

A Publication of
COMMUNITY MEDICAL CENTER

Winter 2022

healthy *together*

**LIFESAVING
FACTS ABOUT
DIABETES**

**SMALL
INCISIONS,
BIG RELIEF**

**MYSTERY
SEIZURE—
SOLVED!**

A photograph of a man and a young child hugging. The man is on the left, wearing a grey knit beanie, a striped scarf, and a dark jacket. The child is on the right, wearing a grey knit beanie and a blue jacket with yellow accents. They are both smiling and looking towards each other. The background is a bright, slightly blurred outdoor setting.

**PROTECT YOUR HEART
THIS WINTER**

MESSAGES FROM LEADERSHIP



“At RWJBarnabas Health, we enter the new year with renewed strength. We’ve taken the challenges of the pandemic and used them to find ways to better serve our communities, patients and staff. Additionally, we are expanding telehealth, offering advanced genomic testing for infants and pushing toward breakthroughs in pediatric cancer research, with a focus and dedication to creating a healthier 2022 for all.”

BARRY H. OSTROWSKY

PRESIDENT AND CHIEF EXECUTIVE OFFICER, RWJBARNABAS HEALTH



“At Community Medical Center, we have taken what we have learned during the COVID-19 pandemic and channeled it into our plans for the future. We are reflecting on a year of incredible growth and change, and looking forward to continuing this in 2022. With exciting new programs, services, locations and renovations under way, we have taken innovative steps to improve and sustain the health of the communities we serve.”

PATRICK AHEARN

CHIEF EXECUTIVE OFFICER, COMMUNITY MEDICAL CENTER

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HEALTH NEWS



GROUNDBREAKING CARDIAC TECHNOLOGY

Community Medical Center (CMC) became the first hospital without open-heart surgery in New Jersey to successfully implement a Shockwave C2 Coronary Intravascular Lithotripsy catheter, a cutting-edge cardiac technology. The Shockwave device uses

sonic pressure to safely break up calcium lesions in the coronary artery. Performing the first case were Jay Stone, MD, interventional cardiologist (third from left) and Cardiac Catheterization Lab team members (from left) Christine Anastasatos, RN; Karen Ruscio, RT; Erin Armstrong, RN; Christina Guarino, RN; and Alycia Macri, RN.

BARNEGAT WOMEN'S CENTER OPENS



CMC and RWJBarnabas Health (RWJBH) celebrated the opening of their newest hub location in Barnegat Township with a ribbon-cutting ceremony. CMC's Lab and Women's Imaging Center and Ocean Women's Healthcare Group, PA, a practice of the Combined Medical Group of RWJBH and Rutgers Health, offer state-of-the-art care in one convenient location at the Barnegat 67 shopping complex, 770 Lighthouse Drive. The ceremony was attended by leaders from CMC, RWJBH, Barnegat Township and Ocean County. It's the second hub opened as part of CMC's plan to bring important healthcare services and providers closer to local residents' homes. To schedule an appointment, call 848.208.6203, option 3.



LOCAL MAYORS RECEIVE UPDATE

Patrick Ahearn, Chief Executive Officer, CMC, provided an update on the medical center during an Ocean County Mayors Association meeting in October. CMC is a crucial part of the Ocean County region as both a healthcare provider and one of the largest area employers. He shared exciting developments at CMC, including the new Graduate

Medical Education Program, the comprehensive Master Facility Plan, the Emergency Department's ongoing renovation and healthcare hubs opening throughout the region.

healthy *together* contents

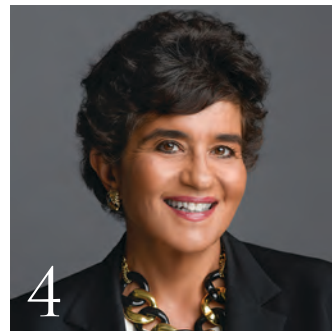
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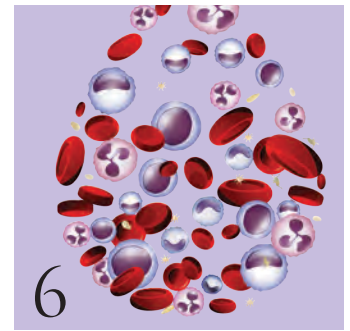
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FIRM FOUNDATION

**A LOCAL PHILANTHROPIST
CARRIES FORWARD HER
FATHER'S INSPIRING VISION.**

It's circa 1965, and a young Edele Hovnanian waits at the school bus stop with her mother and sister. Her mother, Anna, gives a nickel to each child. "You can buy a treat at school—or give me back the nickel; I'll give it to Daddy, and he will put it toward the next piece of property he's buying," Edele recalls her mother, Anna, often saying. Both children, Edele says, would hand back the nickel.

The choice taught important lessons, Edele says. It told the children that money is not just for your own enjoyment. It suggested the importance of investment. "And it was Mom's way of making us feel part of Dad's success," Edele says.

Edele is now President of Hovsons Inc., the company her father, Hirair, founded. She manages a multimillion-square-foot portfolio of commercial properties, a number of operating companies and substantial investments. She also heads the H. Hovnanian Family Foundation, which recently announced it would donate a \$5 million leadership gift to support capital renovations to the Emergency Department (ED) at Community Medical Center (CMC).

“My father was an entrepreneur who was out of the house when we woke, and we were lucky if we saw him before Mom put us to bed,” Edele recalls of growing up with her four siblings (Siran, Armen, Tanya and Leela), who were born in quick succession over seven years. “Dad was this almost mysterious man who came in and out of our lives, yet was a great influence. Mom was a wonderful woman who raised us and made us feel part of his life.” Hirair passed away in April 2021, preceded by Anna, who died in 2018.

Being part of Hirair and Anna Hovnanian’s life and part of the Hovnanian family meant learning to be prosperous but thinking strategically about finances and leveraging success to develop and support charitable causes and the local community. “Dad said that through your mid-40s, you should focus on your career and job,” Edele says. “Once you’re secure, you can start spending more time and resources on philanthropy.”

COMMUNITY COMMITMENT

As a young man, Hirair came to the United States from Armenia on a freighter in 1951 to pursue higher education, graduating from Villanova in 1956 with a bachelor’s degree in civil engineering. Settling in the Toms River area, he eventually formed a home-building business in which he briefly partnered with brothers but soon broke out on his own, specializing in the then-innovative concept of large-scale adult communities with single-family homes on individual lots.

“He worked hard and never believed in borrowing money,” Edele says. “He just grew the company through the 1960s and ’70s, and by the time I joined in the 1980s, he was a wealthy man.” Edele’s goal was to develop companies for the benefit of the second generation, and she soon helped establish the family’s foundation. “Within a decade, we created enough for our generation that Dad was free to commit 100 percent of his net worth to philanthropy,” Edele says. “He revised his will and left nothing to the family because we

were all fine financially.”

Close to Hirair’s heart was support for the Armenian community through organizations such as the Armenian Assembly of America, for which he was a founding benefactor. Edele continues to support Armenian causes but also has spearheaded local philanthropy in New Jersey. “As Dad got older, he relied more on me to find worthy recipients of our grants,” she says.

Much of that largesse has focused on Ocean and Monmouth counties. “Central New Jersey is where our family has been since the day Dad arrived in this country,” Edele says. “CMC is the hospital many people use, and it’s an obvious place for us to give back to the community.”

SAVVY APPROACH

Following her father’s example, Edele evaluates overall impact on the community when choosing organizations to support. “Dad didn’t treat philanthropy differently from business,” Edele says. “You need to do due diligence. What are the deliverables? Is the budget realistic? Will the enterprise be self-sustaining? Is the leadership inspiring? He didn’t want to just slap his name on something, but rather use his for-profit savvy to discern where philanthropy will have the biggest effect.”

Supporting a state-of-the-art renovation of CMC’s ED seemed an especially worthy project. When completed, the \$37 million upgrade—already partially finished—will transform the department. The renovated ED will include features such as air filtration and individual rooms with glass walls to prevent germs from spreading, efficient patient flow and at-hand access to tests such as CT scans, X-rays and ultrasounds.

