EAT LIKE AN MVP!
NJ DEVILS STAR TAYLOR HALL TELLS HOW

WIRELESS PACEMAKERS
UNDERSTAND COMMON LAB TESTS
CONCUSSION: KEEPING KIDS SAFE
We’re Focused on COMMUNITY

Coretta Scott King once said that the greatness of a community is best measured by the compassionate actions of its members. At RWJBarnabas Health, we share King’s belief in the power of compassionate action.

Each of our hospitals is actively engaged in making a difference on critical community issues, including housing, employment, food security and economic empowerment. That includes everything from hiring locally to finding ways to make fresh, affordable produce widely available. System-wide, we’ve added RWJBarnabas Health TeleMed, a telemedicine service that improves access to care for people with transportation or scheduling challenges.

To expand our community reach, we partner with other organizations, like the New Jersey Devils, to bring about positive change. One example: Collaborating with the staff of the Barnabas Health Hockey House at Newark’s Prudential Center, our specialty physicians and nutrition experts have developed a youth hockey program that promotes optimal performance and good health while building confidence, sportsmanship and life skills. It’s now available at ice-hockey rinks throughout the state. The Devils organization and players, including NHL MVP Taylor Hall, also work closely with us to bring encouragement and moments of joy to hospitalized children.

Locally, Community Medical Center’s reach extends throughout Ocean County, collaborating with schools, senior groups and other non-profit organizations to build a healthier community. Our annual food drives have put more than 194,000 pounds of food into the hands of those in need since 2006, and last year, our community education programs touched more than 24,000 lives. Efforts targeting food insecurity, senior isolation and homelessness from within the hospital to our neighborhoods, all supported by an exceptional staff who care for area residents, no matter where they are.

At RWJBarnabas Health, we believe in the greatness of the New Jersey community and are glad to help improve quality of life for everyone who, like us, calls the Garden State home.

Yours in good health,

BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

MICHAEL MIMOSO, MHSA, FACHE
PRESIDENT AND CHIEF EXECUTIVE OFFICER
COMMUNITY MEDICAL CENTER

Health News

PUMPED UP

Put on your dancing shoes and get your heart pumping at Dancing for Heart Health! Join us and local dance groups for a day dedicated to fun, heart health and education. Free health screenings and information provided. Saturday, Feb. 2, from 10 a.m. to 2 p.m., at the Center Court in Ocean County Mall, Toms River.

BE AWARE

March is colorectal cancer awareness month. Learn some important tips on how to prevent colon cancer by watching a video from CMC Registered Dietitian Veronica Gajda, RD, CSO, at rwjbh.org/preventcoloncancer. Colonoscopies save lives. Schedule yours today. If you need a gastroenterologist, call 888.724.7123.

No Reservations

The American Medical Association reports that the more people cook and prepare their meals at home, the less likely they are to become obese or develop type 2 diabetes. The reason? Commercially prepared meals tend to be loaded with many more calories than home-cooked fare. Cooking at home has decreased by 25 percent in the last 40 years. For more info on preventing diabetes, call CMC’s Center for Diabetes Education at 732.349.5757.

Community Medical Center

99 Highway 37 West, Toms River, NJ 08755
732.557.8000

CONNECT WITH US ON

@CommunityMedical
RWJBarnabas Health
2. WELCOME LETTER. A community update from our CEOs.

4. ON THE CUTTING (CYBER) EDGE. CMC provides frontline prostate cancer treatment close to home.

6. GOING THE EXTRA MILE. In CMC’s Emergency Department, on-site pharmacists provide a welcome dose of expertise.

8. PICKING UP SIGNALS. Learn what common lab tests say about your health.

9. THE DOCTOR IS IN ONLINE. With RWJBarnabas Health TeleMed, a doctor is available 24/7.

10. ‘HOW I STAY ON TOP OF MY GAME.’ NJ Devils star Taylor Hall reveals how to eat and stay fit like an MVP.

12. GOOD FOOD FOR EVERY BODY. The Wellness on Wheels team takes healthy cooking and nutrition tips on the road in a very special van.

