

HELPING THE HEROES

Monmouth Medical Center's frontline workers get a boost from community donations.

Since the start of the COVID-19 pandemic, images of doctors and nurses with raw, bruised faces from hours endured behind personal protective equipment (PPE) have become widespread. Today, staff at Monmouth Medical Center (MMC) are getting relief from the pressure on their ears from the elastic straps of face masks thanks to the generosity of an Ocean Township resident.



Alix Hayes makes stretch headbands with buttons in her Ocean Township home.

Alix Hayes has donated more than 200 homemade stretch headbands with buttons on the side to make wearing masks less painful. Hayes, who works in corporate communications and "felt helpless sending \$20 here and there for meals while sitting in her home office," says she is "not a big sewer, but can do a button."

What started in late March as a one-woman shop has been expanded to a small army of adult and teenage volunteers who are assisting with the sewing.

"I have a little army right now: adult and college and high school students who are helping out," says Hayes, who has experience organizing volunteer activities as the PTA president of her children's Ocean Township elementary





Frontline staff at Monmouth Medical Center show off their headbands.

school. "I believe we have made nearly 500 headbands so far, with the largest percentage going to MMC, but we have donated to other area hospitals, including RWJBarnabas Health sister hospitals RWJUH New Brunswick and Newark Beth Israel Medical Center, and care facilities as well."

The cost of the headbands and buttons has been paid by Hayes, with additional donations by a family friend, who is a retired nurse, as well as additional donors. "Of course, we're doing this all for free; it's the least we can do," she adds.

She has scoured local dollar and discount stores as well as online outlets that offer inexpensive headbands, fashioning what she describes as "dude head wraps" out of solid stretch material for men who are working on the front line at the hospital.

"Everyone wants to help in any way they can," she says, adding a neighbor recently dropped off 100 buttons. "It's become a real community effort."

At MMC, the headbands have been distributed to frontline staff, and the response has been incredible, according to Maureen Bowe, administrative director of Critical Care, Renal Services and Nursing Resources for the hospital.

"Everyone loved the headbands with the but-

tons so the masks don't hurt your ears," Bowe says. "We love that our community is thinking of all of us—so thoughtful and so generous too!"

Local hospital workers who would like a headband free of charge, with Ocean Township pick-up, can email healinghairbands@gmail.com.

CF PATIENT GIVES BACK

Bordentown residents Kelsey and Dave Hess have found a unique way to help frontline health care workers during the COVID-19 pandemic

Kelsey, who has been a patient of Monmouth Medical Center's Cystic Fibrosis Center since she was a young child, and Dave have donated medical-grade face shields made with a 3D printer to the frontline staff at MMC, the first hospital they chose to receive the donations. Since the start of the pandemic, the two have been making face shields with their 3D printer for health care providers and first responders all over the state, including MMC sister hospital Saint Barnabas Medical Center in Livingston.

Diagnosed at five months old with cystic fibrosis—a genetic, progressive disease that causes persistent lung infections that limit her ability to breathe—Kelsey made the donation to MMC through Robert Zanni, M.D., the hospital's chief of pediatric pulmonology and medical



Lillian and Logan Hess help prepare face shields for donation to Monmouth Medical Center.

director of the Cystic Fibrosis Center. She has been a patient of the center since she was 10, and she transitioned to the adult program when she reached her 20s.

"I've been with the entire team at the CF Center for many years, and was so happy to make Monmouth Medical Center the first hospital that we donated to," said Kelsey, a stay-at-

home mom who is currently navigating the waters of quarantine and schooling their 5-year-old daughter and 3-year-old son. "Even though the hospital is more than an hour away, it is where I go with any health issues and is where I had both my children. Monmouth Medical Center has a very special place in my heart."

When the COVID-19 crisis hit New Jersey, they wanted to make a difference so they started producing face shields using the 3D printer Kelsey had purchased a couple of years

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—Maureen Bowe, administrative director of Critical Care, Renal Services and Nursing Resources

ago as a gift for Dave. After some momentum generated by social media posts and a Facebook fundraising campaign, they have been able to buy two more printers and have increased their output, to date donating about 500 shields.

There's been a renewed interest in at-home 3D printing now that the machines can be used for making simple COVID-19 safety gear. A 3D printer works by extruding molten plastic through a tiny nozzle that moves under computer control. It prints one layer, delays during drying, then prints the next layer, eventually creating a physical replication of a digital design.

"Working with a single printer, we started making about 30 face shields a day, eventually boosting production to about 45 each day, and now with the additional printers, we are able to produce about 75 to 80 a day," says Dave, who adds that they have purchased rolls of filament through retailers such as Amazon and Micro Center. "The great thing about 3D printers is that you can adapt the design to your specific printer and the materials you have."