“We are grateful to Edele Hovnanian and the Hovnanian family for this wonderful gift—an extension of their generous philanthropy and symbolic of what they’ve built throughout our region,” says Jennifer Shufran, Vice President, Community Medical Center Foundation.

“The ED benefits the entire community and is like the doorway to the hospital in many respects,” Edele says. “We proudly support CMC’s Emergency Department putting its best foot forward. I’ve been very positively impressed with CMC’s vision, and have absolute faith that the hospital is laying the foundation for what Central New Jersey needs in terms of acute care.”

To learn more about supporting Community Medical Center, call **732.557.8131** or visit **www.cmcgiving.org**.





TEAMING UP AGAINST BLOOD DISORDERS

A NEW HEMATOLOGIST/ONCOLOGIST WITH EXPERTISE IN BENIGN AND MALIGNANT BLOOD DISORDERS ENHANCES CARE AT RWJBH SOUTHERN REGION HOSPITALS.

Blood disorders can be complex. Consider blood cancers: Although they may concentrate in sites like the lymph nodes or bone marrow, they affect or develop in cells that can circulate through the body and often involve the immune system. It's the job of a hematologist/oncologist to understand the intricate nature of blood



HUSSAM ELTOUKHY, MD

disorders, find out whether problems are malignant or benign (cancer or noncancer) and treat patients accordingly.

Providing such expertise is the mission of

Hussam Eltoukhy, MD, who recently joined the multidisciplinary team that treats blood cancers and other blood-related disorders at Monmouth Medical Center (MMC), Monmouth Medical Center Southern Campus (MMCSC) and Community Medical Center (CMC). Dr. Eltoukhy also joins the medical staff at Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-Designated Comprehensive Cancer Center.

Dr. Eltoukhy's expertise is in benign and malignant blood disorders including acute and chronic leukemia, Hodgkin and non-Hodgkin lymphoma, multiple myeloma, myelodysplasia, myeloproliferative diseases and anemia.

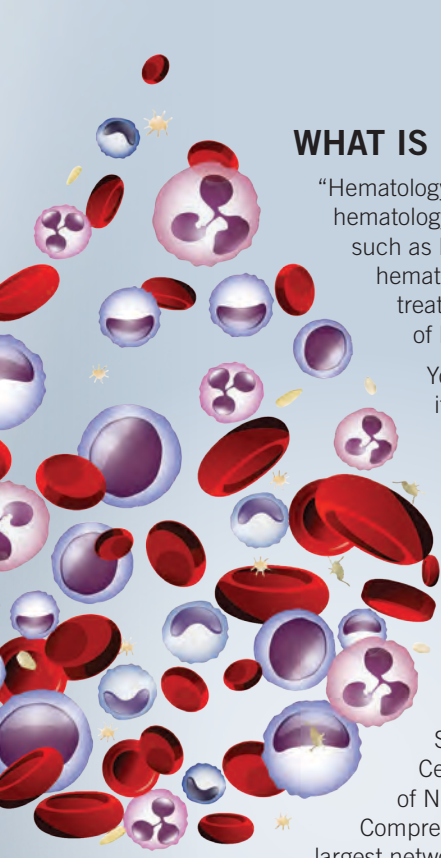
"Seeing patients at MMC, MMCSC,

CMC and Rutgers Cancer Institute gives me a unique opportunity to provide patients with close-to-home access to the most comprehensive and advanced care," Dr. Eltoukhy says. The team also includes Seth Cohen, MD, Regional Director of Oncology Services for RWJBarnabas Health's Southern Region.

ADVANCED TREATMENTS

The three hospitals' partnership with Rutgers Cancer Institute gives patients access to the full spectrum of therapeutic procedures and advanced treatment options, many of which are not available elsewhere. These include:

- **Precision medicine:** Treatments are tailored to a patient's specific form of



WHAT IS HEMATOLOGY/ONCOLOGY?

“Hematology” refers to blood. “Oncology” refers to cancer. So hematology/oncology in part refers to cancers of the blood such as leukemia, lymphoma and multiple myeloma. A hematologist/oncologist is a physician who specializes in treating not only these diseases but also a wide range of blood-related problems that are not cancer.

You might be referred to a hematologist/oncologist if a blood test comes back with an abnormality. For example, you may have unusually high or low levels of certain blood components such as infection-fighting white blood cells, oxygen-carrying red blood cells or clot-inducing platelets. You might also have abnormal plasma, which transports nutrients, antibodies, hormones, waste and a variety of other important substances in blood.

The integrated cancer care model at Monmouth Medical Center, Monmouth Medical Center Southern Campus and Community Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated Comprehensive Cancer Center—includes New Jersey’s largest network of cancer specialists, comprising nationally and internationally recognized hematologists/oncologists, radiation oncologists, nurses with expertise in blood cancers, nurse navigators and oncology support professionals.

Seeing a hematologist/oncologist can help you get to the bottom of blood-related problems. Whether an abnormality turns out to be cancer or a different kind of blood disorder, a hematologist/oncologist can help.

cancer through measures such as tumor profiling, in which tests determining the cancer’s genetic makeup can guide doctors to the most effective therapies.

- **Clinical trials:** Patients have access to cutting-edge therapies that may be available only at an NCI-Designated Comprehensive Cancer Center, where the necessary expertise, resources and equipment allow advanced research.
- **Immunotherapy:** Therapies enlist and strengthen the power of a patient’s immune system cells and boost their ability to attack a malignancy.
- **CAR T-cell therapy:** Immune system cells called T-cells are taken from a

*

RWJBarnabas Health and CMC, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

patient’s blood, engineered in the lab to attack a specific cancer-cell protein and infused back into the patient. CAR T-cell therapy is especially effective against certain blood cancers. Other advanced cellular therapies are also available.

- **Blood and marrow transplantation:** Procedures replace unhealthy blood or bone marrow (where blood-forming cells are found) with healthier cells from either the patient or a donor.

- **Proton beam and other sophisticated radiation therapies:** These therapies direct high-energy radiation such as X-rays against malignant cells. Proton beam therapy can precisely deliver energy to blood-related tissues such as lymph nodes while avoiding damage to healthy cells.

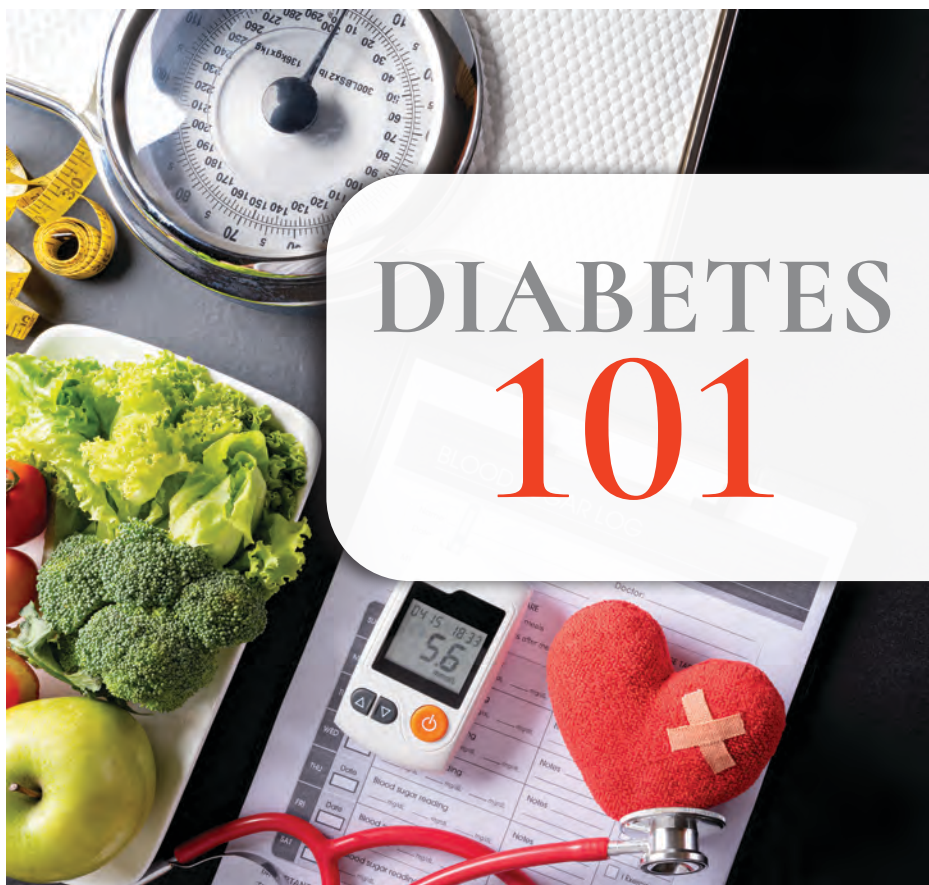
“I am committed to bringing exceptional care to all my patients and strive to provide the most comprehensive and up-to-date, evidence-based care,” Dr. Eltoukhy says. “I strongly believe in close collaboration with other providers and utilizing all available resources to help achieve the most optimum outcomes, all while respecting my patients’ needs and wishes.”



