

# MONMOUTH

## health & life

*'tis  
the season*

**GIFT IDEAS  
FOR EVERYONE  
ON YOUR LIST**

**DELICIOUS  
ALLERGY-FREE  
COOKIES**

**SPARKLING  
WINE &  
CHAMPAGNE  
IDEAS**

**A FRESH TAKE  
ON HOLIDAY  
DECORATING**

*make  
fitness fun*  
**TRY SNOW-  
SHOEING** p.18



**HARNESS YOUR HORMONES**  
WITH MENOPAUSE TREATMENTS



# HEALTH TIPS FOR EVERY AGE

SPECIAL PROMOTION

# NEW 'GEM' UNIT AT MONMOUTH MEDICAL CENTER

## CATERS TO SPECIAL NEEDS OF ELDERLY ER PATIENTS



THE NEW GEM UNIT AT MONMOUTH MEDICAL CENTER FEATURES SIX PRIVATE ENCLOSED ROOMS ATTUNED TO SPECIAL AGE-RELATED NEEDS WITH WALL SCONCES THAT CAN BE DIMMED TO PROVIDE A MORE RELAXING ENVIRONMENT AND FLOOR LIGHTING THAT REFLECTS TO PREVENT FALLS.

### WITH THE AGING POPULATION

and the demographic shift of older adults in the health care system, emergency departments are increasingly challenged with the complexities of providing care for geriatric patients.

Estimates are that by 2030, one in five Americans will be 65 or older, and, while the aging of the U.S. population will impact all areas of health care, emergency departments

in particular will be affected. In response, Monmouth Medical Center has introduced a dedicated Geriatric Emergency Medicine (GEM) unit to better meet the complexities of providing care to this vulnerable geriatric patient populations.

The new GEM unit at Monmouth Medical Center, which debuted in November, features six private enclosed rooms in a separate area of the hospital's Emergency Department

specially designed to meet the complex needs of the frail elderly and their caretakers.

"The environment is specifically designed for privacy and quiet and to reduce anxiety, noise, confusion and risk of falling," says Catherine Hanlon, M.D., chair of emergency medicine at Monmouth, who notes that the nursing station in the center of the unit also was specially designed to increase visibility. "The rooms

[mmcurogyn.barnabashealth.org](http://mmcurogyn.barnabashealth.org)

To learn more about the GEM unit at Monmouth Medical Center, call **732-923-6740**.  
To learn about other programs or service for seniors, call **888-724-7123**.

are attuned to special age-related needs with wall sconces that can be dimmed to provide a more relaxing environment and floor lighting that reflects to prevent falls."

Other amenities of the unit include special beds with extra-padded mattresses to help reduce pressure and equipped with alarms to prevent patient falls by alerting staff if a disoriented patient attempts to get out of bed. Large face clocks, special pillow speakers to make watching television and listening to music more comfortable, and blanket warmers are among the host of amenities for the new unit.

"The physician and nursing staff have been specially trained and are dedicated to caring for seniors, and Angela Soldivieri, a nurse practitioner trained in geriatrics is our program coordinator and will be in close communication with the referring physician," Dr. Hanlon says, adding that all patients 65 and older will be screened for a host of risk factors and, if appropriate, will be admitted directly to the GEM unit. "The unit also has a dedicated pharmacist who will focus on medications commonly prescribed for seniors with special attention to issues that can result in dangerous interactions."

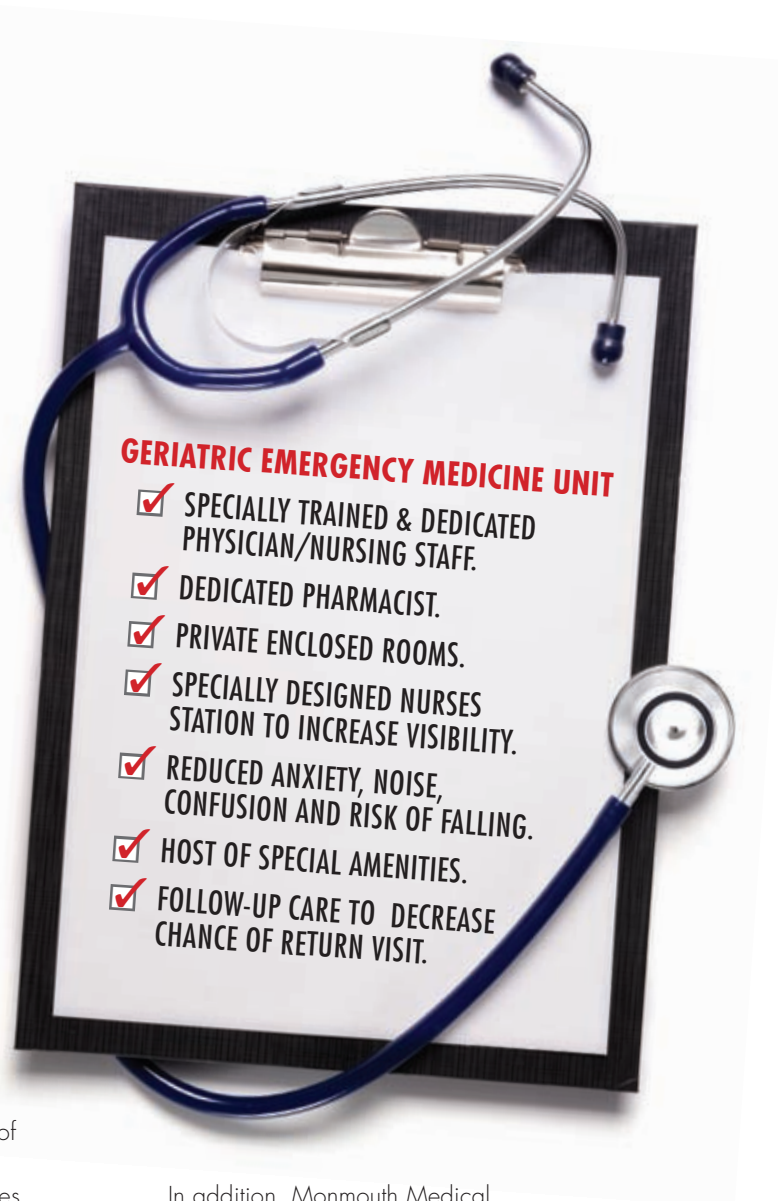
Soldivieri will contact all discharged patients and/or their caregivers within 24 hours to follow up on any issues and assess the patient's status, according to Dr. Hanlon. For patients who are admitted