13. GETTING OLDER, GETTING BETTER. Geriatric psychiatry can help adults thrive as they age.

14. LIVING WELL WITH HEART FAILURE. It’s possible to feel good and stay active, even with a diagnosis of heart failure.

16. WORKING THROUGH THE PAIN. A brave young woman gets her life back with the help of Children’s Specialized Hospital.

17. EXPLORING HEALTHCARE CAREERS. A CMC program allows high school students to examine jobs beyond doctor and nurse.

18. NO STRINGS ATTACHED. A newly available wireless pacemaker gives one patient a new lease on life.

20. CARING FOR KIDS’ CONCUSSIONS. CMC’s innovative program gets student athletes safely back in the game.

22. FORE A GREAT CAUSE. CMC Foundation’s annual golf outing supports community health programs.

23. HEALTHY RESOLUTIONS. It’s never too late to reach for new goals. CMC is here to help you get healthier in 2019.
Thomas Dudek was enjoying retirement. When he wasn’t doing volunteer maintenance work at St. Barnabas Roman Catholic Church in his hometown of Bayville, he would ride his Harley-Davidson on the side roads along Barnegat Bay. “I have seven beautiful grandchildren,” says Thomas, 73. “They like to ride on back with me.”

But retirement can have its challenges. His wife, Barbara, was home in severe pain and needed knee replacement surgery. Then in April, after Thomas underwent a routine physical, his blood test results showed an above-normal prostate-specific antigen (PSA) reading. His primary care doctor referred him to a urologist, whom he saw the following week. The urologist ordered a biopsy of the prostate and discovered that Thomas did, in fact, have prostate cancer.

“I didn’t know what to do,” he recalls. “I sat down with my wife and went over the options.” But those options at first were limited and burdensome. One doctor suggested radiation therapy, which Thomas was told would require 40 treatments over approximately two months. “I needed to explore other options, so I started searching.
DAVID D’AMBROSIO, MD

Citron Regional Cancer Center.

In contrast to lengthy radiation treatments, CyberKnife treatment is delivered in five or fewer sessions within two weeks.

“For me, the choice was simple,” says Thomas, who scheduled his first consultation with Dr. D’Ambrosio on August 6—which, coincidentally, was the day Barbara had her knee replacement surgery at Community Medical Center. As his wife was in the operating room, Thomas confronted his own health and his future. Prostate cancer is the second deadliest cancer among men after lung cancer, but most patients survive if they are treated before the cancer spreads, the American Cancer Society notes.

“When I saw Dr. D’Ambrosio, he put me at ease,” Thomas says. “He told me I was a good candidate for the CyberKnife procedure.”

WHAT IS CYBERKNIFE?
Stereotactic radiation therapy, during which high-energy rays or particles are beamed to the affected area to kill cancer cells and destroy the tumor, is among the treatment options for prostate cancer. CyberKnife, which combines real-time imaging with precision robotic beam placement, allows oncologists to achieve “similar outcomes to what we would achieve with surgery, but without the cutting and anesthesia,” Dr. D’Ambrosio notes. What’s more, because CyberKnife is minimally invasive, patients can resume their normal activity immediately after treatment.

Before treatment with CyberKnife, a high-resolution computed tomography (CT) scan is taken to determine the size, shape and location of the tumor. The image data is then transferred into the CyberKnife system and used by the radiation oncologist to plan treatment. The radiation oncologist then guides a robotic arm to deliver high-dose radiation beams while the patient rests comfortably on a treatment bed.

“One of the key advantages of CyberKnife is its ability to precisely track the tumor in real time, while the patient is laying down,” Dr. D’Ambrosio says. “Patients are breathing during treatment, and CyberKnife can automatically correct for this. This enables us to deliver maximal amounts of radiation therapy to the tumor while limiting radiation to the surrounding normal tissues.”

Thomas noticed no discomfort during his hour-long CyberKnife treatments in early September—five in total. “It was very easy,” he recalls. “You’re in a room and laying still on a table, watching TV. Then you go home and do what you want.”

During the two-week treatment course, Thomas relaxed at home between CyberKnife sessions. About twice a week, a member of his treatment team would call him to make sure he wasn’t having complications. “The staff was so friendly,” Thomas says. “They made me feel at home. And every time I arrived for treatment, they never kept me waiting for treatment.”

Once finished with CyberKnife treatment, Thomas got back on his Harley and back to his grandkids and church work. He awaits a follow-up PSA test, but is hopeful that he is cancer-free. And as for his wife, Barbara? “My knee replacement surgery went well,” Barbara happily reports. “It took away the pain, which is what I wanted. All in all I’m doing OK.”