TREATING A RANGE OF CONDITIONS

Monmouth Medical Center, Monmouth Medical Center Southern Campus and Community Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options for benign and malignant blood disorders such as these:

- **Acute and chronic leukemia:** Cancers that affect blood-forming tissues such as lymph nodes.
- **Hodgkin and non-Hodgkin lymphoma:** Cancers that affect different types of white blood cells called lymphocytes.
- **Multiple myeloma:** Cancers that affect blood plasma.
- **Myelodysplasia:** Cancers that affect bone marrow.
- **Myeloproliferative diseases:** Rare cancers involving overproduction of specific blood cells.
- **Other blood disorders:** Wide-ranging disorders including anemia and clotting or bleeding disorders.



DIABETES 101

KNOWING THE BASICS CAN CHANGE—OR SAVE—YOUR LIFE.

More than one in 10 Americans has diabetes, but millions of others don't realize they've developed this often-silent metabolic disease. Learning what causes diabetes and how to prevent it could save your life. "It's important to prevent serious complications resulting from unchecked diabetes, such as heart disease," says nurse Maureen Pincus, RN, MSN, a diabetes educator at Community Medical Center (CMC). Here are facts you should know.

WHAT IT IS

Diabetes is a chronic disease that occurs when the body stops producing or responding to insulin, a hormone created in the pancreas. Insulin delivers glucose, or blood sugar, from the bloodstream into cells for energy. With diabetes, that process is disrupted and blood sugar goes

up. "Diabetes is basically the inability of insulin to do its job," Pincus says.

There are two types of diabetes, Type 1 and Type 2, with Type 2 being more common. People with Type 2 diabetes have stopped responding to or making enough insulin. (With Type 1 diabetes, which typically occurs in children and young adults, the body does not produce insulin.) Having diabetes increases risks for complications including cardiovascular disease, circulation problems and nerve damage.

HOW IT HAPPENS

Heredity plays a significant part in putting one at risk for developing diabetes along with other factors. "Type 2 diabetes is seen a great deal in people who are obese or overweight, eating poorly and not exercising," Pincus says. Having

excess fat cells can make insulin less or completely ineffective. "Developing insulin resistance from an increased number of fat cells can put you at greater risk," Pincus says.

HOW TO PREVENT IT

Lower your risk of developing diabetes by eating healthy foods and exercising regularly. If elevated blood sugar is detected early in a condition known as prediabetes, lifestyle changes like these can reverse the disorder and help you avoid full-blown diabetes. CMC offers services like weight loss and smoking cessation programs that can help. "If you already have prediabetes, you really have to work at preventing the full disease," Pincus says.

HOW IT'S DIAGNOSED

"The gold standard for diagnosis is the oral glucose tolerance test, or GTT, but the hemoglobin A_{1c} test is used along with the GTT as a determinant for the course of treatment and outcomes," Pincus says. By measuring the percentage of sugar-coated hemoglobin proteins in your blood, doctors can estimate your average blood sugar level for the past two to three months. Results that fall between 5.7 and 6.4 percent are a sign of prediabetes, while results 6.5 percent or higher indicate you have diabetes.

HOW IT'S TREATED

CMC uses a multidisciplinary approach to treat diabetes, Pincus says. Oral medications are typically the first step, but doctors might suggest lifestyle changes before prescribing medication. "We're looking holistically at what will be the best treatment for that person on an individual basis," Pincus says.

CMC also offers instructional programs for patients with prediabetes or diabetes. Specialists can help you control blood sugar through diabetes education and healthy meal plans. "It's empowering for people to see, 'Oh, I can do something about this,'" Pincus says.

To learn about Community Medical Center's Center for Diabetes Education, visit www.rwjbh.org/community-medical-center/treatment-care/diabetes-care.





FAST ANSWERS FOR VERY SICK BABIES

ADVANCED GENOMIC TESTING RESULTS ALLOW DOCTORS TO BEGIN TARGETED TREATMENT WITHIN DAYS.

Baby girl Frankie was born early—at 35 weeks—but all seemed well, except for some minor health complications that kept her in the Neonatal Intensive Care Unit (NICU) at Cooperman Barnabas Medical Center (CBMC).

However, within a few days of birth, Frankie had developed severe blisters on her feet and was losing skin.



KAMTORN VANGVANICHYAKORN, MD

Even routine screenings now posed a risk, and the baby was vulnerable to life-threatening bacteria entering her body. Her family was afraid to

hold her. A diagnosis was needed, right away.

Not long ago, genetic testing for infants could test just a few genes at a time, and results took weeks or months to come back. But thanks to a collaboration between Rady Children's Institute for Genomic Medicine and RWJBarnabas Health (RWJBH), Level III and Level IV NICUs in the RWJBH system can offer rapid Whole Genome Sequencing (rWGS). For medically urgent cases, preliminary diagnoses are available in three to five days.

Using a blood sample, rWGS can scan a child's entire genetic makeup for thousands of anomalies. The test results provide vital information that leads to individualized care and fewer costly, invasive procedures.

"Rapid genome sequencing is a game changer," says Kamtorn Vangvanichyakorn, MD, Director of Neonatology at CBMC. "It allows us to provide critical answers and targeted treatment at a time when the therapeutic window is often narrow."

"A SENSE OF RELIEF"

The testing revealed that Frankie has a type of epidermolysis bullosa (EB), a rare group of diseases that are most often caused by a genetic mutation. Frankie's mother, Jeri Berinato, knew that her own mother lived with a severe form of EB, leading to constant blistering and pain, difficulty swallowing, loss of her fingernails and dental problems.

"As soon as we received the results, I felt a huge sense of relief," Jeri says. "Not knowing what was wrong with my beautiful newborn baby was the worst feeling I've ever had. Now I know that, with proper care from the beginning, Frankie will have a much better quality of life than my mom has."

In addition to CBMC, rWGS is available to critically ill infants at Bristol-Myers Squibb Children's Hospital at Robert Wood Johnson University Hospital; the Unterberg Children's Hospital at Monmouth Medical Center; Children's Hospital of New Jersey at Newark Beth Israel Medical Center; and Jersey City Medical Center.

The use of rWGS at RWJBH came about through a long-standing partnership between Rady Children's Hospital in San Diego, the parent organization of Rady Children's Institute for Genomic Medicine, and Children's Specialized Hospital, an RWJBH facility.

"We're proud to be the only health system in New Jersey to partner with Rady Children's to offer rapid genetic testing," says William Faverzani, Senior Vice President of Children's Services at RWJBH. "With this test, our physicians have access to cutting-edge technology, enabling them to intervene quickly to improve the lives of our tiniest patients and their loved ones."

To learn more about rapid Whole Genome Sequencing at RWJBarnabas Health, visit www.rwjbh.org/pediatricgeneticstesting.



HOW COVID-19 IS RESHAPING HEALTHCARE

A CRISIS HAS LED TO SOME BIG CHANGES FOR THE BETTER.

