

A Publication of
ROBERT WOOD JOHNSON
UNIVERSITY HOSPITAL
NEW BRUNSWICK

FALL 2018

healthy

together

A NEW STATE OF HEALTH FOR YOU & YOUR FAMILY

LIVING LIFE TO THE FULLEST
WITH A NEW HEART

STROKE: KNOW
THE SIGNS

BARIATRIC SURGERY
'I HAVE MY LIFE BACK'

A MESSAGE FROM LEADERSHIP

A New State of HEALTH

At its heart, healthcare is about people: about you and your family, your doctors and other members of your care team. Supporting that care are researchers—people with minds curious and rigorous enough to help determine which treatments work best and to discover new ones.

At RWJBarnabas Health, we stand for all these people—every single member of each community we serve. With our new partner Rutgers University, one of the nation's leading public educators, we're creating a new state of health in New Jersey. Together, we're building a network of the best minds to deliver unparalleled patient care, to train the next generation of exceptional medical professionals, and to grow our shared commitment to groundbreaking research. Our goal is simple: for you and your loved ones to have access to the highest quality care in the nation.

For example, Robert Wood Johnson University Hospital New Brunswick, an RWJBarnabas Health facility, is rated the No. 3 hospital in New Jersey according to *U.S. News & World Report*, and as high-performing in six adult specialties and six procedures including cancer, cardiology and heart surgery, geriatrics, nephrology, orthopedics, urology, aortic valve surgery, chronic obstructive pulmonary disease, colon cancer surgery, heart bypass surgery, heart failure and lung cancer surgery. In addition, RWJUH New Brunswick's Comprehensive Stroke Center earned the American Heart Association/American Stroke Association's Get With The Guidelines Stroke Gold Plus Quality Achievement Award and its Stroke Elite Plus Honor Roll Award—two of the highest honors that a center can receive.

Where you get your healthcare matters. With this magazine, we'll share what we stand for and how our values are positively impacting the health of individuals and entire communities. We hope you enjoy reading more about what we're doing—and its importance to your health—in the pages of this new quarterly publication, *Healthy Together*.

Yours in good health,



BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

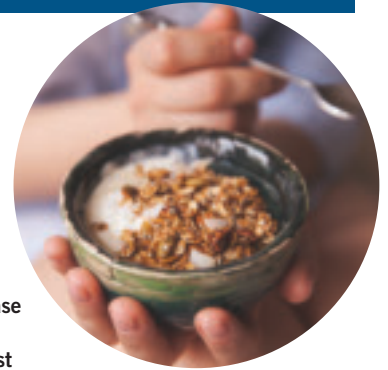


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NEW BRUNSWICK



HEALTH NEWS

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The percentage increase in stroke risk for folks who don't eat breakfast versus those who do. Experts think it may be because eating helps prevent spikes in blood pressure. So how do you like your eggs? —STROKE



MEDITATE FOR BETTER SLEEP

You know meditation reduces stress and improves concentration, but did you know that it helps you sleep better? A study found that mindfulness meditation improved sleep quality among its participants.

—JAMA INTERNAL MEDICINE

SAY thank you :)

Study participants who took part in a five-minute practice of reflecting on what they're thankful for were shown to have spikes in immunoglobulin A, an antibody responsible for fighting off viruses.

—JOURNAL OF ADVANCEMENT IN MEDICINE

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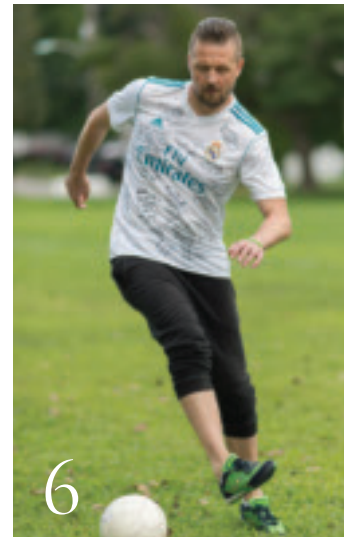
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'I HAVE MY LIFE BACK'

AT 530 POUNDS, NICK MOUKAZIS' WEIGHT WAS TAKING A TOLL ON HIS HEALTH AND HIS PERSONAL LIFE. BARIATRIC SURGERY HAS GIVEN HIM BACK HIS ZEST FOR LIVING.

To learn more about the bariatric surgery program at RWJUH New Brunswick, visit rwjbh.org/rwjuhbariatric.



Nick Moukakis, now 350 pounds lighter than he once was, enjoying time with his youngest daughter, Katarina.

When Nick Moukakis got in a car accident at age 35, the former cook and truck driver could no longer work. Lingering back pain made it hard for him to get around, and he slipped into a cycle of weight gain.

Despite the back pain, it was the extra weight he gained that truly took its toll. “Eating became a form of comfort, and I eventually weighed 530 pounds,” he says. “It was terrible. I had to walk with a cane, it was hard to even stand up, and it destroyed my marriage.”

The moment that really hit home for the father of two daughters was being unable to join his youngest, Katarina, for her father-daughter dance. “For years she had to go to parties by herself, and I was like a distant ghost,” he says. “It took my 12-year-old child saying, ‘I need you in my life,’ for me to finally make a change.”

Nick started researching bariatric surgery to help him lose weight, but all the doctors said his body mass index (BMI) of 75 was too high to be a candidate for

surgery—until he met Ragui Sadek, MD, Director of the Center for Metabolic and Bariatric Surgery at Robert Wood Johnson University Hospital New Brunswick.



RAGUI SADEK, MD

LIFESAVING SURGERY

“We have a high-risk program for patients who can’t get help any other way,” Dr. Sadek says. “These are lifesaving surgeries that help patients live longer, healthier lives.”

One of the biggest challenges during surgery for people who are super morbidly obese—defined as having a BMI of 50 or higher—is the potential for life-threatening complications under lengthy anesthesia.

“It requires a lot of skill, and a lot of surgeons avoid working with these patients,” Dr. Sadek says. “With our approach, patients spend much less time under anesthesia. We can perform procedures in one hour that would take most bariatric surgeons around the country at least two hours.”

Dr. Sadek feels a strong commitment to helping the highest-risk patients because they can see pronounced health benefits from these procedures. “The longer a person stays morbidly obese, the more problems that will develop, yet a majority of the patients who need these operations don’t get them,” he explains. “Obesity is a serious health issue that’s affecting the entire Western world. We have to look at obesity as a medical problem with a surgical cure.”