Thanks to CMC’s CyberKnife program, Thomas Dudek didn’t have to travel far for the treatment he needed.

WHO IS AT RISK?
According to the Centers for Disease Control and Prevention, older men, African-American men and men with a family history of prostate cancer have a greater risk of developing the disease. When you have your regular checkup with your physician, talk to him or her about when you should be screened. Ask if you are at increased risk for prostate cancer and at what age you should start to think about screening. If you need a physician, call 888.724.7123.

**RWJBarnabas Health and CMC, 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 treatment and clinical trials.**
GOING THE EXTRA MILE

IN CMC’S EMERGENCY DEPARTMENT, ON-SITE PHARMACISTS PROVIDE A WELCOME DOSE OF EXPERTISE.
EXTENDING THE EXPERTS’ REACH

CMC is ramping up its pharmacy services beyond the ED, too. The hospital has added dedicated pharmacists in the intensive care and critical care units, and a pharmacist now makes rounds with the hospital’s internal medicine team. CMC also plans to assign a pharmacist to each floor, with an eye toward pharmacy bedside services and increased patient education on use of medications away from the hospital.

When Dr. Vassallo started in the ER, he says, “It’s like rapid-fire critical care,” he says. “It’s extremely fast-paced and really makes you think on your feet.”

A large part of his role is checking prescription orders before they are administered to the patient. For each ED prescription, he considers whether the medication is dosed properly, will cause an allergic reaction, will interact negatively with another medication the patient is taking or could cause intolerable or dangerous side effects. Often the patient’s medication history must be reviewed. “Sometimes it takes a bit of investigative work,” Dr. Vassallo says. “If the patient cannot talk, you have to do some digging with area pharmacies and obtain the medication history. This takes time, but still you have to act fast to get the medication started.”

But his role in the ED stretches far beyond checking and dispensing medications. He also gets involved with hands-on treatment and triage of ED patients. And as the ED’s medication expert, he educates physicians, nurses and patients on medication use and procedures.

To do all this takes a strong working relationship with the ED team, which Dr. Vassallo has earned through his six years as ED pharmacist. “I love working with the entire team. They really make for a fantastic collaborative work environment as a clinical pharmacist.”

ON THE LEADING EDGE

When Dr. Vassallo started in the Community Medical Center ED, emergency department pharmacy was still a burgeoning specialty. According to the American Society of Health-System Pharmacists, in 2005 only 3.5 percent of hospital emergency departments staffed a full-time pharmacist. ED pharmacists have since become more prevalent, as studies have shown how these specialists prevent medication errors and improve patient outcomes.

Today, Dr. Vassallo and his colleague, fellow Emergency Medicine Pharmacist Vishal Patel, PharmD, provide a full range of pharmacy services to the ED seven days a week. Right now, they are gearing up for cold and flu season—and the influx of flu, pneumonia and respiratory failure it brings. “We see a lot of sick people at that time of year,” says Dr. Vassallo who, as an aside, urges everyone to get their flu shots.

But in truth, any time of year can get busy. He says a “heavy” percentage of Community Medical Center ED patients are senior citizens who come in from Ocean County’s 55-and-older retirement communities and assisted living facilities. Many of these patients are taking several medications to manage multiple medical problems. “We’re handed a long list of the patient’s medications,” Dr. Vassallo says. “We must figure out if there are any interactions, allergies, side effects or contraindications that could be causing the patient’s acute illness.” He also sees many younger adult patients, many of them casualties of New Jersey’s opioid epidemic.

In addition to his many hats as ED pharmacist, Dr. Vassallo specializes in handling overdose and toxicology cases along with the New Jersey Poison Control Center. He works with the New Jersey Poison Information and Education System to enforce a protocol for treating poisoning cases. These run the gamut from overdoses of illicit heroin/fentanyl mixtures to accidental medication overdoses and attempted suicides with prescription medications.

“Some patients are more difficult to treat than others,” he notes. “That’s where our expertise comes in.”

For information on services at the Community Medical Center ED, visit rwjbh.org/community.

Community Medical Center  |  RWJBH.ORG/COMMUNITY 7
Lab tests are an invaluable diagnostic tool. Our rundown tells you what doctors are checking, and why.

**COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL**

**MEASURES:** Red blood cells, which carry oxygen; white blood cells, which fight infection; hemoglobin, a protein that transports oxygen; hematocrit, the proportion of red blood cells in the blood; and platelets, which help with blood clotting.