COVID-19 created challenges that healthcare providers had never experienced in their careers. But the pandemic, while taking a toll on providers and patients alike, has also



ANDY ANDERSON, MD



JOHN BONAMO, MD

enabled the discovery of deep reserves of resilience and innovation. “Many of the changes we’re seeing in healthcare,” says John Bonamo, MD, Chief Medical and Quality Officer at RWJBarnabas Health, “are good things that came out of a terrible situation.” Here are six examples:

1 The rise of telehealth.

The technology for video healthcare visits has existed for decades, but providers as well as patients resisted virtual care—until the onset of

COVID-19 and social distancing.

“Before the pandemic, we were doing some virtual urgent care visits, but not routinely doing scheduled visits,” says Andy Anderson, MD, President and CEO, Combined Medical Group of RWJBarnabas Health and

Rutgers Health. “However, at the peak of the

pandemic we were doing 10,000 scheduled visits weekly, and even today we continue to do thousands each week.”

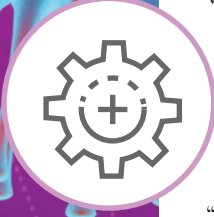
The increased





2 Increased awareness of preventing the spread of disease. In response to the pandemic, healthcare providers have redoubled their efforts to sanitize spaces and even filter the air, and the use of hand sanitizer and disinfectant wipes has become commonplace.

“We’ve always been committed to infection control through our system-wide journey to become a high reliability organization,” says Dr. Bonamo. “We amplified those principles to keep our facilities even safer, such as using new ventilation techniques, employing UV-C lights to clean rooms, paying continued attention to visitation policies and more.”



3 Enhanced teamwork. “At the peak of the pandemic, the needs were so great that our people began working together much more collaboratively,” says Dr. Bonamo. “Instead of staying in their own lane and handing off a patient or a procedure to a specialist, providers worked together—respiratory therapists teamed with nurses, primary care doctors worked in intensive care units at the elbow of intensivists, and so on. We learned how professionals can be ‘skilled up’ and trained to help in a crisis, and that has broken down levels of hierarchy and increased esprit de corps.”



4 An emphasis on mental well-being. “Mental health has become a bigger issue due to the pandemic. People are afraid of becoming ill, they may have greater financial burdens and they’re missing social interaction,” says Dr. Anderson. “Our behavioral health providers have been very busy.”

All kinds of healthcare providers are tuning in to their patients’ state of mind. “As doctors, we realize the importance of reaching out to people and asking them how they’ve been doing during the

pandemic,” he says. “Everybody has a story, and it’s important for us to take the time to listen and, if necessary, become an advocate or a resource for the patient.”

That kind of outreach is equally important for people who work in healthcare, Dr. Anderson says: “In the RWJBarnabas Health Medical Group, we set aside time each week to text or call people we work with to see if they’re doing OK, and provide help or a note of encouragement as needed.”



5 A brighter spotlight on healthcare disparities. “At RWJBarnabas Health, we’ve had an ongoing and important system-wide effort in regard to social justice and anti-racism,”

says Dr. Bonamo. “However, the disparity in the rates of COVID-19 sickness and death among people of color was so blatant that it brought many things to the surface and made us, as well as the healthcare industry as a whole, take a closer look. We’ve realized that saying ‘we treat everybody the same’ isn’t enough because some populations have many more resources than others.” To learn more about RWJBarnabas Health’s Ending Racism Together initiative, visit www.rwjbh.org/endingracism.



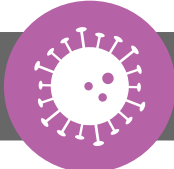
6 A new flexibility. “Healthcare is intensely regulated, and because of that we have a tendency to be very prescriptive about what we can do and how we do it,” says Dr.

Bonamo. “The COVID-19 need was so intense that we had to learn to be more flexible. For example, medical-surgical floors were turned into ICUs and we learned, OK, it may not be the ICU we would have built, but we can make this work. A lot of the old regulations were lifted during COVID-19, which enabled us to be flexible, but some of what we had been doing was just a result of old habits. Now we’ve expanded our horizons and have become much more nimble.”

demand led to technology upgrades, he says, such as making it easier to have visits that include multiple attendees—patient, family members, other providers or an interpreter if needed.

“Telemedicine has opened up access for patients, who can stay in a home environment to get the healthcare they need, whether it’s acute, chronic or preventive, and that will continue,” Dr. Anderson says. “We’re moving toward a good balance of in-person and remote appointments so patients can receive care more efficiently and effectively.”

For resources and information about COVID-19, visit www.rwjbh.org/covid19.



CHILDHOOD CANCER: FINDING THE BEST CARE

WORLD-CLASS PEDIATRIC
HEMATOLOGY/ONCOLOGY
SERVICES ARE CLOSE TO
HOME FOR NEW JERSEYANS.

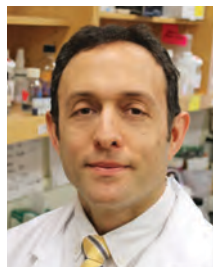


JODI CRANDELL PHOTOGRAPHY



RWJBarnabas Health and Rutgers Cancer Institute of New Jersey, the state's only NCI-Designated Comprehensive Cancer Center, provide close-to-home access to the latest treatment options. For more information, call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

“Cancer doesn’t travel well—especially cancer in children,” says Peter Cole, MD, Chief of the Division of Pediatric Hematology/



PETER COLE, MD

Oncology at Rutgers Cancer Institute, the state’s only National Cancer Institute-Designated Comprehensive Cancer Center. “New Jersey families dealing with a

diagnosis as significant as cancer shouldn’t have to leave their neighborhood and support systems to travel to another state for treatment.”

The Pediatric Cancer Center at Rutgers Cancer Institute partners with RWJBarnabas Health (RWJBH) facilities throughout the state to provide the most advanced treatments for children with cancer and blood disorders.

“I tell my friends and family and anyone who asks that whenever you get an unexpected diagnosis, it’s always good to get a second opinion,” Dr. Cole says.

◀ The \$10 million in state funding was championed by Grace Eline, a 12-year-old survivor of brain cancer and a childhood cancer awareness advocate, and her mother, Aubrey Eline, in collaboration with the American Childhood Cancer Organization. Grace was treated at Rutgers Cancer Institute and Children's Hospital of New Jersey at Newark Beth Israel Medical Center.

"But when you have the option to get cutting-edge care close to home, where you have access to your support system, you should do it. At Rutgers Cancer Institute and RWJBarnabas Health, your child will get the highest level of expertise and treatment, right here in New Jersey."

The pediatric hematology/oncology team takes a multidisciplinary approach to providing the most advanced treatments for pediatric cancer and blood disorders, such as complex surgical techniques, precision medicine, immunotherapy and innovative radiation therapy procedures, including the state's only hospital-based proton therapy center. In addition, as New Jersey's only NCI-Designated Comprehensive Cancer Center, Rutgers Cancer Institute offers access to cutting-edge clinical trials and cellular therapies that may not be available at other programs.

A HOLISTIC APPROACH

The specialists at Rutgers Cancer Institute and RWJBH know that, in addition to treating the body, it's important to pay close attention to the emotional and social challenges of the patient and family. "A diagnosis of cancer turns a family's life upside down, so we have a robust psychosocial support team to address the needs not just of the patient, but of parents and siblings as well," says Dr. Cole. That team includes psychiatrists, psychologists, counselors, social workers, nutritionists and educators.

"We're committed to keeping kids on top of their studies," says Dr. Cole. "At Rutgers Cancer Institute, we have a full-time teacher on staff in the building on school days. I'll often sit with our patients and do math problems with them, though I suspect I may enjoy that much more than they do," he says with a laugh.