READY TO COMMIT

Prior to the surgery, Dr. Sadek asked Nick to lose 40 pounds. Nick was so motivated that he lost 130 pounds. He entered the operating room weighing just under 400

COMMON TYPES OF BARIATRIC SURGERY

- **GASTRIC BYPASS:** A portion of the stomach is converted into a small pouch and connected to the small intestine.
- **LAPAROSCOPIC SLEEVE GASTRECTOMY:** Similar to gastric bypass, but the pouch is a bit larger, and the procedure is done using a minimally invasive, laparoscopic approach.
- **GASTRIC BALLOONS:** Non-surgical and temporary, gastric balloons are inflatable devices placed inside the stomach to help patients feel full.
- **ENDOSCOPIC SLEEVE GASTROPLASTY:** A non-surgical, endoscopic procedure that reduces the size of the stomach using sutures.

pounds. “I wanted to show him I was serious about doing this,” Nick says.

The procedure he had was a laparoscopic sleeve gastrectomy, during which Dr. Sadek’s team removed part of his stomach to help him continue losing weight, using a minimally invasive, laparoscopic approach.

“I did have some pain right after the procedure, and I slept for the first two days,” Nick says. “But once I recovered and was able to walk, I felt much better. My back still bothers me, but it’s not nearly as bad as when I was carrying all that weight.”

Today, at 46 years old, Nick weighs just 180 pounds. He follows a strict routine that includes frequent walks and a healthy diet. “I had to give up a lot of things that I used to love, like beer and soda, but I try to keep my mind free and clear so I don’t fall back into old habits.”

For Nick, the next step is finding a surgeon who can remove the excess skin left from his larger self, which has been a struggle because his medical insurance won’t cover it. In the meantime, he spends a lot of time with his daughters. “Katarina and I go to the park all the time,” Nick says. “Dr. Sadek and everyone who took care of me were so wonderful. I’ll always be grateful to them for giving me my life back.”



A NEW HEART

To learn more about heart transplant at RWJBarnabas Health, visit rwjbh.org/hearttransplant.

WHEN HEART FAILURE STRUCK AN ACTIVE HUSBAND AND FATHER, A TRANSPLANT SAVED HIS LIFE AND LET HIM GET BACK TO LIVING IT TO THE FULLEST.

Michal Duchnowski had just come home from a family vacation spent hiking and swimming in Mexico when the normally active, energetic husband and father started to feel exhausted. “When I go somewhere, I always want to get out and do things, stay active,” Michal says. “After we got home, I could barely even walk up the stairs. They think it may have been a virus that affected my heart.”

Michal, only 36 at the time, tried a host of medications, but the damage to his heart grew until it became clear he would need a heart transplant. “My husband is a strong, healthy business owner and father who always puts his family first,” says Michal’s wife, Dominika. “It turned all our lives upside down to see him become so sick that only a transplant could save his life.”

Michal’s cardiologist referred him to the Advanced Heart Failure (AHF) and Heart Transplant Program at Robert Wood Johnson University Hospital and Rutgers Robert Wood Johnson Medical School. Under the leadership of the AHF cardiologists Deepa Iyer, MD, Kanika Mody, MD, and Surgical Director Aziz Ghaly, MD, the multidisciplinary team of nurse coordinators, social workers and dietitians seamlessly manages the assessment, care and treatment of patients.

“For patients suffering heart failure, they’ll usually start with medications, then an electrophysiologist may try to resynchronize the heart with a pacemaker,” Dr. Ghaly says. “But once they reach the advanced stages of heart failure, they’ll need a heart transplant. Fortunately, we can use a ventricular assist device (VAD) to help them survive until we find a donor.”

Michal underwent surgery to have the VAD implanted last year. The device is a mechanical pump that’s placed inside



HEART TRANSPLANT BY THE NUMBERS

3,244

HEART TRANSPLANTS IN THE U.S. (2017)

3,947

PEOPLE IN THE U.S. CURRENTLY WAITING FOR A HEART TRANSPLANT

To learn more, get involved and register as an organ and tissue donor, visit NJSharingNetwork.org.



Michal Duchnowski and his wife, Dominika (holding the family dog, Bubble), along with daughters Pamela (left) and Victoria (right).

the body and attached to the heart to help circulate the blood. The VAD has wires that come out of the abdomen and connect to external battery packs and a control unit. These devices can be cumbersome to carry around, but they allow patients to live a mostly normal life while waiting for a heart transplant.

WAITING FOR A HEART

“The hardest part was having these cables coming out of my stomach and needing to carry the device around in a backpack,” Michal says. “The original bag it came with didn’t work well for me, so I improvised a backpack that I found online so I could stay active. I could do almost everything I wanted—including

100 push-ups a day. The only thing I couldn’t do was go swimming.”

The VAD is a vital tool for helping patients like Michal bridge the gap between when their heart

failure occurs and when a donor heart becomes available. “There are simply not enough heart donors for the number of patients who need transplants,” says Dr. Ghaly. “This device allows us to help patients live an excellent quality of life until we can find a donor who has a matching blood type and is roughly the same size and weight as the patient.”

Michal finally got the call he had been waiting for in early January 2018. “They said, ‘We have a heart for you,’ so I called my wife to let her know and we went to the hospital that day,” he explains. “Everyone who took care of me did an amazing job.”

“Heart transplant surgery is a lot like any other heart surgery,” Dr. Ghaly says. “We have a very high success rate. Patients generally stay in the hospital for 10 to 15 days, and they have to take medications that lower their immunity for a while to try and prevent rejection of the new heart. But it can lead to a nearly normal life for patients who wouldn’t otherwise survive.”

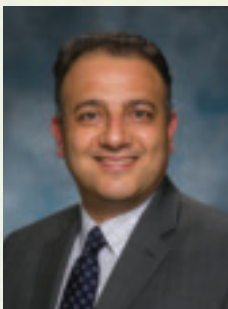
RETURN TO A FULL LIFE

Following the successful transplant surgery, Michal, who was 39 years old at

the time, had to avoid physical activity, including his favorite pastimes like swimming and soccer. “For three months, I couldn’t even pick up five pounds,” he says. “And I had to wear a mask in public to avoid getting sick.”

Dr. Ghaly says that Michal was a great candidate for a heart transplant because he was active, healthy and sought treatment early. “The most important message for us to communicate is the importance of early referrals,” he says. “Healthier patients have shorter hospital stays, faster recovery times and better chances of survival.”

This summer, more than six months after the transplant, Michal finally got to go swimming again. “I went out to the beach, Sandy Hook, and it was amazing to get back in the water,” he says. “I’ll never forget that. I’m so thankful to my wife and daughters for all their help, and to the doctors and nurses who cared for me,” he adds. “And my whole family will be forever grateful to the donor whose heart saved my life.”