**PURPOSE:** Abnormal white or red blood cell counts could indicate an underlying illness. Also used to monitor overall health, gauge disease progression or determine whether a medication is effective or is causing unwanted side effects.

**PROTHROMBIN TIME TEST**

**MEASURES:** Blood clotting speed, which should fall between 10 and 14 seconds. Faster or slower clotting could signal a problem.

**PURPOSE:** Measures effectiveness of warfarin, a blood-thinning medication given to slow clotting and reduce stroke risk. Also used to measure the blood’s ability to clot before surgery and to diagnose liver problems.

**BASIC METABOLIC PANEL (BMP)**

**MEASURES:** Blood sugar, calcium, electrolytes and kidney function.

**PURPOSE:** Determines how efficiently your body processes energy. Abnormal findings could signal diabetes, liver or kidney disease or breathing problems. Also used to monitor patients with high blood pressure or potassium deficiency.

**COMPREHENSIVE METABOLIC PANEL (CMP)**

**MEASURES:** Same areas and substances as BMP, plus liver function and additional blood proteins.

**PURPOSE:** Compared with BMP, offers more detailed picture of organ function in patients with diagnosed or suspected diabetes or liver or kidney disease.

**URINALYSIS**

**MEASURES:** Color, odor, acidity and overall appearance of urine. Also detects crystals, proteins and substances not normally found in urine, such as blood or sugar.

**PURPOSE:** To check for urinary tract infections, kidney problems or diabetes.

**LIPID PANEL**

**MEASURES:** Overall cholesterol plus three specific types: low-density lipoprotein (LDL) or “bad cholesterol,” high-density lipoprotein (HDL) or “good cholesterol” and triglycerides, a type of fat that’s converted into energy between meals.

**PURPOSE:** To determine whether high total cholesterol (more than 240 mg/dL), LDL (130 mg/dL or higher) or triglycerides (150 mg/dL or greater) is putting you at increased risk of heart disease.

**PROSTATE-SPECIFIC ANTIGEN (PSA)**

**MEASURES:** PSA, a protein produced by tissues in the prostate gland, located below the bladder in men.

**PURPOSE:** Elevated PSA (more than 4.0 ng/mL) could signal prostate cancer.

Doctors use lab results to make decisions about your care, so it’s important to get tests completed quickly at a high-quality lab. “Access to convenient laboratory locations combined with highly specialized and experienced pathologists provides a great benefit to patients,” says Nagy Mikhail, MD, Chair, Department of Pathology at Community Medical Center. “As a faculty member of Rutgers RWJ Medical School Pathology Group, patients have access to a team of over 20 highly specialized pathologists with expertise in a broad array of medical and surgical pathology.”
Health needs have a way of happening at inconvenient times. You’re on a business trip and forgot a prescription. It is after hours and your doctor’s office is closed. Your family is on vacation and you have a sick child. Or you’re simply too sick to get out of bed.

For those situations and more, RWJ Barnabas Health TeleMed now offers telemedicine—medical care available through a smartphone, tablet or computer—for urgent needs, or for people who feel they just don’t have time to visit a doctor.

“At RWJ Barnabas Health, we’ve been doing telemedicine for a long time in specific specialty services,” says Amy Mansue, President, Southern Region, RWJBH. “For example, when very fragile babies are sent home, telemedicine lets doctors and nurses see a baby in real time if parents have a concern.”

The rollout of the broader RWJ Barnabas Health TeleMed program to the general public follows a successful pilot program with one of the on-call, U.S. board-certified physicians. There’s a flat fee of $45, payable by credit card at the time of service. (Many private insurance plans cover telemedicine, and in New Jersey, state-funded health insurance plans are required to, as long as certain standards are met.) RWJ Barnabas Health TeleMed is secure and compliant with HIPAA, a federal law that sets standards for, among other things, the privacy of health information.

The doctor at the other end of the camera can assess symptoms, look at the area in question and make a judgment as to whether follow-up tests are needed. Though telemedicine is not meant to replace a patient’s relationship with his or her primary care doctor, “we do know that there are people who don’t have access to primary care, or don’t go routinely,” Mansue says. “This is a way to connect them with healthcare.”

Older patients may find telemedicine easier to adopt because long-distance healthcare has become common for chronic conditions, such as checking pacemakers or heart monitors over the phone. Younger patients, on the other hand, may actually prefer telemedicine to the in-person kind.