He recalls a teenage patient who had acute lymphoblastic leukemia, the most common cancer in children but also one of the most curable. "He had to spend the first month of treatment in the hospital, away from his support network of friends and coaches," says Dr. Cole. "Some of the side effects of his treatment, such as vomiting, were



CENTERS FOR EXCEPTIONAL CARE

RWJBarnabas Health and Rutgers Cancer Institute of New Jersey partner to provide world-class care to New Jersey cancer patients. Specialists from the Pediatric Cancer Center at Rutgers Cancer Institute work with experts to provide care at the following RWJBarnabas Health facilities:

- Bristol-Myers Squibb Children's Hospital at Robert Wood Johnson University Hospital, New Brunswick, under the direction of Peter Cole, MD, Chief, Division of Pediatric Hematology/Oncology
- The Valerie Fund Children's Center for Cancer and Blood Disorders at Children's Hospital of New Jersey at Newark Beth Israel Medical Center, under the direction of Teena Bhatla, MD, Director, Pediatric Hematology/Oncology
- The Valerie Fund Children's Center for Cancer and Blood Disorders at the Unterberg Children's Hospital at Monmouth Medical Center, Long Branch, under the direction of Richard Drachtman, MD, Section Chief, Clinical Pediatric Hematology/Oncology

Children with cancer or blood disorders are also seen for consultations at Cooperman Barnabas Medical Center in Livingston.

miserable, and he was embarrassed to lose his hair. He was depressed, but he received the support he needed from our psychosocial team.

"I'm happy to report that he's doing much better now. He's back in school on a modified schedule and if he needs any continued support from our team as he fully reenters his routine, we'll be there for him."



AN INFUSION OF FUNDS FOR RESEARCH

Survival rates for children with cancer have improved significantly in the past 50 years, but pediatric cancer remains the leading cause of death from disease among children. It is among the least funded areas of cancer research.

Advocates cheered when a \$10 million appropriation to support pediatric cancer research at Rutgers Cancer Institute was included in the New Jersey 2022 state budget.

"The funding allows us to expand our ongoing efforts. One of our areas of focus is research in children that will help reduce acute side effects of treatment and the risk of it resulting in long-term organ damage," explains Peter Cole, MD, Chief of the Division of Pediatric Hematology/Oncology and Embrace Kids Foundation Endowed Chair at Rutgers Cancer Institute, who is also Director, Pediatric Hematology, Oncology and Cellular Therapies at Bristol-Myers Squibb Children's Hospital and Professor of Pediatrics at Rutgers Robert Wood Johnson Medical School. Dr. Cole's laboratory is also supported by the Hugs for Brady Foundation.

"Another area of focus is bringing innovative treatment modalities to children with cancer and blood disorders," Dr. Cole says, "including cellular therapies like CAR T-cell therapy, blood and marrow transplants and immunotherapies, which use the patient's own immune cells to fight cancer."

A man wearing a grey knit beanie, a white puffer jacket with a fur-lined hood, and dark gloves is shoveling snow. He is smiling and looking towards the camera. The background shows a snowy residential street with houses and trees.

HEADING OFF WINTER HEART ATTACKS

READ THIS BEFORE YOU SHOVEL SNOW.

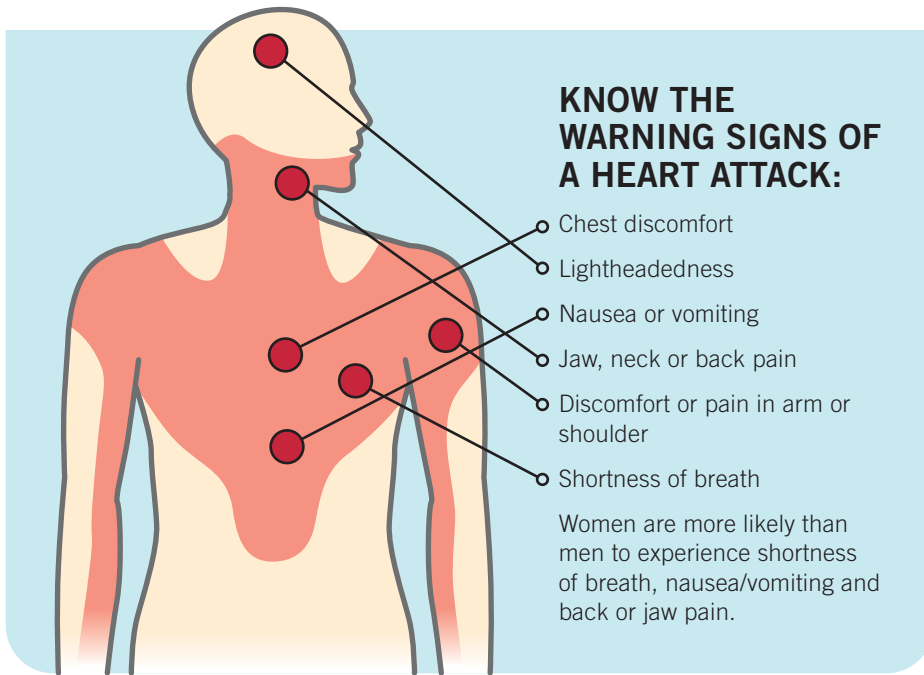
Winter is prime time for heart attacks, as research studies show and doctors know all too well. “It’s expected in the hospital community that we’ll see a bump in the number of heart attacks coming in during the winter season, especially around the holidays and during the first couple of months of the year,” says Isaac Tawfik, MD, Chief of Cardiology at Monmouth Medical Center and a member of RWJBarnabas Health Medical Group.

“It’s been theorized that if your core temperature is lower because you’re outside and not really bundled up, the body’s natural response is for arteries to vasoconstrict, or to narrow,” Dr. Tawfik explains. “If somebody already has a narrowing or blockage in the artery, it’s going to interfere with normal blood flow, and that’s the definition of a heart attack.”



ISAAC TAWFIK, MD

Ruptured plaque is another main culprit for heart attacks in cold weather, he says. “Any exertional work that’s heavy and not gradual, like



KNOW THE WARNING SIGNS OF A HEART ATTACK:

- Chest discomfort
- Lightheadedness
- Nausea or vomiting
- Jaw, neck or back pain
- Discomfort or pain in arm or shoulder
- Shortness of breath

Women are more likely than men to experience shortness of breath, nausea/vomiting and back or jaw pain.

shoveling snow, puts stress on coronary arteries. If those arteries have plaque, it may crack or rupture, which can lead to a whole cascade of platelet aggregation and other inflammatory mediators that eventually lead to a heart attack.”

In winter, middle-aged patients—people in their 40s, 50s, 60s—may be more prone to heart attacks than seniors. “They feel that they’re healthy enough for shoveling snow and other types of outdoor exertion, so they don’t warm up first and may not wear warm enough clothing,” Dr. Tawfik says.

Unlike older patients, they may be unaware of their limitations, he notes, and may not understand the possible consequences of existing conditions, such as hypertension, uncontrolled diabetes or tobacco use. The risk of a heart attack increases with every additional risk factor a person has.

“All of this is not to say that shoveling snow is automatically going to give you a heart attack,” says Dr. Tawfik. “What we are saying is that if you have known heart disease, or one or more risk factors for heart disease, you should think carefully before going out to shovel snow.”

SAFEGUARD YOUR HEART

How can people protect themselves against heart attacks in cold weather? “Number one, make sure you speak to your doctor so that any risk factors you have are addressed—if you have hypertension, that your blood pressure is well controlled, if you are diabetic, that your blood sugar is under control, if you are a smoker, that you are working on a cessation plan,” says Dr. Tawfik.

Stay warm when you’re outside and take frequent breaks to go inside and assess how you feel. “If you’re breathing in cold air, it cools your chest a little bit. You don’t necessarily have the burning in the chest that can be a symptom until you go inside,” he says. “Do the work in short intervals so you’re not outside for hours at a time.”

Be aware of anything different in the way you feel. “A heart attack symptom doesn’t have to be chest pain, because not everybody gets that. If you’re nauseous, or if you’re more fatigued or breathless than you expected to be, those can be red flags,” he says.

Dr. Tawfik shows his patients images that illustrate their cardiovascular condition—an X-ray, an ultrasound, a



HOW COLD WEATHER AFFECTS THE HEART

- Low temperatures cause blood vessels and arteries to narrow.
- Blood flow is restricted and the delivery of oxygen to the heart is reduced.
- The heart must pump harder to circulate blood through the constricted blood vessels.
- As a result, blood pressure and heart rate increase.
- A sudden spike in blood pressure, especially when combined with exertion such as shoveling, can lead to heart attack or stroke.
- Narrowing of or stress on coronary arteries may lead to plaque rupture and blood clots that block blood flow to the heart.
- Hypothermia—when body temperature drops below 95 degrees Fahrenheit—affects the workings of the heart, nervous system and other organs.