to the hospital, the coordinator will work with the patient and their family, throughout their hospital stay, to help prepare for the patient's discharge.

"The discharge process begins in the ED with continuity and coordination of care throughout Monmouth Medical Center, as well as with community providers, agency staff and nursing home staff as appropriate," she says. "The goal is for the transition to be seamless and to decrease the possibility of a return visit to the ED."

Jessica Israel, M.D., chief of geriatrics and palliative care at Monmouth Medical Center, notes that the GEM Unit is the latest in a host of initiatives taken by Monmouth to meet the special needs of its elderly patients.

She points to Monmouth Medical Center's longstanding and comprehensive geriatric program, which coordinates health and social services for the elderly and their families with a focus on comprehensive care and education. Monmouth's Anna Greenwall Geriatric Program—which is led by geriatrician Priya Angi, M.D., specializes in medical care for the older adult, assessment of memory disorders and support for caregivers and the health professional, through a network of hospital-based and community-based services.



In addition, Monmouth Medical Center will be the lead hospital in the Barnabas Health Transition Program for the Frail Elderly with Dementia, a program designed to improve patients' self-management of their care and decrease hospital readmissions among this vulnerable population afflicted with multiple chronic health conditions. The program is funded through a Robert Wood-Johnson Foundation grant awarded to Barnabas Health Foundation, and will be developed and initiated at Monmouth Medical Center under Project Director Allan Tunkel, M.D., chairman of the Department of Medicine at Monmouth, and then expanded to other Barnabas Health affiliates throughout New Jersey.

# ROBOTIC PROSTATE CANCER SURGERY

## HAS BALLOONING ENTHUSIAST BACK ALOFT QUICKLY



**IN 2003, GENE BURNSTEIN,** an active 52-year-old hot-air balloon pilot was getting ready for a ballooning event in Canada and scheduled a check-up to obtain the FAA medical clearance needed for the event.

During the routine exam, his doctor noticed something out of the ordinary when he examined his prostate and recommended that Gene see a specialist. Over the next few years, Gene's urologist kept a careful eye on his PSA (prostate specific antigen) screening test and in 2007, when his test levels went up, he underwent a biopsy that showed he had prostate cancer.

Gene learned he had early stage prostate cancer and immediately began extensive research to determine his treatment options.

"I asked my urologist a whole slew of questions, and he recommended full open surgery, but I had been reading about robotic surgery. I decided to seek a second opinion from urologists Michael Esposito, M.D., and Vincent Lanteri, M.D., who are world-renowned experts in robotic surgery and pioneers of robotic prostatectomy," Gene said.

He reviewed the video on the doctors' website and brought a full list of questions with him to his initial visit. "Dr. Lanteri appreciated that I had done my homework and we ended up having a nice, really open conversation. From that point on, I have had an incredible relationship with both doctors and decided to schedule my prostatectomy as a robotic surgery procedure at Monmouth Medical Center."

"Robotics, in my opinion, was a cleaner option than traditional surgery," he added. "It uses small incisions and

[monmouthfoundation.org](http://monmouthfoundation.org)  
[barnabashealth.org](http://barnabashealth.org)

To learn more about robotic surgery at Monmouth Medical Center, or for a referral to a Monmouth-affiliated robotic surgeon, call **888-724-7123**.



GENE BURNSTEIN, HOT-AIR BALLOON PILOT

the recovery time is much shorter. My surgery was scheduled to take place in early June, and one thing I didn't want to do was miss the international balloon festival in Canada in August. I wondered if I could wait a few months to have the surgery, but Drs. Lanteri and Esposito recommended against that."