“One study showed that 70 percent of people under age 35 had accessed medical care through telemedicine,” Mansue says. “They do everything through their phones—create relationships, order pizza—so it feels natural to do healthcare that way as well.”

Ultimately, the goal for RWJ Barnabas Health TeleMed is for physicians to be able to access, with patient permission, a patient’s entire medical record in order to help make better diagnoses.

“That’s an aspirational goal right now, because electronic medical record systems don’t communicate between themselves as well as they need to yet,” Mansue says. “But the technology improves every year.”

To enroll or learn more about RWJ Barnabas Health TeleMed, powered by American Well, visit www.rwjbh.org/telemed, or download the app at the App Store or Google Play.
‘HOW I STAY ON TOP OF MY GAME’

NJ DEVILS STAR TAYLOR HALL REVEALS HOW TO EAT AND STAY FIT LIKE AN MVP.
Taylor Hall's healthy eating habits started young. “I can remember being at tournaments with my parents. All the other kids would be having Sharpecs and chocolate bars after the game, but my parents had oranges and granola bars ready for me,” the 26-year-old New Jersey Devils left wing recalled during a post-practice interview at RWJBarnabas Health Hockey House in Newark. “Eating well was instilled in me at an early age and it’s something I take pride in, for sure.”

Those healthy habits—along with hard work and amazing talent—have paid off, for Hall’s career as well as for his team. Last year, he scored a career-high 93 points and led the Devils to the Stanley Cup playoffs for the first time in five years. He also became the first-ever Devils player to win the Hart Trophy as the league’s most valuable player.

What’s his secret for staying at peak fitness? It turns out that Hall’s regimen, while serious, is also simple, with principles that can be followed by athletes at any level.

EATING TO WIN
Ask Hall to name a favorite food, and you won’t hear anything about ice cream or cake. “I tend to avoid sugar,” he says. “I’m lucky that I don’t often have a craving for it. But with the calories we expend, it’s very important for me to digest healthy carbohydrates and lots of protein.”

“I keep my diet pretty simple. Protein, carbohydrates and then as much roughage as I can—a side dish like asparagus or sweet potatoes, and always a salad with dinner. Gluten-free pasta, rice and quinoa—those are really good for people like me who expend a lot of energy.”

Hall sticks to snacks that are low in carbohydrates and high in fat, like nuts, or high in protein, like Greek yogurt. “That kind of snack is not going to give you a big burst of energy before bedtime, so it will allow you to rest properly,” he says.

Less nutritionally worthy foods are limited, but not eliminated. “My cheat foods are cheeseburgers and pizza,” Hall says. “Maybe once a week you have yourself a night where you have those things. Certainly, you’ve got to live your life.”

Getting enough fluid takes on special urgency for professional athletes. “Staying as well-hydrated as possible is huge. You don’t want cramps during the game,” Hall says.

He starts each day with two 500-milliliter bottles of water as soon as he wakes up, to get his metabolism going. “All day, I drink a ton of water, and during games, as many fluids with electrolytes as possible.”

BODY AND MIND
During the 82-game season, players expend energy where it counts—on the ice. After the season, Hall takes up to a month off from any physical activity, to give his body a rest. From then on, he works out and skates three times a day, five days a week.

His advice for other athletes is to focus their workouts on what their weaknesses are. “Some athletes might already have a very strong core, but need to work on their foot speed,” he says. “Overall, don’t worry about what you’re good at. Just try and correct stuff that might be hampering you a little bit.”

To prepare mentally, Hall uses meditation and relaxation techniques. “When I have a calm brain and everything seems easy to me, I seem to play my best,” he says.

A WORD TO YOUNG ATHLETES
Perhaps surprisingly, Hall’s advice to aspiring young hockey stars is not necessarily to work harder, but to take a step back. “Some parents have their kids in hockey year-round,” he says. “You see these kids who are amazing hockey players, but they just don’t seem to have a passion for it. I would say that you have to try out different things and have some free time.

“You have to really love whatever you do,” he says. “The thing that you have the most passion for in life is what you’re going to be successful at.”

To learn more about the RWJBarnabas Health/New Jersey Devils partnership, visit www.rwjbh.org/devils.
When the big green van pulls up, the kids say “Wow!”—and that’s just the reaction RWJBarnabas Health healthcare providers and their partners are looking for.