CT scan—as a means of helping them grasp their risks. “If I have a patient who’s 60 years old and I can tell him his risk for heart disease in the next 10 years is X versus someone who didn’t have those risk factors, they tend to be more compliant,” he says.

Dr. Tawfik advises his patients to consult their primary care physician or cardiologist before undertaking any high-effort physical activity in cold weather. “It’s like driving your car and putting a seat belt on,” he says. “It’s always best to err on the side of safety.”

Whoever your heart beats for, our hearts beat for you. To connect with a top cardiovascular specialist at RWJBarnabas Health, call **888.724.7123** or visit www.rwjbh.org/heart.





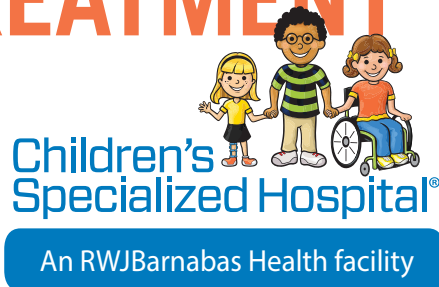
SPECIAL NEEDS, SPECIAL TREATMENT

NEW LOCATIONS PROVIDE MORE WAYS TO HELP CHILDREN FULFILL THEIR POTENTIAL.

For more than a century, children or adolescents who face special health challenges—from chronic illnesses to complex physical disabilities to developmental or behavioral issues—have been able to turn to Children’s Specialized Hospital (CSH) for inpatient and outpatient care.

Since its 1892 origin as a “summer haven” in Westfield for city children, CSH continued to grow until it became the largest provider of pediatric rehabilitation services in the United States, with locations throughout New Jersey.

Now, in response to an increasing number of outpatient visits and the rising rates of emotional, developmental and behavioral disorders in children and adolescents, CSH is expanding access to the highest level of care. Four new CSH locations, each with state-of-the-art facilities and located close to major highways and bus



routes, have opened or soon will open:
WEST ORANGE: CSH is now managing the Pediatric Rehabilitation Services of its affiliate hospital, Cooperman Barnabas Medical Center, at 375 Mt. Pleasant Avenue.

UNION: All outpatient services offered at CSH’s Mountainside and Warren locations have transitioned to this new, advanced facility at 2840 Morris Avenue.

EATONTOWN: In the spring, Monmouth Medical Center and CSH will open RWJBarnabas Health Family Care & Wellness, located at the Monmouth Mall.

TOMS RIVER: Next year, a brand-new, 80,000-square-foot facility on Route 37 will replace the current CSH Toms River locations. The clinical space will be shared with RWJBarnabas Health Children’s Services and Community Medical Center, which will provide an ambulatory surgery

Children with a wide range of needs receive individualized care at CSH locations throughout New Jersey.

center, imaging, preadmission testing, primary care and orthopedics.

All CSH facilities offer the most advanced technology and a full suite of therapy and physician services, including developmental and behavioral pediatrics, neurology, special needs primary care, physiatry, psychiatry, audiology, neuropsychology, neurorehabilitation, nutrition, occupational therapy, physical therapy, psychology, and speech and language therapy.

“Our vision is a world where all children can reach their full potential,” says Matthew B. McDonald III, MD, President and CEO, CSH. “In order to make that vision a reality, we must continually enhance access to our innovative and individualized therapies and medical treatments. These new sites not only serve as additional access points for our current patients and families, but as an introduction to new communities of patients and families who may need our services.”

For more information about Children’s Specialized Hospital, call **888.244.5373** or visit www.rwjbh.org/childrensspecialized.

At Children’s Specialized Hospital, we provide world-class care for children and young adults who face special health challenges across the state of New Jersey and beyond. We treat everything from chronic illnesses and complex physical disabilities, like brain and spinal cord injuries, to a full scope of developmental, behavioral and mental health concerns. We have convenient locations throughout the state: Bayonne, Clifton, East Brunswick, Eatontown, Egg Harbor Township, Hamilton, Jersey City, New Brunswick, Newark, Somerset, Toms River, Union and West Orange.



THE COLD HEART FACTS

PROTECTING OVERALL HEALTH IN WINTER CAN GUARD YOUR HEART AS WELL.

Most of us have heard that people can have cardiac events related to shoveling snow and overexertion (see “Heading Off Winter Heart Attacks” on page 14).

But many people aren’t aware of the other ways cold weather can have a chilling effect on cardiac health. Infection and illness, for instance, can stress the heart in addition to causing symptoms such as fever or fatigue. And any health problem that makes exercise or everyday activities more challenging can lead to cardiovascular as well as general declines.



JAMES L. PASQUARIELLO, MD

“Falling on ice is an example,” says cardiologist James L. Pasquariello, MD, Chair of the

Cardiology Department at Community Medical Center (CMC). “It’s directly more of an orthopedic concern than a cardiac one. But if you slip on a treacherous patch and fracture a bone, hurt your back or sustain an injury that requires hospitalization, it can indirectly put the heart at greater risk as well because of the resulting lack of physical activity.”

In fact, any health burden can become a heart burden. Even if you don’t have a known cardiovascular condition, follow steps like these to protect your whole body during cold-weather months.



Treat dry skin: Cracks in skin can give germs portals into the body, especially among older people, whose skin tends to be thinner and less resistant to trauma. “Dry skin often becomes itchy, and scratching

can make skin damage worse,” Dr. Pasquariello says. Regularly apply a moisturizer to keep skin supple.



Nip cold weather: Limit exposure to biting cold and wind, which can constrict blood vessels and make the heart work harder. “Exercise by walking indoors where the temperature is controlled,” Dr. Pasquariello says.



Take cautious comfort: Consume cold-weather comfort foods like canned soup in moderation. They often contain high amounts of sodium, which can exacerbate high blood pressure.



Stay hydrated: Having enough fluid in the body helps regulate blood pressure.



Get enough sleep: Slumber helps the body fight or fend off illness.



Update vaccines: Check with your doctor to make sure you’re up to date with both COVID-19 and influenza inoculations. Viruses that cause COVID and flu can make people become severely ill from lung complications and related cardiac problems, and inflammation from COVID-19 is thought to damage the heart. Also ask your doctor about vaccination against pneumonia, especially if you’re 65 or older.



Keep hands clean: Regular hand washing is one of the most important ways to keep illnesses from spreading. Use soap and water for at least 20 seconds each time you wash to control both viruses and bacteria.




Continue masking: Doctors noticed that flu infections dropped during the pandemic, and mask wearing to fend off COVID-19 is thought to reduce transmission of other respiratory illnesses. “Masks can be especially important in large, public gatherings,” Dr. Pasquariello says.

Whoever your heart beats for, our hearts beat for you. To connect with a top cardiovascular specialist at Community Medical Center, call **888.724.7123** or visit **www.rwjbh.org/heart**.



Patrick Gazzara and his son, Danny, shared a frightening moment when Patrick collapsed with a seizure, but surgery cured the underlying problem.



SOLVING A SEIZURE MYSTERY

SURGERY CURES A TUMOR THAT PRESSED A MAN'S BRAIN.

