving as Council President and Acting Mayor. Ms. Hassell-Thompson balanced her public responsibilities with other important community and business-related endeavors in the district. A retired nurse/counselor for Mount Vernon Hospital, specializing in pediatrics and helping women with substance abuse issues, she founded "The Gathering," a volunteer-staffed women's center in Mt. Vernon that provided counseling and support services. As a health educator, Ms. Hassell-Thompson worked with persons infected with and affected by HIV/AIDS.

Prior to holding an elected office, she was President/CEO of Whart Development Company, Inc., a real estate development company that also provided consultant services to small and developing businesses, thus, she is well known for her expertise in minority business. As the Executive Director of the Westchester Minority Contractors Association (WMCA), Ms. Hassell-Thompson became well-versed in economic development issues which impacted women and people of color. Ms. Hassell-Thompson was consultant to the Automotive Consultant, Inc. (ACI), an automobile dealership/industry organization responsible for promoting the interests of automobile dealers of color, nationally.

Ms. Hassell-Thompson is the recipient of two Honorary Doctorate degrees; Mercy College, Doctor of Humane Letters; and Eastern Theological Consortium, Faculty of Arts and Sciences, Christ Theological Seminary, Doctor of Humanities. She is an alumna of Bronx Community College.

During her tenure in the Senate, Ms. Hassell-Thompson served on the following standing committees: Judiciary (Ranking); Crime Victims, Crime & Correction (Ranking Chairwoman); Commerce, Economic Development & Small Business; Alcohol and Substance Abuse; Health; Finance; Rules; Chairwoman, Conference of Black Senators; Chairwoman, Taskforce on Domestic Violence; Governor Cuomo Taskforce on MWBE.

Ms. Hassell-Thompson is the proud mother of two daughters and the doting grandmother of two grandchildren.

2016 Accomplishments

Educating National Audiences

Website visitors grew by 250%! In January 2016, Google awarded PLF an Adwords Grant for free search engine advertising for PLF's website when users search for *C. diff* and related terms. Unique visitors grew to 65,498 in 12 months versus 8,343 in the previous period. We are on track to have more than 100,000 unique visitors by the end of 2016.

New Advocates Council videos. PLF worked with Sanofi Pasteur to edit and distribute a video series sharing advocate perspectives on *C. diff* infections (CDIs), particularly how CDI impacted their lives and brought them to this movement. One was broadcast on public television nationwide as part of an American Health Journal on fecal transplants.

New Brochure! PLF worked with Merck & Co., Inc. to develop and distribute an easy-to-understand, patient-focused *C. diff* brochure, available in print and online, in both English and Spanish.

Raising Antibiotic Risk Awareness. PLF energized our network to broaden the impact of the Centers for Disease Control's Get Smart About Antibiotics week, including placing two Op-Eds, running social media awareness campaigns, and participating in the CDC's Twitter Chat. PLF's combined efforts reached 150,000 Americans.

Engaging Healthcare Workers and Industry. This year PLF significantly increased our partnership with healthcare systems and companies through a variety of presentations and meetings, including:

- **PLF addressed Mount Sinai Health System's *C. diff* Infection Leadership Retreat** as they affirmed their efforts to reduce CDIs by 50 percent.



Christian and Liam at Merck's Chief Patient Officer Rounds, August 2016.

- **Christian presented about the *C. diff* patient experience for Missouri's Mercy Health System clinical leadership.**
- **Christian presented on webinars for Hospital Corporation of America**, one of the world's largest healthcare systems with 168 hospitals and 116 freestanding surgery centers.
- **Christian and Liam presented at Merck's Chief Patient Officer Rounds**, which was webcasted to the company's 70,000 employees worldwide.

New Media Placements. PLF placed an op-ed in the Los Angeles Progressive about the value of grassroots advocacy to advance public health and a letter to the New York Post editor responding to Betsy McCaughey's alarmist editorial about the CDC.

Resistance Screening. PLF partnered with the Antibiotic Resistance Action Center, Milken Institute School of Public Health, Consumer Reports, Small-r Films, and Delmarva Foundation to co-host a Washington, DC screening of Resistance, a documentary about the history and future of antibiotic resistance.