AZIZ GHALY, MD

TAMING ACID REFLUX



AMY TYBERG, MD
ASSOCIATE DIRECTOR OF ENDOSCOPY, RWJUH NEW BRUNSWICK
ASSISTANT PROFESSOR OF MEDICINE, RUTGERS ROBERT WOOD
JOHNSON MEDICAL SCHOOL

IN THIS Q&A, DR. AMY TYBERG EXPLAINS WHAT ACID REFLUX IS AND TALKS ABOUT NEW TREATMENT OPTIONS.

A new non-surgical, endoscopic approach to treating acid reflux is available at Robert Wood Johnson University Hospital (RWJUH) New Brunswick. Amy Tyberg, MD, a gastroenterologist, is Associate Director of Endoscopy at RWJUH New Brunswick and Assistant Professor of Medicine at Rutgers Robert Wood Johnson Medical School. Recently, she published a study on endoscopic fundoplication—showing that 100 percent of patients who had the procedure were able to stop taking medication for acid reflux. Here, Dr. Tyberg explains how endoscopy can help patients control reflux.

What is acid reflux?

A. Acid reflux happens when stomach acid moves into the esophagus. The most common symptom is burning chest pain. Over time, reflux can lead to other complications.

Why do people get reflux?

A. Some foods can cause excess acid production, and some people may simply have weakness in the muscle that separates the stomach from the esophagus. Being overweight can also cause pressure that pushes the acid up.

What can people do to stop reflux?

A. The first step is to try diet changes and weight loss. Then we'll use endoscopy to examine the esophagus to see if there are any noticeable causes. After that, we'll move to treatment with proton pump inhibitor (PPI) medications, like Zantac.

Are PPIs a good long-term solution?

A. Many people do use them regularly for many years, and they're very good at controlling acid. However, some recent studies suggest these medications may have long-term effects, like changes to the gut microbiome, and correlations with osteoporosis, dementia, pneumonia and kidney disease.

Are there other options?

A. Traditionally, patients had two choices: medication or a surgical procedure to close the bottom of the esophagus. However, the paper we just published showed a 100-percent response rate in patients who got this new third option, endoscopic fundoplication.

How is endoscopic fundoplication different from surgery?

A. There are no incisions. We use a special device that fits over the endoscope. This device is inserted into the stomach through the mouth, where we twist it around the bottom of the esophagus to tighten it.

What is the procedure like for patients?

A. It's done under general anesthesia, and they generally spend one night in the hospital. They have to follow a strict liquid diet for two weeks and then eat only soft foods for another four weeks. Most people don't have any pain, and many are excited to find a non-surgical solution.

To make an appointment, call 888-MD-RWJUH (888-637-9584).

A NEW STATE OF HEALTH

FOR NEW JERSEY, THE NATION, THE WORLD

WHAT THE UNPRECEDENTED PARTNERSHIP BETWEEN RWJBARNABAS HEALTH AND RUTGERS UNIVERSITY MEANS FOR YOU.

The state's largest integrated health system, RWJBarnabas Health, and Rutgers University, one of the nation's leading public research universities, have formed a groundbreaking partnership that will increase access to care and reduce healthcare disparities, while advancing health science discovery and innovation. RWJBarnabas Health will make a significant investment in recruiting and retaining the nation's finest doctors, researchers and medical students. That means more expert physicians to care for patients and more clinical trials to find better treatment options. Moreover, everyone on this dynamic new team has a mission to deliver excellence in every area of the patient experience. Altogether, the partnership means a transformation of the way healthcare is delivered in New Jersey.

That's the big picture. What's the personal picture for you and your family? You'll be able to get compassionate, world-class care without having to travel far from home. In the following pages, we'll share more good news about what this partnership means for you.



PARTNERSHIP BY THE NUMBERS



To be invested by RWJBarnabas Health in the education and research mission of the integrated academic health system, over 20 years



Committed by RWJBarnabas Health to encourage Rutgers medical students to remain in New Jersey and provide care to its residents



Physicians and providers (2,500) and staff (3,000) under the direction of the new Combined Medical Group



Patient visits conducted by RWJBarnabas Health and Rutgers, combined, in 2017



KNOWLEDGE IS POWER

HOW IN-STATE CLINICAL RESEARCH CONNECTS TO BETTER CARE FOR NEW JERSEY PATIENTS.

If you've read or watched anything about medical care in recent years, it's clear that the field of medicine is always advancing. How do medical treatments improve? Through clinical research or clinical trials. Doctors, nurses and scientists gather information through personal interaction with patients, or through collection of blood, tissue or data, to find new and better ways to detect, diagnose, treat and prevent disease.

When this research takes place in New Jersey, residents have the ability to participate in those clinical trials, and to be among the first patients to benefit from new treatments. Those opportunities will increase dramatically as a result of the RWJBarnabas Health/Rutgers partnership, which will double the Rutgers research portfolio—already the largest in New Jersey—and make it possible to hire about 100 new high-caliber principal investigators (lead researchers).

To learn more about this historic partnership, visit www.RutgersRWJBHtogether.org.

EXPANDING CANCER CARE

The Rutgers Cancer Institute of New Jersey offers a prime example of how the partnership between Rutgers and RWJBarnabas Health will enhance both clinical research and patient care. Under the new partnership, Rutgers Cancer Institute of New Jersey—the state's only National Cancer Institute-designated Comprehensive Cancer Center—is now able to more easily provide patients with greater access to outstanding cancer services and clinical trials close to home.

“For many cancers, standard therapy may not be sufficient to have the greatest success for an individual patient,” says Steven K. Libutti, MD, FACS, Senior Vice President of Oncology Services for RWJBarnabas Health and Director of the Rutgers Cancer Institute of New Jersey. “We're constantly



STEVEN K. LIBUTTI, MD, FACS

looking for the next generation of therapies that will be more effective, and the only way we make those discoveries is through the conduct of clinical research.” Immunotherapy, in which a person's immune system can be used to fight cancer, is just one of many cutting-edge areas of study at Rutgers Cancer Institute.

ACCESS EVERYWHERE

Thanks to the new partnership, more cancer patients will have access to the most advanced care. Rutgers Cancer Institute will leverage telemedicine and video conferencing to bring experts at different sites together with patients. “We're also expanding the number of patient navigators we have in our program,” says Dr. Libutti. “These navigators are essentially partnered with a patient from the moment of diagnosis throughout his or her care. They can make certain the patient goes to the closest facility that has the capability to address that patient's particular cancer problem with exceptional treatment.”