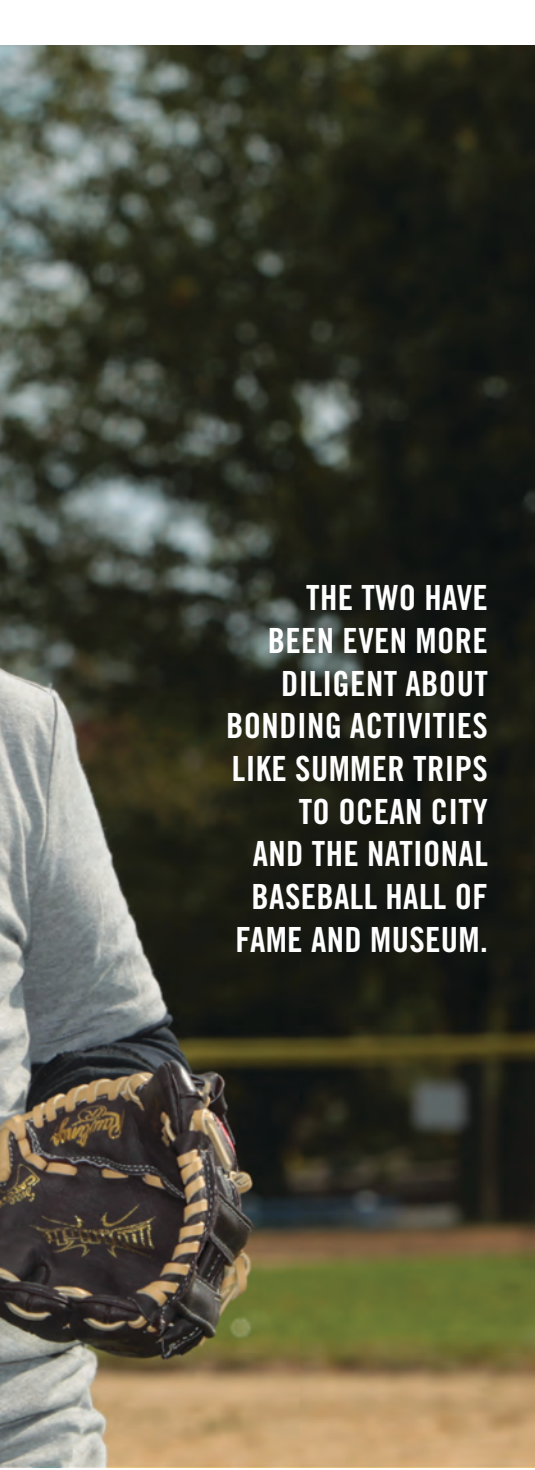
Patrick Gazzara of Manchester didn't understand what was happening to him. The then-41-year-old contract administrator and single father had just hopped into the shower on a Sunday morning in January 2020. "When the hot water hit and I bent a certain way, I felt these

pulsating sensations," he says. "My right side was just going ba-boom, ba-boom, ba-boom, as if somebody was beating my rib cage like a bass drum." He had never felt anything like it. Two or three minutes after starting, the sensations disappeared.

He might have dismissed the episode if the same thing hadn't happened four or five more times during spring and summer as the COVID-19 pandemic swept the country. "Each episode

increased in intensity," Patrick says. "They seemed triggered by stress or a change in temperature such as jumping into a friend's cold pool on a hot day."

Patrick's primary care doctor ordered X-rays that found nothing. A neurologist ruled out epilepsy but made no diagnosis. Seemingly at an impasse heading into fall, Patrick noticed that he'd sometimes have bouts of confusion, struggle to find words, repeat himself in conversations and



THE TWO HAVE BEEN EVEN MORE DILIGENT ABOUT BONDING ACTIVITIES LIKE SUMMER TRIPS TO OCEAN CITY AND THE NATIONAL BASEBALL HALL OF FAME AND MUSEUM.

become unusually snappish.

By October, stress was ramping up. Patrick was working at home, his 9-year-old son Danny's virtual-learning school year was in full swing and they were involved as much as possible with activities like



STEPHEN A. JOHNSON, MD

Cub Scouts and baseball. Then came what Patrick calls “the big one.”

A SOLVABLE PROBLEM

The pulsations hit on a Tuesday after school—“10 times worse than before,” Patrick says. Sensations traveled his entire right side from his core down to his toes and up to his brain. He then lost feeling in his right leg and rib cage, and collapsed to his bedroom floor. “I thought I was having an aneurysm or stroke,” Patrick says. Unable to speak, he let out a garbled scream for help before losing consciousness for about 15 minutes. “My son texted his mother to say I was dying,” Patrick says.

When Patrick's father drove him to the emergency room at Community Medical Center (CMC) after Danny's mother picked up their son, the problem finally became clear. Patrick was having focal motor seizures—uncontrolled, sustained bursts of electrical activity due to irritation of the brain's motor cortex.

Underlying the seizures: Patrick had a meningioma—a benign tumor in the membrane surrounding his brain. Patrick's tumor had reached 7 cm and was growing larger, putting pressure on his brain and causing both neurologic deficits and seizure-triggering irritation.

Benign meningiomas can be managed one of three ways, says Stephen A. Johnson, MD, Director of the Cranial Nerve Disorders Program at CMC and Robert Wood Johnson University Hospital in New Brunswick, and Assistant Professor of Neurosurgery at Rutgers Robert Wood Johnson Medical School. “You can observe it and take no action; you can administer a special form of radiation that inactivates the tumor; or you can do surgery,” Dr. Johnson says. “We have a comprehensive, multidisciplinary program that offers all three options, so we can offer unbiased opinions.”

Daunted by the prospect of brain surgery, Patrick sought advice

from multiple doctors. “Dr. Johnson strongly recommended surgery and said I had an excellent chance of a complete recovery,” Patrick says. “I felt I was in great hands with him. After consultation with my family, I decided to proceed with surgery.”

HIGH-IMPACT PROCEDURE

In a four-hour procedure, Dr. Johnson and his team separated the tumor from Patrick's brain and critical blood vessels. It's a delicate operation performed under high-powered magnification, but one that's rewarding for patients and surgeons alike.

“Without surgery, meningioma patients can do very poorly and have devastating problems,” Dr. Johnson says. “With surgery, we can cure people and have them do fantastically well. It's one of the most satisfying procedures I do.”

Patrick's seizures resolved. They had left residual muscle and nerve damage on his right side, but regular physical therapy has helped restore strength and balance. “I was in the hospital only two nights and am very pleased with the entire process,” Patrick says. “I am extremely grateful it was handled the right way.” He's on the road to a full recovery and has a goal of running 5Ks to raise funds for brain tumor research.

His terrifying “big one” has made him feel even closer with his son. “Life is tricky,” Patrick says. “You have to take advantage of the time you have.” The two have been even more diligent about bonding activities like summer trips to Ocean City and the National Baseball Hall of Fame and Museum.

“The whole experience taught me to pay attention to health a little more than previously,” Patrick says. “The pandemic has taken a lot out of a lot of people, and it's easy to neglect yourself. Listen to your body. If you're having problems, take care of them and don't put them off. I'm not sure where I'd be if I hadn't had an excellent surgical team helping me out.”

To learn more about neurologic treatments at Community Medical Center, visit www.rwjbh.org/neuro.



An urgent robotic surgery resolved Susan Bombardier's intestinal blockage and reduced the risks of a recurrence.

ROBOTIC RELIEF

MINIMALLY INVASIVE SURGERY REPAIRS A WOMAN'S DANGEROUS HERNIA.

Susan Bombardier had just arrived home from a celebratory dinner for her husband's birthday in February 2021 when waves of pain and vomiting brought her to her knees. The pain was so searing that the savory Italian meal she'd just enjoyed didn't seem to be the culprit. But what was?

She and her husband, Richard, sought help at the Emergency Department at Community Medical Center (CMC). While Richard waited in a separate area due to pandemic safety precautions, doctors quickly performed imaging exams and other tests to determine why the 58-year-old Bayville resident's pain was so intense.

As Susan lay in place for a CAT scan, she became aware of something strange: a huge lump underneath her navel. A former emergency medical technician, Susan thought this abnormality offered a clue to her diagnosis. Unknown to her, a sizable hernia—a gap in her abdominal wall—was dangerously squeezing a loop of intestine that had become trapped in the opening, blocking normal digestion.

"I was doubled over—and I'm someone who can get a filling in my teeth with no anesthesia because I have a high tolerance for pain," says Susan. "But by the time I saw this giant, softball-sized lump, I just thought, 'Get it out of there!' I was in agony."

PRECISE TREATMENT

Within minutes, Susan was whisked into the hospital's operating suite. Speed was important: Any delay in treatment increased the risk of Susan's strangled intestine losing all blood flow and requiring removal. She had mere moments to speak with CMC general surgeon Sergey Grachev, MD, before the surgery. He told her he planned to operate in a way that would solve the problem the least invasive way possible: robotically.