Empowering Advocates

Following our first-ever *C. diff* Summit in August 2015, PLF grew and supported our Advocates Council. In addition to placing two op-eds, the Council's accomplishments in the past year include:

- **Participating in the successful campaign to ensure increased funding for CDIs and antibiotic resistance** in the 2016 federal budget.
- **Sharing the Summit resources online**, including session videos, worksheets for Advocates, and speakers' handouts and presentations.
- **One Advocate, Meghan Mimnaugh, has regularly attended her state's Healthcare Associated Infection Committee meetings.** She also presented her mother's story in public for the first time on a Partnership for Patients webinar.
- **Advocates Megan Fernsler, Lisa Neudecker, and Megan Mimnaugh wrote entries for PLF's blog** sharing how their battles with *C. diff* inspired their advocacy or changed their perspective.
- **The Dexter Family held its 3rd Judy Dexter Memorial Picnic and Cornhole Tournament** in June, raising more than \$11,200.

Shaping Policy

In December 2015, PLF was invited to join in the National Quality Forum's Antibiotic Stewardship Task Force charged with designing a "playbook" to aid hospitals in implementing new requirements for Medicare and Medicaid participation. We played a prominent role in the development and launch of the Playbook, including ensuring it centered on patients and families, speaking on a panel at NQF's annual conference, and the launch webinar in May. In July, NQF featured an interview with our executive director for its blog.

In January 2016, Christian participated in the Consumers Union's Patient Safety Summit and Lobby Day in Washington, DC. He and Advocates Council member Mary Brennan Taylor spoke about the importance of funding for HALs and smarter antibiotic use with New York Senators Charles Schumer and Kristen Gillibrand. Christian also met with his Congresswoman, Nydia Velazquez to discuss CDI rates and PLF's plans for statewide advocacy to increase transparent reporting on infections.

In May, PLF participated in a Summit at the Centers for Disease Control with the agency's leadership and 20 fellow patient advocates, focused on prevention of antibiotic resistant bacterial infections and sepsis. The meeting resulted in new collaborative initiatives between advocates and the CDC including an increased focus on sepsis and plans to feature Peggy in the agency's Get Smart About Antibiotics Week this November.

PLF represented *C. diff* patients at the June 2016 public meeting of the President's Advisory Council on Combating Antibiotic Resistant Bacteria.



Christian with Advocate Mary Brennan-Taylor visiting the Senate, January 2016.

FACES OF C. DIFF

Lawrence's Story

My name is Lawrence, and I am 28 years old. In November 2012, I was 24 years old. I went to the doctor for a staph infection in the form of a boil. My doctors prescribed me clindamycin to kill the bacteria in the infection. About a day or two later, I started to feel like I had a stomach bug. After a couple of days of having what I thought was just a stomach bug, I quit using the clindamycin. However, little did I know, it was much worse. I tried taking Pepto-Bismol to try to calm my stomach down, but nothing seemed to work.

I was driving an eighteen-wheeler at this time with a trainer. We had driven from Texas to Arizona, then up to Ohio and back down to Arizona. By the time we got back down to Arizona, I had nothing but chunks of blood and puss coming from my stools. At this moment I told my trainer, "I have to go to the hospital." So I called a cab and went to Chandler Regional Hospital in Chandler, Arizona.



It was about one week from the time I first took the clindamycin to the time I made it to the hospital. The hospital ran stool and urine tests and found that I had *C. diff* Colitis. Here is a little bit on my medical history: I was very healthy before I took Clindamycin. I had recently been in boot camp for the Navy. I had been given penicillin in the past with no reaction. I could run a mile and half in ten minutes and in 45 seconds do 80 sit-ups and 60 push-ups. I had also ridden bulls for the past twelve years prior to being diagnosed with *C. diff*.

After being in the hospital for a week, I was released to go home. It took some time for everything to get back to normal. I was still having flare ups for the next year. I am proud to say that I am now feeling a lot better and everything is back to normal.

FACES OF C. DIFF


Denise's Story

I learned about *C. diff* the hard way. In October of 2013, I was diagnosed with a *C. diff* infection following the use of clindamycin. I was prescribed vancomycin to get rid of the *C. diff*, but every time I stopped the vancomycin the *C. diff* would return. It took me six months of being ill, rounds of failed vancomycin treatments, and going from doctor to doctor before I finally found a doctor that would do a fecal microbiota transplant (FMT) via a colonoscopy. Still, I live with the fear that the next time I am prescribed an antibiotic, the *C. diff* will return. After struggling with *C. diff* and experiencing the challenges and obstacles within in the medical community, I decided I wanted to make a difference in the world of *C. diff*. I became an advocate to try to help make changes that are needed desperately in the community.



The obstacles that I encountered were what made me decide things desperately need to change. Some of the things that I encountered in dealing with *C. diff* included doctors that kept wanting me to wait and suffer for fourteen days to retest for *C. diff* after each failed vancomycin treatment (even though all of my symptoms had returned within three days of stopping the treatment). I kept hearing the "It's postinfectious irritable bowel syndrome (PI-IBS)" line, as I'm young and according to them, *C. diff* is normally only found in the elderly. Then I soon learned that the lab testing was not always accurate.