For New Jerseyans who have cancer, home is where the care is. “The significance of this partnership is really our ability to bring cutting-edge therapies, state-of-the-art technologies and world-class physicians directly to patients in their own community,” Dr. Libutti says. “We strongly believe in the notion that cancer does not travel well. No patient in New Jersey has to travel out of state to get the most advanced and exceptional cancer care.”

To learn more about RWJBarnabas Health and Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-designated Comprehensive Cancer Center, visit rwjbh.org/cancer.

For a referral to a Combined Medical Group physician, visit rwjbh.org/medicalgroup or rutgershealth.org.



CARING WITH PURPOSE

A NEW VISION FOR HEALTHCARE UNITES PROVIDERS AND PATIENTS.

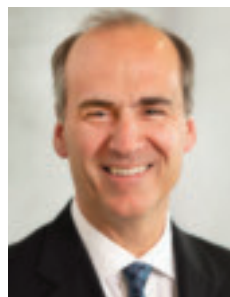
When many hearts and minds work with one purpose, healthcare can be transformed.

That's the guiding idea behind the Combined Medical Group, a joint physician practice that will be a key part of the partnership between RWJBarnabas Health and Rutgers.

"Having a shared purpose, a vision and a set of core values excites our employees and physicians and other healthcare professionals," says Andy Anderson, MD, MBA, Chief Executive Officer of the Combined Medical Group. "They want to be part of something

that's going to help define the future of healthcare."

RWJBarnabas Health and Rutgers are engaged in a partnership, not a merger, so each remains a separate institution. The



ANDY ANDERSON, MD, MBA

practitioners at RWJBarnabas Health and the faculty practice of Rutgers-employed healthcare professionals (including physicians, dentists, psychologists,

nurses, pharmacists and others) will collaborate and innovate as a team. The Combined Medical Group will include approximately 5,500 physicians, providers and staff.

VISION INTO REALITY

In order to integrate their efforts seamlessly, the group needs a common purpose. "We're focused on three areas," explains Dr. Anderson, who comes to the partnership from a similar role at Aurora Health Care in Wisconsin. "Those areas are: making sure we put patients first, valuing each member of the healthcare team and improving the health of the communities we serve."

That three-part purpose has to touch every aspect of the patient's experience, Dr. Anderson believes. "Healthcare is not only about hospitals. It's also about office practices, home-care services, access to medications and more," he says. "We want to better connect all those pieces and parts to make it easier for patients."

The effort will include a review of the electronic medical records system. "In the future state of the health system, a patient will be able to look at their medication list or next appointment, get reminders or get lifestyle recommendations, all through a single portal," Dr. Anderson says.

A FOCUS ON WELLNESS

The vision also includes focusing more attention on helping patients stay well. For example, having staff and providers talk more with patients about lifestyle habits can give them better control over chronic diseases like diabetes.

Though the goals of the Combined Medical Group are ambitious, they are also, in a way, simple. "We want to be the health system where patients want to get care," Dr. Anderson says, "and where people want to work."



GREAT MINDS, BIG HEARTS

THE RWJBARNABAS HEALTH/RUTGERS PARTNERSHIP OPENS THE DOOR TO NEW CENTERS OF EXCELLENCE—INCLUDING A GROUNDBREAKING NEUROSCIENCES ENTERPRISE.

Many critical conditions fall under the scope of a neurosurgical team: stroke, concussion, trauma to or infection in the brain or spine, and more. While Rutgers and RWJBarnabas Health already place among the top tier of neurosurgical care providers, their partnership is allowing the creation of a neurosciences institute of global renown.



ANIL NANDA, MD, MPH

“This is a unique opportunity to build a truly world-class center,” says Anil Nanda, MD, MPH, the newly appointed Senior Vice

President of Neurosurgical Services for RWJBarnabas Health. Dr. Nanda also will serve as Professor and Joint Chair of the Department of Neurosurgery at both Rutgers-Robert Wood Johnson Medical School and Rutgers-New Jersey Medical School. He comes to his role from Louisiana State University Health Sciences Center—Shreveport, where he built an internationally known department of neurosurgery.

FOCUSED ON QUALITY

“Our challenge here in New Jersey is to build on different cultures in the medical schools and in different hospitals and create a unified system,” Dr. Nanda says. Among his top priorities are to look at safety; to identify whether all sites have the cutting-edge technology they need;

and to do a sophisticated data analysis of outcomes. “We’ve hired a biostatistician and an epidemiologist to help us create a neurological dashboard to look at safety and quality issues across the system,” he explains.

While good data and technical expertise are critical, they’re only part of successful neurosurgical care, Dr. Nanda says. “We want to do this in a compassionate setting, to treat patients like we would want our families treated,” he says.

Public health outreach on topics like concussions and stroke will be a priority, as will looking at ways to eliminate disparities in healthcare. “We want to make sure patients get very good care, even if they live in communities that are economically challenged. That’s very important to me personally,” Dr. Nanda says. “And I feel strongly that in the neurosurgical services line, a rising tide brings healthcare up for all people in New Jersey. That’s why this is a magnificent partnership, with a strength in numbers that will allow us to provide excellent care to all.”

To learn more about neurological services, treatment and care at RWJBarnabas Health, visit rwjbh.org/neuro.



A SPORTS SLAM DUNK

RWJBarnabas Health and Rutgers University have partnered to develop an outstanding sports medicine program for Rutgers athletes, students and faculty, as well as for communities throughout New Jersey. The combined effort includes a new state-of-the-art athletic facility, the RWJBarnabas Health Athletic Performance Center, scheduled to be completed in July 2019.



“Omar was very motivated and upbeat in physical therapy,” Dr. Fantasia says.

BACK ON TRACK

A YOUNG ATHLETE TAKES A DEVASTATING FALL AND GETS BACK UP—WITH THE HELP OF CHILDREN’S SPECIALIZED HOSPITAL.

Last April, Omar Shehabeldin, 14, was running for a school bus when he felt a “pop” in his knees and fell—hard. Instead of going to a track meet as he’d planned, he was taken to the Emergency Department at Robert Wood Johnson University Hospital New Brunswick. Both knees appeared to be broken.



MICHELE FANTASIA, MD

In fact, the tendon that

connects the patella (kneecap) to the tibia (shin bone) had basically torn off in both legs. The tendons had to be surgically reattached with a type of hardware that looks like nails.

What had happened to cause such drastic injuries to the athletic Omar, who as a high school freshman was already a standout on the football team?

In fact, his family had long known he had Osgood-Schlatter disease, a not uncommon cause of knee pain in children. Bones, muscles and tendons change rapidly during growth spurts, and physical activity puts extra stress on them. “It started when Omar was younger,” says his mother Aliaa Gouda. “When he got on the floor to pray with his father, he would complain that his knee hurt. The doctor told us that he would outgrow it, as most children do.” Unfortunately, Omar was an exception.