The 35-foot vehicle, decorated with bright fruits and vegetables, is the hub of the Wellness on Wheels mobile education initiative, which launched in the fall of 2018. Equipped with a hydroponic and earth-box greenhouse and a full kitchen, the van travels to places like preschools, senior homes and houses of worship in areas where affordable, healthy food is hard to come by.

It’s fun to see young kids marvel at what an herb’s root looks like, run their fingers through soil, sort plastic fruits and vegetables or smile as they taste-test healthy recipes. Behind those hands-on activities is an overarching goal: to help communities get healthier.

“At RWJBarnabas Health, we embrace the concept of bringing health and wellness to communities by teaching people in places where they live, work, earn and learn,” says Barbara Mintz, Senior Vice President, Healthy Living and Community Engagement. “We want to make sure that people in underserved communities have a level playing field when it comes to being healthy.”

HELP FOR HUNGER

More than 900,000 New Jersey residents face hunger every day, according to the Community Food Bank of New Jersey. Unemployment, low wages and high housing costs contribute to the problem. So does the prevalence of “food deserts,” areas where residents live more than one mile from a supermarket and, without a car, must depend on public transportation to get there. Too often, those residents resort to unhealthy packaged or fast foods.

Wellness on Wheels aims to change those patterns and, to increase its impact, partners with local community groups. At a recent event at a New Brunswick preschool, hosted in conjunction with the Puerto Rican Action Board, a dietitian fluent in conversational Spanish showed children how to fill a plate with colorful food and
demonstrated a simple, healthy recipe. Says Mintz, “We partner with local food banks and farmers markets to distribute healthy foods at our events.” Simple, culturally appropriate recipes are also provided to further support the mission of helping good health begin at home.

EATING WELL

CORN AND BLACK BEAN SALSA

We can get protein from plants as well as animals. Corn and black bean salsa makes a protein-packed after-school snack, or the perfect side dish with dinner.

- 1½ cups frozen corn, thawed and drained
- 1 cup low-sodium black beans, drained and rinsed
- 1 tomato, diced
- ½ red bell pepper, diced
- ¼ red onion, diced
- ½ jalapeño pepper, minced (optional)
- 2 tablespoons chopped parsley (or 1 tablespoon dried)
- zest and juice of 1 lime
- 1 tablespoon olive oil
- ½ teaspoon salt
- ½ teaspoon pepper

In a large bowl, combine all the ingredients and stir. Set salsa aside to allow flavors to come together. Serve with tortilla chips or on top of your favorite Latin-inspired dishes.

To see a video of the Wellness on Wheels inaugural outing and to learn more, visit www.rwjbh.org/WellnessWheels.

The Wellness on Wheels van is rolling to communities throughout the state.
"Improving with Age" is the title of a presentation that Lina Shihabuddin, MD, Chief Medical Officer, Behavioral Health Network at RWJBarnabas Health (RWJBH), likes to give.

“A lot of things do get better with age,” says Dr. Shihabuddin, who is board-certified in adult and geriatric psychiatry as well as hospice and palliative medicine. “Growing older should not be thought of as a bad thing, but as a transition to a different phase of life.”

That’s a call not just to think positive, but also to think about aging and health in a new way. It’s the approach healthcare practitioners like those in the RWJBH Behavioral Health Network are taking when they proactively screen for depression and anxiety in primary care settings.

“It’s no longer ‘I have a disease, so I need to see a doctor,’” Dr. Shihabuddin explains. “It’s ‘I need to be well.’ Screening and early intervention helps patients of every age stay ahead of the game.”

ISSUES OF AGING

Geriatric psychiatry, also known as geropsychiatry, refers to mental health care of a person 65 years or older. “People seek out geriatric psychiatry for two reasons,” Dr. Shihabuddin says. “One, they may be dealing with very normal life adjustments that come with aging, which may include retirement, loss of a partner or distance from family.

“A second level of the issue is the start of memory problems, erratic behavior, possibly unsafe driving,” Dr. Shihabuddin says. “Is this the beginning of dementia, or a reversible medical problem? That’s where the intersection of primary care, neurology and geriatric psychiatry really comes into play.” Anxiety, depression and other issues can be triggered by a wide range of conditions, such as thyroid dysfunction, vascular problems, obesity or untreated diabetes.