On June 4th, Gene went to Monmouth Medical Center, the first robotic surgery program in the region and one of the busiest in the state, to undergo his prostatectomy. He stayed overnight and was released after lunch the next day. He was walking shortly after, and he was able to participate in the big balloon festival in Canada, which was a great success.

"Robotic surgery was an all around good experience," he said. "Both the surgery itself and everything associated with it have been so successful, and that took a big load off my mind. It has been four years since my surgery and I am feeling great."



UROLOGIST  
MICHAEL ESPOSITO, M.D.,  
IS MEDICAL DIRECTOR OF  
THE ROBOTIC SURGERY  
PROGRAM AT  
MONMOUTH  
MEDICAL CENTER.

## MONMOUTH MEDICAL CENTER FIRST IN NEW JERSEY TO PERFORM TWO GROUNDBREAKING ROBOTIC SURGERIES

NON-INVASIVE APPROACH OFFERS BETTER PATIENT OUTCOMES

When it comes to robotic surgery, Monmouth Medical Center is leading the way in New Jersey.

In addition to recently performing two groundbreaking robotic surgery procedures that were each firsts for the state, the hospital offers the only program in Monmouth, Ocean and Mercer counties with two of the most-advanced da Vinci robotic surgery systems. Monmouth Medical Center is among the top five hospitals in New Jersey in terms of the volume of robotic surgery performed.

Monmouth's reputation as the region's leader in robotic surgery has also been solidified by two groundbreaking robotic surgeries that have taken this innovative technology to the next level: a partial nephrectomy (kidney removal) using fluorescent imaging and simulation technology and a scarless single-incision laparoscopic hysterectomy. These innovative procedures offer patients a minimally invasive alternative to traditional surgery with better results, as robotic surgeons can perform the most complicated surgeries more precisely. The outcomes are better, the recovery time is shorter and patients often return home the same day.

Urologist and robotic surgeon Pierre Mendoza, M.D., performed the first partial nephrectomy in New Jersey for a patient with kidney cancer using a new near-infrared fluorescence imaging guided system available on the da Vinci Si Surgical System. Monmouth Medical Center is among a select group of hospitals in the country to utilize this advanced technology that uses specially designed camera and endoscopes enabling surgeons to capture images of tissue and surrounding blood vessels by injecting a unique fluorescence dye that is activated by near-infrared light. The result is more precise visualization, allowing finer assessment of tissue while using a minimally invasive approach.

"Using fluorescence imaging is revolutionary as it may allow surgeons to differentiate between malignant and normal tissue in real time, as cancerous tissue glows less brightly than normal organ tissue," Dr. Mendoza says. "By using this technology, we can perform complex kidney surgery in a more accurate, less invasive manner."

Real-time application of the technology, combined with 3D visualization, provides a more accurate identification of critical vessels and tissue during surgery. This surgical approach enables surgeons to pinpoint and remove the diseased portions of the kidney with more precision, without removing the entire kidney. The enhanced imaging system incorporates a green-colored dye called IndoCyanine Green (ICG) and is used for identification of the renal vessels, allowing selective arterial clamping during surgery.

"Fluorescence imaging technology further



MARTIN P. MICHALEWSKI,  
M.D., F.A.C.O.G.



PIERRE MENDOZA, M.D.

advances robotic surgery by adding a tool to potentially minimize vascular complications during robotic-assisted partial nephrectomy," said Dr. Mendoza. "It's an advantage for both patients and surgeons."

For women requiring pelvic surgery, the single-incision laparoscopic surgery (SILS) hysterectomy offers shorter recovery times and often enables patients to return home the same day. Performed by urogynecologist Martin P. Michalewski, M.D., F.A.C.O.G with the da Vinci Robot, the SILS hysterectomy also offers a major advantage over traditional minimally invasive surgery in that there are no visible scars.

Rather than making three or four separate one-quarter inch abdominal incisions, SILS uses a single one-inch incision with the only scar hidden within the umbilicus, or belly button, according to Dr. Michalewski.

"Since there are fewer incisions, there is significantly less pain as there is less tissue trauma, less bleeding, and less risk of infection or injury from multiple port insertions," Dr. Michalewski says. "Laparoscopic surgery has moved to a whole new level by adding SILS and robotics, enabling us to perform even the most complex procedures previously limited to open abdominal surgery."

According to the Centers for Disease Control and Prevention, doctors in the U.S. perform approximately 600,000 hysterectomies a year, making it the second most common surgery for women. Traditional hysterectomies require a vertical or horizontal incision across a woman's lower abdomen and a two- or three-day hospital stay followed by up to eight weeks of recovery.

"As the use of minimally invasive technologies such as robotics and SILS is changing medicine dramatically, it's critical for people to research their treatment options to be sure they are receiving the most effective approach that will yield the best results," Dr. Michalewski says. "At Monmouth Medical Center, we offer our patients the most experience in the the region, with hundreds of robotic cases performed annually."