WORKING IT

After surgery, Omar was sent to Children’s Specialized Hospital in New Brunswick for rehabilitation. “We stayed in close touch with the pediatric orthopedic surgeon, Dr. Stephen Adolfsen, who wanted to be sure the knee bones and patella had really fused before Omar began to bear weight on his legs,” says Michele Fantasia, MD, a specialist

in pediatric rehabilitation medicine at Children’s Specialized Hospital. “We worked with Omar on upper body and upper extremity training and core strengthening, all while he was in a special wheelchair that elevated his legs.” In June, Omar was cleared to walk with braces. In therapy, he began to bend his knees, bit by bit.

Omar was fortunate to have the considerable resources of Children’s Specialized, which include recreational therapy activities, water therapy and a therapy dog named Burton. “Our staff has experience in all developmental stages, and we are equipped with multiple therapeutic modalities,” Dr. Fantasia says.

Omar was discharged on June 21 and continues to go to the hospital for outpatient rehab. “Everybody at that hospital works with so much heart. It is a great place,” his mother Aliaa says. “In fact, we’re going to go back and volunteer to help people there.”

To learn more about Children’s Specialized Hospital, call 888-244-5373.

NEW WAYS TO FIGHT SUBSTANCE USE DISORDERS

AN INNOVATIVE PEER RECOVERY PROGRAM HELPS PEOPLE OPEN A WINDOW TO RECOVERY.

For information about placement into treatment for yourself or a loved one, call the State of New Jersey's IME (Interim Managing Entity) at 844-276-2777.

A hospital patient who has a substance use disorder may feel many things: fear, anger, loneliness, shame. What he or she may not feel is ready to accept help.

"That's where the magic of our Peer Recovery Program comes in," says Connie Greene, MA, CAS, CSW, CPS, Vice President of the RWJBarnabas Health Institute for Prevention and Recovery (IFPR). Peer Recovery Specialists—highly trained individuals who are in long-term recovery from their own substance use disorder—are available 24/7 at participating RWJBarnabas Health Hospitals through the Peer Recovery Program (PRP).

"Recovery Specialists are the best people to assess where this patient is at and how to engage him or her, because they've been in that bed," Greene explains. "That's a great relief for a person who may be isolated and may have exhausted relationships and resources."

For more information about the Institute for Prevention and Recovery, visit rwjbh.org/preventionandrecovery.

The goal of a Peer Recovery Specialist—one that often takes some time to achieve—is to get the person to agree to go to the next appropriate level of care, and to help him or her navigate the steps needed to maintain recovery.

NEW TACTICS FOR AN EPIDEMIC

In 2016 and 2017 alone, approximately 2,200 New Jerseyans died of overdoses. As part of the effort to reverse the tide, the IFPR staff has, with the help of state funding, gone from about 30 employees to about 160 over the past two and a half years.

The Peer Recovery Program is one of the innovative tactics the IFPR is using in its fight. In the past, patients who were brought to an emergency room with an overdose were given NARCAN to reverse the overdose, then sent on their way. Since 2016, participating RWJBarnabas Health hospitals have integrated Peer Recovery Specialists into ER teams, where they follow up with the patient and provide continuing support.



CONNIE GREENE, VP, IFPR

Now the Peer Recovery Program is functioning on medical floors as well. "Federal statistics tell us that between 9 and 10 percent of the population has a substance use disorder," Greene says. "So if you follow the data, up to 10 percent of the patients in our hospitals are affected."

Formerly, when a patient who was in the hospital for a different reason presented signs of a substance use disorder, physicians were often at a loss about how to proceed. Now Peer Recovery Specialists can be called in to come to the bedside, offer an intervention and guide the patient to the care that's needed.

"It's a very, very difficult job, but there is also the joy of holding someone's hand as they move into recovery," Greene says. Of the 5,500 people the Peer Recovery Program has interacted with, 85 percent have accepted recovery support services.

The blessings ripple out to family members as well. "Every morning when I see the whites of my son's eyes and hear him say 'Hi, Mom,' I want to cry, and then call you to thank you," one mother wrote to the Recovery Specialist who worked with her son. "May peace be with you on our journey as well—one day at a time."



KEEP YOUR KIDNEYS HEALTHY

TAME HYPERTENSION BEFORE KIDNEY DAMAGE OCCURS.

The heart beats steadily, creating pressure that moves blood through the body to nourish tissues and organs.

But when that pressure is too high—a result of obesity, genetics or other factors—the walls of blood vessels are damaged. They get weaker, narrower or harder.

Over time, the force of high blood pressure, or hypertension, can impair the arteries' ability to deliver sufficient blood to the

kidneys. In turn, kidneys can't fully perform their critical function of removing waste products and excess fluid from the body.

"There is a clear relationship between hypertension and renal failure that many



M. ISABEL ROBERTI, MD, PHD



RICHARD MANN, MD, MS

THE NATION'S #1 LIVING DONOR KIDNEY TRANSPLANT PROGRAM

Humans need only one kidney, so a person with two healthy kidneys can donate one of them to a desperately ill patient. Many people do just that, thanks to the world-class Living Donor Kidney Transplant program at Saint Barnabas Medical Center, which is ranked number one in the country. To learn more about kidney transplants or the Living Donor Institute at SBMC, visit www.rwjbh.org/sbmcckidneytransplant.



At right: The care team from the Renal and Pancreas Transplant Division at Saint Barnabas Medical Center.

To learn more about kidney transplant services at RWJBarnabas Health, visit www.rwjbh.org/kidneytransplant.

people may not be aware of," says Richard Mann, MD, MS, Medical Director of the Renal and Pancreas Transplant Program at RWJUH New Brunswick and Rutgers Robert Wood Johnson Medical School. "In many cases, hypertension plays a role in the progression of injury to the kidney and, in some cases, hypertension is the primary cause of renal injury."

A COMMON PROBLEM

More than half of the U.S. population over age 20 has high blood pressure, and an estimated 3.5 percent of children and teens have it as well. "For a long time, pediatric hypertension was an under-recognized problem," says M. Isabel Roberti, MD, PhD, Director of the Children's Kidney Center at Saint Barnabas Medical Center. "Now the recommendation is for blood pressure screenings to begin as early as age 3."

A "silent" disease, hypertension can go undetected without regular screening. "The earlier we catch hypertension, the better," says Dr. Roberti. "Damage due to high blood pressure in children and teens is reversible, and action now can prevent their having kidney problems as adults." The good news is that, in both children and adults, hypertension is treatable with a multi-pronged approach including medication, diet changes and exercise.