The robotic procedure would use advanced, precise equipment and require only a few tiny incisions, leading to less bleeding and pain, and a quicker recovery. Susan had undergone a traditional "open" surgery on her leg after a bad motorcycle accident in 2008 and wasn't eager to have a similar experience. She was thrilled her trapped bowel and hernia could be repaired using a minimally invasive approach. Dr. Grachev suggested she might even go home the next day.

During the two-hour procedure, Dr. Grachev successfully untangled Susan's intestine and returned it to its normal position. He then repaired the hole in her abdominal muscle with a piece of surgical mesh.

"In her case, we knew that robotic surgery would enhance our ability to repair the hernia," Dr. Grachev says. "Recurrence of a hernia after robotic repair is less likely than after open surgery, which usually has a more prolonged recovery."



SERGEY GRACHEV, MD

BACK TO NORMAL

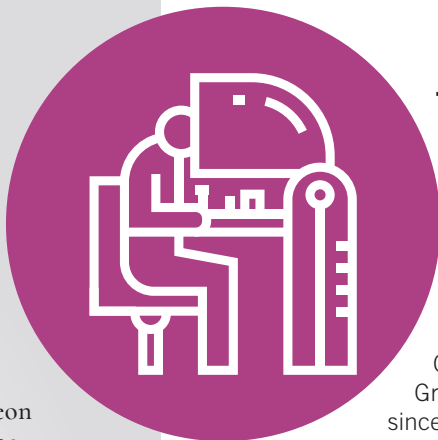
Dr. Grachev says using the robotic approach likely

saved Susan's delicate abdominal tissues from the cutting and manipulation often necessary in traditional open surgery. It also allowed the surgical mesh to be placed in an area not directly exposed to the bowel, reducing the risk of complications such as fluid collection or infection.

As Dr. Grachev had predicted, Susan was able to leave the hospital the day after surgery. Recovery made Susan even more grateful she'd had a minimally invasive robotic procedure. Even with no complications, the center-belly location of Susan's four small incisions,

one of which drained excess fluids, felt tender for a period of time but likely would have been painful longer with a traditional operation.

It was a happy day three months after surgery when Susan was able to get back on her Suzuki motorcycle and take a long ride. She's hiking again, hasn't required post-recovery monitoring and feels fortunate she sought care at a hospital with minimally invasive robotic surgery capabilities that could resolve her gastrointestinal problem quickly. "I'm feeling back to normal now," she says.



THE MANY USES OF ROBOTIC SURGERY

Robotic surgery isn't done by a robot but by a surgeon who controls the equipment's movement. The robot offers greater visualization and flexibility than is possible with traditional surgery. Community Medical Center (CMC) has achieved accreditation as a Center of Excellence in Robotic Surgery by Surgical Review Corporation, which also has accredited surgeon Sergey Grachev, MD, as a Surgeon of Excellence in Robotic Surgery since 2018. Dr. Grachev uses proven and innovative surgical techniques and develops a treatment plan specific to each patient.

CMC offers robotic surgery as an option for gallbladder surgery, general surgery and colon removal, as well as a variety of conditions.

- **OB/GYN:** Robotic hysterectomy (uterus removal), myomectomy (fibroid removal) and endometriosis surgeries reduce blood loss in women who may already suffer from fatigue and other problems due to excessive menstrual bleeding. The technique also shortens hospital stays and helps patients get back to work quicker.
- **Urology:** Robotic surgery can be particularly beneficial in procedures such as radical prostatectomy (removal of the prostate gland) and total or partial nephrectomy (kidney removal) that involve sensitive areas of the body. Robotic prostate removal can enhance nerve-sparing techniques that help men retain sexual and urinary function after surgery.
- **Colorectal:** Diseased sections of the large intestine or rectum can sometimes be removed robotically, minimizing the interruption of normal digestion and enabling patients to return to a regular diet more quickly after surgery.
- **Thoracic:** In the chest area, robotic surgery has many potential uses, including removing diseased lung or esophagus tissue or tackling certain heart conditions. With smaller incisions, patients can return home more quickly and comfortably.

To learn more about robotic surgery at Community Medical Center, visit www.rwjbh.org/community-medical-center/treatment-care/robotic-surgery.





15 YEARS OF

FOOD DRIVES

CMC EMPLOYEES SUPPORT A LONG-RUNNING DONATION EFFORT TO EASE HUNGER.

For 60 years, Community Medical Center (CMC) has cared for Ocean County residents' health. This summer marked another milestone: the hospital's 15th year of holding a staff food drive to ease hunger in the community. Employees from every department dropped off donations at CMC's cafeteria, and contributions were weighed on a giant scale. By the end of the day, tens of thousands of pounds of food had been collected.

"I didn't expect we'd sustain the event this long," says Thomas Yanisko, CMC's Administrative Director of Hospitality Services, who has overseen the drive since it began in 2006. Despite obstacles like hurricanes, superstorms and the pandemic, the food donation effort has continued uninterrupted since its first year. "It's a testament to the employees," Yanisko says. Their desire to help the needy has



culminated in more than 282,000 pounds of donated food in 15 years.

Yanisko and his team bill the drive as both noble cause and bragging-rights contest among CMC's departments. The week before the food drive begins, department leaders initiate challenges to see who can donate the most food, putting their pride on the line. "We do a little trash-talking, with one department challenging another department to outdo it in food collections," Yanisko says. "It's a lot of fun but also a way of inspiring people to donate more food."

ABLE TO GIVE BACK

"We're one of the larger employers in Ocean County, so I think we have a responsibility to give back," Yanisko says. "We're all thankful we're able to do amazing things for others."

Departments organize their own collections, with staff making individual donations or a bulk purchase for the department at grocery stores in the area. Boosting local businesses provides a secondary benefit to the community, Yanisko adds.

On the day of food weigh-ins, each department takes its donation to the main cafeteria lunchroom at an assigned time for its decisive moment on the scale, often with theatrical flair and decorated carts. "Some departments come in singing songs from movies," Yanisko says. "This year, one team came in dressed up as Snow White and the Seven Dwarfs. Employees come during their breaks to watch what's going on."

At an annual employee picnic later in the summer, departments received campy trophies

Employees from the full spectrum of CMC departments compete to outdo each other in donations for an annual food drive that marked its 15th year in 2021. The hospital donated more than 16,000 pounds of food and facilitated the donation of another 14,000 pounds from CMC business associates.

like the foil-wrapped Silver Spatula Award for achievements such as the largest year-over-year increase in donations or the grandest and wackiest cafeteria entrance.

LARGE IMPACT

"This year, we collected over 16,000 pounds of food from employees," Yanisko says. Appeals to hospital business associates yielded 14,000 pounds more.

Every year, CMC's physicians donate \$5,000 to the food drive. This donation is traditionally used to purchase supplies for a local vocational-technical school that cooks Thanksgiving meals for local people in need. Last year, COVID-19 impacted the school's ability to hold its program. CMC staff stepped in to prepare and package 1,000 holiday meals for the families who rely on the program.

One of the worthy causes receiving this year's groceries was The People's Pantry, a Toms River organization dedicated to distributing food to many of the one in 10 county residents who experience food insecurity. Another was Community Cupboard, an in-house CMC food pantry where staffers who may need food assistance themselves can take what they need on an anonymous basis.

Yanisko marvels at how the CMC community steps up to help people in the area ranging from total strangers to colleagues they see daily but whose struggles they may never know. "CMC employees don't do this because they have to," he says. "They do it because they want to."

To learn more about giving at Community Medical Center, visit www.rwjbh.org/community-medical-center/giving.

Doctors. Nurses. Educators.

Community Medical Center is now a teaching hospital.



As we look back on 60 years of caring for the people of Ocean County, we're also looking forward to training the next generation of doctors through a relationship with Rutgers Robert Wood Johnson Medical School. Our residents will gain hands-on experience. Our leadership will have access to the latest in research. And our patients will continue to receive the high-quality, compassionate care we're known for. We're proud to invest in the future of medicine and the future of Ocean County.

Learn more at rwjbh.org/community

Community Medical Center

**RWJBarnabas
HEALTH**

RUTGERS HEALTH

Let's be healthy together.