These are all things that I continued to encounter during my six months of being ill, but yet after I received my FMT, all of my symptoms resolved and I have been *C. diff* free for over two years now. I am a huge advocate for people having a voice in deciding which treatment they would like. We now see that flagyl and vancomycin are no longer doing the job. We need more options, we need more treatments that are affordable, and we need to be able to get access to the treatment we want. I would love for the FDA to allow *C. diff* patients to have FMTs without having to jump through so many hoops, especially as FMTs are being found time and time again to have a cure rate greater than 90%. Source at: www.ncbi.nlm.nih.gov/pmc/articles/PMC3491681/.



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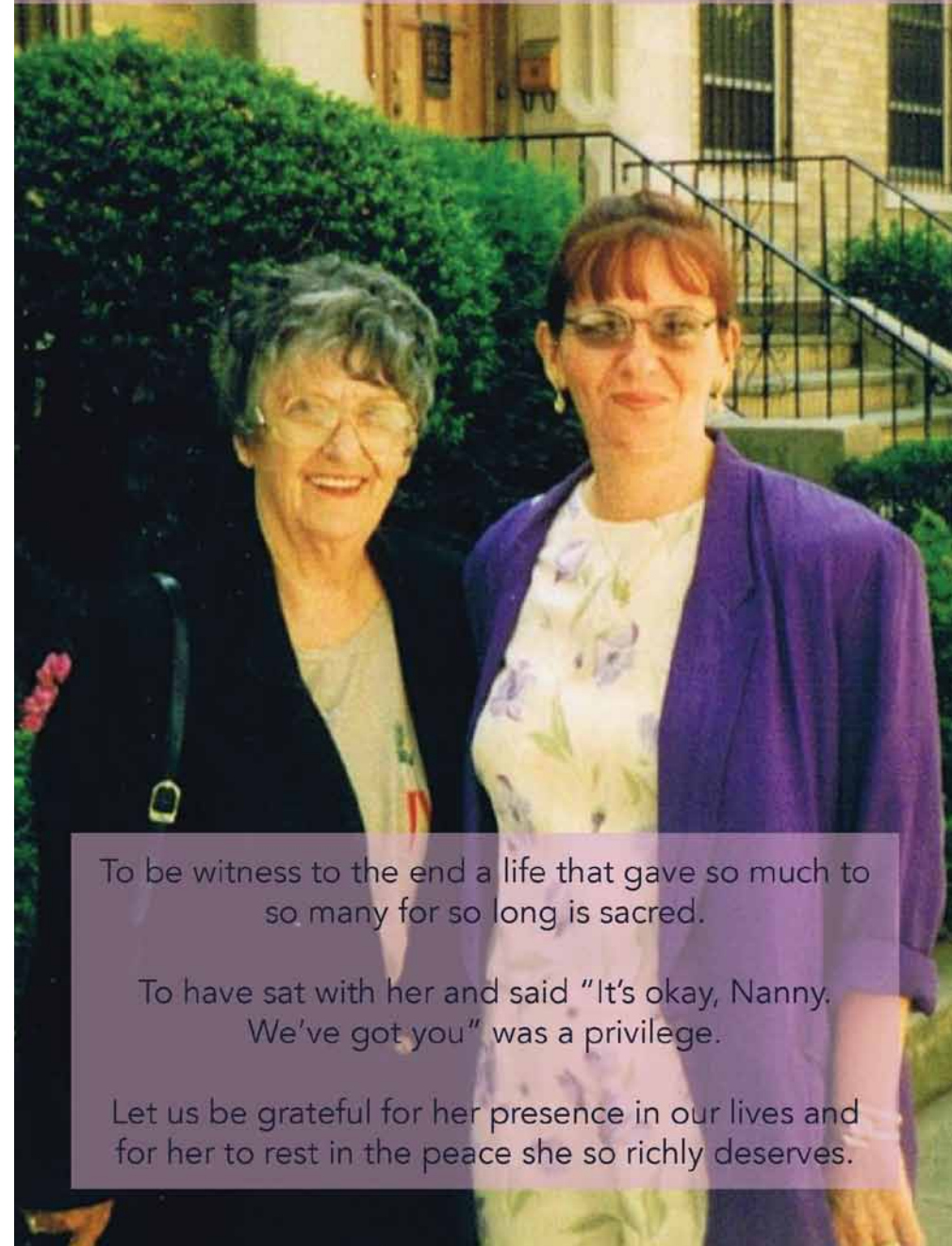


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Rebiotix is thrilled to be a sponsor and help raise awareness of C. diff and help patients afflicted with this disease.