A New **State of Health** for **NEW JERSEY**, for the **NATION**, for the **WORLD**

RWJBarnabas Health and Rutgers University launch the state's largest academic health system

With the partnership of RWJBarnabas Health and Rutgers University, it is the dawn of an incredible new era in health.

Jointly, RWJBarnabas Health and Rutgers University will operate a world-class academic health system dedicated to high-quality patient care, life changing research and clinical training of tomorrow's health care workforce. By partnering, these two higher education and health care industry leaders will improve access to care and reduce health disparities in New Jersey and across the nation.

At the center of all of this are the patients who will benefit from increased access to a world-class academic health system, clinical innovation, groundbreaking research and newly developed centers of excellence, as well as more providers that families need to manage their health and wellness.





Embrace Kids Foundation supports families whose children are receiving care for cancer.

RWJBarnabas Health and RWJUH New Brunswick, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-designated Comprehensive Cancer Center—bring a world-class team of researchers and specialists to fight alongside you, providing close-to-home access to the latest treatments and clinical trials.

CANCER: HELPING KIDS & FAMILIES COPE

A GENEROUS DONATION HELPS SUPPORT PEDIATRIC CANCER PATIENTS.

Vicki Beirne experienced every parent’s worst fear when a routine trip to the doctor to treat what she thought was her nine-year-old daughter Madelyn’s (Maddie) bronchitis suddenly turned into a serious crisis.

Maddie was diagnosed with single T-cell lymphoblastic leukemia at just nine years old. Anxiety gripped Vicki and her family. No one knew what to expect, and everyone had questions.

The Beirnes, who brought Maddie to The Bristol-Myers Squibb Children’s Hospital (BMSCH) at Robert Wood Johnson University Hospital (RWJUH) New Brunswick for care, were thankful to find that support was available. It came from Embrace Kids Foundation and The David E. Zullo Pediatric Advanced Comprehensive Care Team (PACCT).

“Embrace Kids came in the first day we were there when I didn’t understand the full impact of what was going on,” Vicki recalls. “They’re persistent and anticipate your needs every step of the way.”

For the past 26 years, Embrace Kids Foundation has supported families whose children are receiving treatment for cancer and blood disorders. Embrace Kids recently

pledged \$300,000 over three years to support the PACCT Program at BMSCH. Since 1991, Embrace Kids has provided major gifts totaling \$4 million to entities now part of Rutgers Biomedical Health Sciences and \$3 million in major gifts to RWJUH. Of this total, \$2 million has supported the PACCT Program. The most recent gift will allow for the hiring of critical medical staff needed to help more patient families.

The internationally recognized PACCT Program was established to meet the unique needs of high-risk pediatric oncology patients like Maddie. It provides seamless continuity of care through the child’s hospital stay to the child’s return home following discharge.

“The kids and families deserve the best comprehensive medical treatment, whether they’re at home or in the hospital,” explains Glenn Jenkins, Embrace Kids Foundation Executive Director. “It’s important to Embrace Kids to sustain the David E.

Zullo PACCT Program as it serves the best interests of the patient families.”


CONTINUITY IS KEY

Miguel Rodriguez, an Embrace Kids board member whose son, Michael, was a patient in the PACCT Program, says continuity is important to a parent. “We knew he was safe at the hospital; we didn’t want to leave the amazing nurses. We were assured by Embrace Kids Foundation that the same nurses who were treating him in the hospital would be the same nurses coming to our house. It was the peace of mind we needed.”

Maddie endured more than two years of hospital stays and treatment as she fought her disease. Vicki remains grateful that Embrace Kids and PACCT stayed close by Maddie’s side and helped give her medical and social support she needed to overcome her cancer.

Looking back on her family’s journey, Vicki credits Embrace Kids and PACCT with helping her family maintain a sense of normalcy as Maddie battled her disease. “There are not enough words to describe what I consider to be our team,” Vicki says. “Their value is immeasurable. They help the patients heal in more ways than one.”

To support PACCT and other programs at The Bristol-Myers Squibb Children’s Hospital and RWJUH New Brunswick, visit rwjuhiving.org or call 732-937-8750.



Hadley Skule and her mother, Samantha, share a happy moment after Hadley was successfully treated for devastating injuries from a fall during a horseback-riding lesson.

A TRAUMATIC FALL

A MONTCLAIR TEEN ANTICIPATES GETTING BACK IN THE SADDLE AFTER SEVERAL SURGERIES TO REPAIR A SERIOUS LIVER INJURY.

Hadley Skule had been struggling with Lyme disease that left her feeling exhausted and unable to be active most days. In October 2017, the 14-year-old from Montclair had finally been officially diagnosed with Lyme and started a treatment plan of antibiotics that had her feeling well enough to get back to her favorite pastime—horseback riding.

“She went to her riding lesson, and it was the first time the whole family was there to watch her,” remembers her mother, Samantha Skule. “Then in the last five minutes, we heard everyone

gasp, and saw her on the ground unconscious.”

Her mother didn't see the fall, but suspected the horse may have bucked, knocking Hadley to the ground. Her father raced to her side as bystanders called for an ambulance. Hadley was dazed, repeatedly asking what time it was and complaining that her shoulder hurt.

A SERIOUS INJURY DISCOVERED

She went to the nearest hospital where the doctors did scans of her head and shoulder without finding an injury. “When they finally did a CT scan of her abdomen, the doctor’s face went white as a sheet,” Samantha says. “He said she had a grade 4 liver laceration, and they couldn’t treat her there.” The shoulder pain she was feeling was actually a symptom of severe internal bleeding.

Hadley was loaded into a helicopter and flown to The Bristol-Myers Squibb Children’s Hospital (BMSCH) at Robert Wood Johnson University Hospital, a pediatric trauma center. “An important lesson I learned from this is how important it is for parents to know the location of their nearest pediatric trauma center,” Samantha says. “Once we arrived at RWJUH, it felt like she was in good hands.”

ALL THE RIGHT RESOURCES

“When Hadley arrived, we recognized that she would need the highest level of care available,” says Joelle Pierre, MD, Medical Director of Pediatric Trauma, BMSCH and Rutgers Robert Wood Johnson Medical School. “We were able to offer her all of our resources, from interventional radiology and gastroenterology, to the intensive care unit and the blood bank. The nuance of solid organ injuries is knowing when to operate versus when to aggressively observe the patient. This involves careful monitoring with quick response to changes in status.”