Designs for face shields are essentially a headband with the ability to attach a clear plastic sheet to the front. Jason Montero, director of distribution of MMC, notes that the hospital's respiratory therapy team loves the homemade shields.

Eric Carney, president and CEO of MMC, praised the ingenuity of community members like Alix Hayes and Kelsey and Dave Hess for finding unique ways to help health care workers on the frontline of the COVID-19 pandemic. "It's

so inspiring in times of crisis to see our community come together to support each other," Carney says. "At Monmouth, I see it day in and day out in the tireless dedication of our staff to our patients and each other. And I have seen it from the start of this health crisis in the generosity of our community—donations like these are truly a testament to the power of people to come together in a crisis to help each other."

SELFLESS STUDENTS

Trinity Hall student Lydia Lu, 16, daughter of Stanley Lu, M.D., director of the Radiology Residency Program at Monmouth Medical Center, and her classmates spent their spring break making masks for healthcare workers. In total, Lu and her friends Kathleen Devine, Faith King, Nora Phillips, Riley Raymond, Ellie Thompson, Melina Conhagen, Lila Greene, Sofia Paparella and Caroline Cashman donated 93 masks to MMC and Shrewsbury Diagnostic Imaging.



Stanley Lu, M.D., program director for the Radiology Residency Program, Lydia Lu, Cheryl Solon, MSW, director of development for the MMC Foundation, and Jason Montero, director of distribution at MMC



Dave, Kelsey and Lillian Hess and Robert Zanni, M.D., chief of pediatric pulmonology and medical director of the Cystic Fibrosis Center at MMC



MAKING A CONNECTION

For COVID-19 patients in isolation, an artistic gesture creates a feeling of togetherness.

For patients hospitalized with COVID-19, the stay can feel extremely isolating because visitor restrictions mean they don't have family there, and the staff providing their care have to limit their time in the room as well.

Lisa Nunez, a patient care associate on one of Monmouth Medical Center's COVID patient units, has found a colorful way to address this isolation by adding a human touch to each patient room on her unit. Eric Carney, MMC president and CEO, recently shared in one of his ongoing COVID-19 briefings to staff the story of how Nunez was using her artistic talent and creativity to draw colorful pictures, customized based on the patient's request, on the glass door panels of each room.

"Patients who have been hospitalized since the start of the COVID-19 health crisis understand that the environment is like nothing we have ever experienced," Carney says. "The isolation rooms and extensive use of masks, gowns and eye protection can be quite unsettling to patients and makes forming a connection with the patient much more difficult for our caregivers. This is an amazing way to bring in a little color, and a little fun, into these very difficult times."

Nunez said that her role as a patient care associate, who provide direct patient care under the supervision of a registered nurse, normally allows her to form close bonds with her patients, and she has found that the drawings—made with liquid chalk window markers—have allowed her to continue to connect with them in a personal way.

"I always try to treat my patients like family, spending extra time with them whenever possible," she said, recalling one elderly patient who was like a grandmother to her, adding she would find time each day to watch some of the evening news with, and another lonely patient who she would sit with and paint her nails. "With all of the precautions in place due to COVID-19, that's not possible now, so I needed to find another way to form a bond."

Each drawing is unique and based on the patient's background or interest. For example, she learned that one patient loves spending

time in Florida, and drew palm trees and an ocean scene to remind him of his happy place. During the recent holiday season, she decorated windows with Easter and Passover images, and for patients who are too ill to speak, she will draw happy images such as rainbows, sunshine, birds and flowers.

Studies have shown that art therapy is effective in reducing stress, decreasing anxiety, and increasing positive emotions for people facing a health crisis. She points to recently discharged patient Juana Samol, a member of the housekeeping staff at MMC, who was so moved by her drawings that she asked to have her picture taken at her window before leaving the hospital.

"When Juana was first hospitalized, she was quite scared, so I drew a rainbow and hearts and wrote 'Feel better Juana'," Nunez says.

Samol, who is home recovering and reports feeling better and stronger every day, calls Nunez a beautiful butterfly.

"When I saw the rainbow on my window, I thought, 'I am the luckiest person in the world to have someone do this for me'," Samol says. "Lisa is so amazing and kind—she and some of the other staff accompanied me to my ride when I got discharged and made me feel so special. I am so grateful to all of the wonderful doctors and nurses, the food services and housekeeping staff—everyone who took such great care of me."