Dorothy Daly

July 7, 1923 – August 12, 2016



To be witness to the end a life that gave so much to so many for so long is sacred.

To have sat with her and said "It's okay, Nanny. We've got you" was a privilege.

Let us be grateful for her presence in our lives and for her to rest in the peace she so richly deserves.

We congratulate and support the work of the Peggy Lillis Foundation...

"Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has."

Margaret Mead

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Van West Media is proud to support the Peggy Lillis Foundation and its dedicated work on fighting *C. diff* over the last seven years.



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VISION

We envision a world where *C. diff* is rare, treatable and survivable.

MISSION

We are building a nationwide *Clostridium difficile* awareness movement by educating the public, empowering advocates, and shaping policy.

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THE HIDDEN TRUTH ABOUT C. DIFF INFECTION



American deaths from **C. diff** infections **OUTPACED HIV/AIDS and Drunk Driving COMBINED**

On average, **CDI increases hospital stays by**

3.3 DAYS 

BURDEN

17,000 children get C. diff

500,000 C. diff infections annually

17th leading cause of death in people 65 and over

9,000 nursing home deaths per year

Recurs in **1 in 5** patients

COSTS

Annual **HOSPITAL COSTS** for C. DIFF PATIENTS total **\$8.2 BILLION**

HARM

C. DIFF STAYS ARE **3X** THE COST OF MANY OTHER STAYS

Average Cost Per Hospital Stay		C. diff
Pneumonia	Acute Myocardial Infarction	Congestive Heart Failure
\$9,300	\$10,500	\$18,200
		\$24,400

 Peggy Lillis Foundation

North Shore-LIJ is now Northwell Health

Northwell Health salutes

Peggy Lillis Foundation

for their continued efforts in bringing nationwide awareness of C. Diff and its impact in community and healthcare settings.

Congratulations to all award winners, especially our own

Northwell CDIFFerently Care Team Innovators Award recipients

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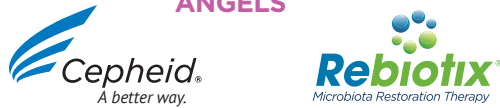
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GRATITUDE

We are deeply grateful to everyone who has joined us on the first 7 years of this journey. Though losing our mother was the initial motivation for starting the Peggy Lillis Foundation, the steadfast support of our most loyal friends and donors, as well as the growing number of individuals, families, doctors, healthcare workers, elected officials, and policymakers who have joined us along the way keeps us going.

Since not every gift has a dollar amount attached, we want to thank the following people and organizations for their unique contributions that have helped the Peggy Lillis Foundation pursue our vision of a world where *C. diff* is rare, treatable and survivable.

IN-KIND | RAFFLE DONORS

Maryann Bassi

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Kathleen McCartney

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SPECIAL THANKS

To **Morgan Lewis**, for its generous pro-bono legal services.

To **John Chan** for being our constant and stunningly awesome pro-bono photographer for the past 7 years.

To **Phyllis McEwan** for 7 years of the most fabulous centerpieces! You make every Gala more beautiful and special than the previous one.

To **WorldStage Incorporated**, for the generous donation of the lighting package used to make tonight so beautiful.

To **Jason Rea**, for installing and setting up the lighting for this Gala for 3 years in a row!

To this year's **Gala Committee**, for all of your help in making this evening a success.

GALA COMMITTEE

Christian John Lillis & Liam Lillis
Co-Chairs

Terri Amari

Victoria Amari

Helen Beigel

Jeanette Carneglia

Amy-Elizabeth Hagen

Lynn Halligan

Gerard Honig, PhD

Kathleen McCartney

Phyllis McEwan

Melissa Parmigiani

Jeff Pollack

Cindy Wagner

Christopher Young



Christian and fellow Advocates outside CDC.



CREATING
VACCINES,
PROTECTING
LIFE

WORLDWIDE, OUR VACCINES PROTECT AGAINST:

CHOLERA • DENGUE • DIPHTHERIA • *HAEMOPHILUS INFLUENZAE* type b INFECTIONS •
HEPATITIS A • HEPATITIS B • INFLUENZA • JAPANESE ENCEPHALITIS • MEASLES •
MENINGOCOCCAL MENINGITIS (serogroups A, C, Y and W-135) • MUMPS •
PERTUSSIS • PNEUMOCOCCAL INFECTIONS • POLIOMYELITIS • RABIES • RUBELLA •
SMALLPOX* • TETANUS • TUBERCULOSIS • TYPHOID FEVER • YELLOW FEVER

* Eradicated disease
This vaccine is produced in response to the threat of bioterrorism.