Yi-Horng Lee, MD, Chief of Pediatric Surgery, BMSCH and Rutgers Robert Wood Johnson Medical School, and Shaheen Timmapuri, MD, Assistant Professor of Surgery, BMSCH and Rutgers Robert Wood Johnson Medical School, worked alongside Dr. Pierre on Hadley’s case. “They told us she was one of the most challenging liver patients they had treated,” Samantha says. “And that her injury was very serious.”

Together, Hadley’s care team determined that they had to stop the bleeding in her liver before they could safely operate to repair the injury. “Our interventional radiologist was able to embolize the bleeder,” says Dr. Lee. “You just can’t effectively treat trauma patients without specialized services like this one for injured children. We are fortunate to have that.”

Once Hadley was stabilized, repairing the damage to her liver required a series of procedures including placing a drain to allow the bile to come out into a bulb instead of staying inside the abdomen to be infected. Because of this, she had a lengthy hospital stay. After a month, her liver was still leaking bile, but Dr. Pierre decided it was better to wait and see if she healed rather than do more



JOELLE PIERRE, MD



WHAT IS A PEDIATRIC TRAUMA CENTER?

A pediatric trauma center is verified by the American College of Surgeons, and this designation means that the hospital has the proper personnel, infrastructure and equipment to deal with severely injured children. The pediatric specialists available include surgeons, orthopedists, neurosurgeons, anesthesiologists, intensivists and radiologists. They all collaborate to care for injured children, from the initial response to final rehabilitation. The operating room, interventional radiology suites and blood bank are ready at a moment’s notice to deal with life-threatening situations. The Bristol-Myers Squibb Children’s Hospital at Robert Wood Johnson University Hospital was the first hospital in New Jersey to achieve this verification.

procedures. “I was so grateful they decided to send us home with a liver drain so Hadley could be home for Christmas,” Samantha says. “And their wait-and-see strategy worked, as she slowly improved.”

BACK TO THE LIFE SHE LOVES

Today, Hadley’s liver is on the mend and she’s getting back to normal, even looking forward to horseback riding again someday. Samantha says she and Hadley are planning to revisit her care team at The Bristol-Myers Squibb Children’s Hospital for the one-year anniversary of the accident. Hadley’s father, who works for NASDAQ, hopes to have the doctors out to ring the market bell.

“The silver lining of this whole episode was the positive experience we had at The Bristol-Myers Squibb Children’s Hospital,” Samantha says. “They do this kind of work every day at the highest level, with incredible care and compassion. I’ll be forever grateful for everything they did for our family.”

To learn more about The Bristol-Myers Squibb Children’s Hospital at RWJUH New Brunswick, visit rwjbh.org/bmsch.

NEW HELP FOR LIVER HEALTH

FROM FATTY LIVER DISEASE
TO HEPATITIS C AND CANCER,
RWJUH NEW BRUNSWICK
OFFERS A COORDINATED
APPROACH TO LIVER CARE.



Most people don't think much about liver health. They may know that alcohol abuse can lead to liver damage, but there are a number of other issues that cause the same type of damage, leading to a loss of liver function or even liver failure.

"No matter what path leads to a patient's liver disease—whether it's alcohol, obesity or a virus like hepatitis C—the clinical manifestations are the same type of scarring and damage," says Vinod Rustgi, MD, a renowned hepatologist who leads Robert Wood Johnson University Hospital New Brunswick's new Center for Liver Diseases and

Liver Masses. Dr. Rustgi also serves as Director of Hepatology and Professor of Medicine at Rutgers Robert Wood Johnson Medical School.

The National Institutes of Health estimates that up to 40 percent of American adults have a condition called nonalcoholic fatty liver disease (NAFLD). Most of these cases are simple fatty liver disease, which doesn't cause symptoms and can be reversed through lifestyle changes. However, up to 12 percent of adults have NASH (nonalcoholic steatohepatitis), a type of NAFLD that does cause inflammation and liver damage.

A GROWING NEED

"The rise in obesity around the country contributes to NAFLD," Dr. Rustgi says. "We're also seeing an epidemic of hepatitis C, which affects up to 200,000 people in New Jersey alone."

Prior to the creation of this new liver center, there was no place in New Jersey that provided a coordinated approach to liver health. "We're basically a one-stop

shop for liver health, offering everything short of transplants," Dr. Rustgi says.

Among the many services offered at the liver center is a new diagnostic tool called FibroScan. This non-invasive device allows doctors to measure levels of fat and scarring in a patient's liver in just a few minutes, without the need for a biopsy or other painful interventions.

Dr. Rustgi says the best way for people to maintain good liver health, or potentially reverse a condition like simple

fatty liver disease, is by living a healthy lifestyle. "Exercise is important for so many reasons," he explains. "And be mindful of your diet—avoid eating preservatives or high-fat fried foods."



VINOD RUSTGI, MD

For an appointment at RWJUH New Brunswick's Center for Liver Diseases and Liver Masses, call 833-795-5487.

SUPPORTING THE LGBTQ COMMUNITY

RWJUH HAS SEVERAL UNIQUE PROGRAMS DESIGNED TO HELP ENSURE THAT EVERYONE FEELS COMFORTABLE SEEKING HEALTHCARE.



Robert Wood Johnson University Hospital (RWJUH) is committed to providing compassionate care to all members of the communities it serves, including those who may struggle to find culturally appropriate care because of their sexual orientation or gender identity. And that commitment has led RWJUH to create a suite of forward-looking programs for LGBTQ community members and employees.

“We’re trying to address the disparities in healthcare that LGBTQ people face,” says Jackie Baras, LGBTQ Navigator for RWJUH. As a transgender woman herself, Baras has been instrumental in guiding RWJUH’s efforts around LGBTQ equality.

HEALTHCARE EQUALITY

An important first step in this direction happened with the creation of PROUD Family Health at RWJUH Somerset, the first clinical practice in New Jersey offering LGBTQ-focused healthcare services in an LGBTQ-friendly environment. Patients can visit Mondays from 6 to 9 p.m. to receive primary care and referrals from healthcare professionals who understand the specific needs of the LGBTQ community.

That ethos also extends to those who work for RWJUH, with the creation of the PROUD Business Resource Group. “Business Resource Groups are employee-led groups around different cultural affinities,” says Vanessa Nazario, Director of Diversity and Inclusion at RWJUH.

“PROUD BRG is a group of RWJUH employees comprised of members from both the LGBTQ community and its allies.”

WORK-PLACE EQUALITY

Baras serves as first chair of PROUD BRG, and she says the group has helped shape human resources policies and employee benefits that ensure equality regardless of sexual orientation and gender identity.