In addition to patients, studies have also shown that caregivers who are stressed can greatly benefit from coloring. Noting the positive affect the drawings have had on her own stress level, Nunez, a nursing student who worked for 10 years as a director of a YMCA child care center prior to joining Monmouth Medical Center, said the drawings have had a positive reaction from her co-workers as well.

"There is so much stress for the frontline staff caring for patients who are often very ill with COVID, she said. "When I notice that one of my colleagues is having a particularly tough day, I hand them the markers and tell them to go color and create some art."





Top: Juana Samol, a Monmouth Medical Center employee who was hospitalized with the coronavirus, shows off the art created by patient care associate Lisa Nunez. At press time, Samol was recovering at home. Bottom: Nunez has been adding a colorful touch to hospital rooms by drawing pictures on the glass panels of each door. The drawings are based on patients' requests.

FACING NEW CHALLENGES

Clinical dietitian Cindy Kwiatkowski ensures COVID patients get the nutrition they need for recovery.

Critical care dietitian Cindy Kwiatkowski, M.S., R.D., CNSC, marks her 32nd anniversary with Monmouth Medical Center

marks her 32nd anniversary with Monmouth Medical Center in July, and of those years, 30 have been spent providing nutritional care to people who have been admitted to the intensive care unit (ICU) in a life-threatening condition. Caring for patients during the COVID-19 pandemic has been, she says, the biggest challenge of her long career.

Clinical dietitians like Kwiatkowski are playing a crucial role in the fight to save lives on the front line of the pandemic. They are experts in assessing the nutritional demands of each patient, taking into account the age, gender, laboratory data and other underlying medical conditions that are essential to ensuring each patient receives the right amount of nutrition to aid recovery from their acute illness and to support their ongoing rehab when they recover.

"It has been challenging to say the least working during the COVID-19 pandemic," she says. "Under normal circumstances, a typical part of our evaluation is to talk to the patients about their nutrient intake prior to admission, and if the patient is unable to speak, we will talk to family members. We also perform a physical exam to look for signs of muscle or fat wasting, and with the current restrictions in place, we are not able to do these things."

Most of the hospitalized COVID-19 patients are in a critical care setting, and often they are sedated and breathing with the assistance of a ventilator, and have very high caloric needs due to the inflammatory disease state. Their nutrition, hydration and medications are often delivered through feeding tubes, which are used to deliver protein and calories prescribed to meet the demands on the body during critical illness. Noting that many of these patients were very sick for a week or more before coming to the hospital, Kwiatkowski says they are already far behind the nutritional curve when they are admitted.

"What we have seen in patients when they come in is that their desire to eat is already very low due to the loss of appetite as well as sense of taste

and smell that is very common with this virus," she says. "And for those patients not being fed by tubes, feeding them is very challenging. Normally on the ICU and medical floors, patient care associates sit with patients and feed them or encourage them to eat, but that's not possible now because they have to limit their time in the patient rooms."

A part of the team with the doctors, nurses, respiratory therapists and pharmacist that rounds daily on the critical care units, she says the dietitian is able to do real-time adjustments to the patients' nutritional plan of care daily based on observation and the laboratory and clinical values

JSC, to

Cindy Kwiatkowski, M.S., R.D., CNSC

to make sure they are optimizing nutrition and that the patients are tolerating the nutrition well.

"We are observing severe muscle and weight loss in these patients, and in an effort to counter that we are constantly reevaluating their protein and caloric intakes and making sure we are aware of any changes in their condition," she says.

"When patients are critically ill, they can retain water weight, so the weight loss we are seeing in these COVID patients is likely even more severe than it appears. We do generally see patients in ICU who face similar nutritional challenges, as they are obviously very ill, but with COVID patients, the nutritional crisis is more heightened and prolonged."

To stay aware of all of the best practices in her field, Kwiatkowski attends weekly webinars and reads literature and com-

municates regularly with peers around the country to try and stay as current as possible with treatment modalities.

"There is so much uncertainty with a new disease with a presentation that in some ways looks like certain illnesses we have seen before, and we have to figure out what we can apply from what we know to prevent weight and muscle loss," she says, adding that they are seeing patients in the ICU as young as their early 30s.

Because critical care dietitians like Kwiatkowski have highly developed knowledge, skills and expertise to manage the complex issues seen in critically ill patients, during the COVID-19 pandemic, her role has included the training of non-critical care dietitians to assist in managing the increasing numbers of critically ill patients that have been admitted.

"Typically, we have never had as many as 17 on tube feedings at any given time housewide; now we are managing up to 21 tube feeders on a daily basis," she says. "One of the drugs used to sedate people in ICU contain calories from fat that need to be accounted for when prescribing feeding regimens."