Most recently, RWJUH launched the PROUDLY ME! Transgender Edu-Port Program, which held its first session on February 8. “This is a first-of-its-kind program in New Jersey, offering free educational programs, support groups and resources to transgender and non-binary people throughout the community,” Baras says. “We have everything from classes on makeup, voice therapy, hormonal affirmation treatment and gender-affirming surgeries to traditional support groups where we share our struggles and success stories.”

PROUDLY ME! sessions take place on the second Thursday of every month at 6 p.m. at RWJUH New Brunswick Conference Room B in the Administration Building.

For more information, call 908-442-5609 or email Jackie.baras@rwjbh.org.

EMPOWERING TEENS



DOMESTIC VIOLENCE PREVENTION PROGRAM HELPS PROMOTE HEALTHY ADOLESCENT RELATIONSHIPS.

Students in the AMARD&V Domestic Violence Prevention Program supported by Verizon rehearse a skit on healthy relationships.

For 16 years, Robert Wood Johnson University Hospital New Brunswick has been committed to addressing domestic violence in a variety of ways, including educating healthcare providers about the signs of domestic violence and how to offer help. “Recently, we’ve switched gears,” says Elaine Hewins, program coordinator for Domestic Violence Education & Awareness in New Brunswick. “We’re now looking at how we can intervene early in the lives of young people to teach them how to recognize warning signs of unhealthy and abusive relationships, and how to help each other find resources. We’re teaching the difference between healthy, unhealthy and abusive relationships so these young people can be healthy relationship ambassadors in their own communities.”

RWJUH New Brunswick’s new Community Quinceañero/Sweet 16 With a Purpose program will bring together 30 teens from New Brunswick and the surrounding communities for an educational program about healthy relationships. It will end with a group Quinceañero/Sweet 16 party complete with dresses, thanks to a donation from Jack Morris, RWJBarnabas Health Board Chairman and Robert Wood Johnson University Hospital Board of Directors Chair. The Community Quinceañero/Sweet 16 With a Purpose

program is part of an ongoing initiative around domestic violence prevention and healthy relationships promotion called AMARD&V, made possible through a generous grant from HopeLine from Verizon. AMARD&V runs during the school year. It includes interactive life-skills educational workshops and integrates arts and health in a safe, supportive space that allows students to learn and express themselves, and culminates in public performances that share messages about teen-dating violence prevention and promoting healthy relationships.

The seeds for the Community Quinceañero/Sweet 16 With a Purpose program were planted last year, when Morris’ donation of prom dresses led to the Prom Dresses for a Purpose program. Many of the dresses were given out, along with educational materials about healthy relationships, during the latest prom season. The others are slated for the young women who will attend the upcoming Quinceañero/Sweet 16 event. The funding from Verizon will allow RWJUH New Brunswick to provide suits for the boys.

SPREADING AWARENESS

“The thing we have to understand about young people experiencing unhealthy or abusive relationships is that often they only

PLACES STILL AVAILABLE!

RWJUH New Brunswick is seeking students ages 14 to 16 from the greater New Brunswick area to join Community Quinceañero/Sweet 16 With a Purpose. Anyone interested in participating can call Elaine Hewins at 732-532-6202.

tell their peers,” Hewins says. “So our goal is to teach and spread awareness to large groups of teens that it’s not OK if their partner is controlling, talks down to them or is physically abusive.”

Mariam Merced, Director of the Community Health Promotions Program at RWJUH New Brunswick, further explains: “Integrating cultural traditions in the programs that target recent immigrants and communities of color helps us connect with these vulnerable groups in a culturally appropriate way, while also promoting healthy relationships and supporting protective factors that keep families strong.”

For Hewins, the Quinceañero/Sweet 16 theme seems particularly apt for a program about healthy relationships. “The Quinceañero tradition symbolizes the shift from girl to young woman,” she says. “We think it’s perfect timing to talk about healthy relationships.”

DO YOU KNOW THE SIGNS OF STROKE?

HOW QUICKLY STROKE PATIENTS RECEIVE MEDICAL CARE CAN HAVE A BIG IMPACT ON THEIR LONG-TERM HEALTH.

The phrase “time is brain” is a common refrain when talking about stroke because every minute a stroke goes untreated causes brain damage. The speed at which a stroke victim gets appropriate care can mean the difference between a full recovery and a lifetime of disability. “Stroke is the leading cause of disability around the globe,” says Kiwon Lee, MD, Professor of Neurology and Chief of Neurology at Rutgers Robert Wood Johnson Medical School and Medical Director of Robert Wood Johnson University Hospital New Brunswick’s Comprehensive Stroke Center. “If a stroke happens, you have to act fast and get the person to a facility that’s designated either as a primary stroke center or a comprehensive stroke center.”

As a leading comprehensive stroke center in New Jersey, RWJUH New Brunswick has the tools and expertise not only to treat a stroke, but also to treat it as quickly as possible. “There are two main therapies we use for acute ischemic stroke,” Dr. Lee says. “Right away, we give the patient a clot-busting drug that can dissolve smaller clots.



KIWON LEE, MD

For larger clots, we use a catheter-based tool that lets us go into the brain through the blood vessels and pull out the clot.” In a hospital with a comprehensive stroke team, all of these lifesaving steps can be taken within 30 minutes to an hour. “The most important factor is how long it takes for them to get to us,” Dr. Lee says. “Patients and bystanders have to recognize that something is wrong and mobilize emergency transport as quickly as possible.”

A GUIDE TO RECOGNIZING AND RESPONDING TO A STROKE

When a stroke occurs, every minute counts. Follow the BE FAST rules below to recognize and respond quickly if you or someone you know shows signs of a stroke.

BE FAST:



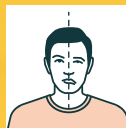
BALANCE:

Do you notice a sudden loss of balance?



EYES:

Did the person quickly lose vision in one or both eyes?



FACE:

Ask them to smile. Does one side of their face droop downward?



ARMS:

Ask them to lift their arms above their head. Does one arm drift downward?



SPEECH:

Have them repeat a short phrase. Do they slur their speech or have trouble repeating the words?



TIME:

If you notice any of these signs, call 911 immediately.

To learn more about the Stroke Center at RWJUH New Brunswick, visit us online at rwjbh.org/rwjhstroke.

Innovative valve replacement surgery. Because you can't be replaced.

As New Jersey's most extensive heart care network, RWJBarnabas Health performs more Transcatheter Aortic Valve Replacements (TAVR) than any health care system in the state—and our outcomes far exceed national benchmarks in safety, life expectancy, and risks of complications, too. Available at Robert Wood Johnson University Hospital, patients usually go home only a few days after the procedure. For more information and to make an appointment with one of New Jersey's top cardiologists, visit rwjbh.org/tavr

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HEALTH**