The incredible teamwork that it has taken to manage such a large critical care patient population has played a key role in the hospital's successful re-

sponse to the pandemic, according to Kwiatkowski.

"A positive I will take from this health crisis is seeing the nursing staff who have never worked in ICU—we have retired ICU nurses who have returned to help and nurses who normally work in the OR, in Case Management or in outpatient settings working at the bedside in a critical care setting," she says. "To see the ICU nurses and so many nurses from other areas come together as one functional team practically overnight has been an amazing thing to be a part of. This has really been a strength that we were able to pull together with such incredible team spirit to deliver the best possible care for our patients."



'Five minutes in the car to cry.' Hospital workers share the inside story of their fight to stop COVID-19

For more stories about Monmouth Medical Center's frontline heroes, visit https://bit.ly/2WTknSX



{ IN GOOD HEALTH }

THE RIGHT CHOICE

When his COVID symptoms worsened, an Ocean Grove man turned to Monmouth Medical Center — his "go-to" hospital — for help.

After a recent cardiac procedure, Albert Dorsey began monitoring his temperature on Saturday, March 14 at his cardiologist's request. By Tuesday, the 64-year-old Ocean Grove resident was consistently spiking a fever, found himself sleeping nearly 16 hours each night and had nearly no appetite. He also began having more pronounced trouble breathing. As instructed by his cardiologist, Dorsey called his general practitioner for an appointment for an evaluation.

His doctor took one listen to his lungs and ordered a chest X-ray and COVID-19 test. On Wednesday, Dorsey's X-ray showed he had pneumonia. He was tested for COVID-19 on Thursday. Dorsey's symptoms persisted, and 48-hours later he found out he was positive for COVID-19.

At the time, there was no reason for Dorsey to go to the hospital. He was managing at home so he self-isolated and continued to monitor his symptoms. By Sunday, however, his breathing became extremely labored, especially when he would lay down. In fact, he woke up at 2 a.m. and had to sit on the edge of his bed for 20 minutes just to catch his breath. His blood oxygen level was in the 80s.

Dorsey was unable to sleep the rest of the night. Simply lying down made it nearly impossible for him to breathe. Even sitting in a chair was taxing. On Monday morning, his family knew it was time to get him medical attention.

His daughter, Jane Dorsey, drove him to Mon-



mouth Medical Center in Long Branch where he was immediately taken into the Emergency Department and isolated in his own room. The staff began treating Dorsey right away. He received oxygen and a strict and aggressive pharmacological treatment. Luckily, by Tuesday morning he felt like he could finally breathe again. The treatments and medications seemed to be working after only 24 hours.

Dorsey stayed in a negative pressure room to contain the virus. Therefore, his room was always cold. Dorsey was allowed to wear his own clothes to help keep warm, but because no visitors were allowed, his kids were not able to bring any personal items directly to him. Instead, the nurses made special arrangements with his family to get him everything he needed.

Despite the common anxiety and uncertainty surrounding a COVID-19 diagnosis, Dorsey never felt those concerns. He credits much of that to what he calls the "terrific staff" at MMC. Doctors from various disciplines, the nurse practitioners and the entire nursing staff treated him with immense care under less than ideal conditions.

"The entire staff could not have been more accommodating, capable and solicitous," Dorsey says. "Every time a nurse came in my room for the many things they were doing, they always asked how I was doing, how I was feeling and if I needed anything. They all went out of their way to make sure I felt comfortable at all times.

"Everyone was phenomenal," he continues.

"Even with the masks and the gloves and the gowns on, their bedside manner helped me not to feel nervous or concerned about being in the hospital with COVID-19. I trusted them completely. I knew I was in good hands."

Despite living closer to other hospitals in the area, Dorsey has always considered MMC as his "go-to" hospital. In fact, all four of his children and his granddaughter were born at MMC. "When I realized I was going to have to be hospitalized for COVID-19, I knew immediately I needed to go right to Monmouth Medical Center," Dorsey says. "I'm glad I went. Top to bottom, they were fantastic and I'm proof of it."

By the end of the week, he was feeling what he would describe as almost completely better. Dorsey was discharged Saturday, March 28 with instructions to self-isolate. He went home and although his wife had also contracted COVID-19, she was able to recover safely at home without a trip to the hospital. His sons and daughter cared for them while they were quarantined at home, cooking and making sure they were comfortable and had everything they needed.

During Dorsey's first week home, he continued to sleep nearly 12 hours a night. By April 4, he was back to sleeping normally and feeling 100 percent better. Dorsey and his wife have both made a complete recovery and everyone in his family is doing well. He credits his recovery to the care he received at Monmouth Medical Center.