Once the problem is diagnosed, healthcare providers can come up with a treatment plan, which may include anything from treating a disease, to creating a safer environment at home, to finding ways to be sure the patient has activity during the day, to teaching family members how to minimize conflict.

“The last resort, for us, is to offer medications,” such as antidepressants or sleep aids, Dr. Shihabuddin says. “Medications have more side effects for geriatric patients, and take longer to get out of the system. In treating geriatric patients, you have to start at very low dosages and slowly increase the dose if needed.”

TAKING THE FIRST STEP

Dr. Shihabuddin urges older adults (or their loved ones) to speak with their primary care provider as soon as signs of depression or anxiety appear. “The earlier you detect and treat a disorder, the better off you are,” she says.

Getting older gets a bad rap, Dr. Shihabuddin believes. “Yes, as the body ages, the neurons in the brain cells get less flexible, so it may be harder to learn new things,” she says. “On the other hand, the mind is more mature, giving older people the ability to look more analytically at situations and take them in stride. That’s what we call wisdom.

“People think about aging and they tend to think about things falling apart,” Dr. Shihabuddin says. “If we do enough early detection and prevention, it does not have to be like that.”

To learn more about geriatric psychiatry services in the RWJBarnabas Health system, visit www.rwjbh.org/geriatricpsych.
EVALUATING HEART FAILURE

Determining the degree of a patient’s heart failure allows doctors to make the best recommendations for preventing, delaying or treating the condition. Cardiologists put heart failure into one of four classes, starting with symptoms. Here is the New York Heart Association Classification:

• **CLASS I:** Ordinary physical activity does not cause undue fatigue or shortness of breath

• **CLASS II:** Comfortable at rest, excessive physical activity results in fatigue and shortness of breath

• **CLASS III:** Symptoms with non-excessive physical activity

• **CLASS IV:** Symptoms at rest

The cardiologist will then do an objective assessment of the degree of heart failure based on observations as well as tests such as a blood test, X-ray, electrocardiogram, stress test and echocardiogram.

LIVING WELL WITH HEART FAILURE
The term “heart failure” means that this vital organ is damaged in some way. Despite the dire-sounding nature of the term, however, a diagnosis of heart failure is far from a death sentence.

“Care for heart failure patients has improved so dramatically that, although this is a chronic problem, patients who have it can live long and productive lives,” says Gary Rogal, MD, Chief of Cardiology for RWJBarnabas Health and a member of Barnabas Health Medical Group.

The key to this positive outcome is simple—but not necessarily easy. The heart failure patient must take medicine as directed and make the recommended lifestyle changes.

“The patient who listens to the things their doctor recommends they do will do better in the long term,” Dr. Rogal says. “I always tell my patients, ‘50 percent of your outcome is based on what I do, and 50 percent is based on what you do.’”

UNDERSTANDING THE TERMS
About 5.7 million U.S. adults have heart failure, according to the Centers for Disease Control and Prevention.

“‘Heart failure’ is a generic, umbrella term that covers many different disease entities,” Dr. Rogal says. “In the simplest terms, the heart is a pump, and it is failing as a pump.” The failure can fall into two different categories that often exist together: left-sided and right-sided dysfunction. (See sidebar at right.)

“People sometimes get confused when they hear ‘heart failure,’ and ask, ‘Am I going to have a heart attack?’” Dr. Rogal says. “The reality is that they’re two different types of pathologies.”

Heart failure does not lead to a heart attack, he explains. Also, heart failure develops gradually, but a heart attack happens suddenly, when blood flow to an artery leading to the heart is blocked.

In either case, patients will receive similar advice for a heart-healthy lifestyle.

GETTING TO GOOD HABITS
Those recommendations likely come as no surprise: Take medication as directed. Exercise. Eat a healthy, low-salt diet. Stop smoking. Manage stress. Still, many patients don’t follow doctors’ orders. Dr. Rogal says. “People’s lives are so busy, and this tends to be a problem that’s not an immediate issue staring them in the face,” he says. “They think they can pay attention to it tomorrow.”

At the first sign of weakening or abnormality of the heart muscle, “I tell patients they need to start medications to help their heart muscle and begin to exercise,” Dr. Rogal says. “Walking is the easiest way to begin. And over the years, the pharmacology for heart failure has dramatically improved, so that we have a broad spectrum of medicines we can use.”

Dr. Rogal also recommends that patients with heart failure stop drinking. “Alcohol is a direct toxin to the heart muscle,” he says. “It can also lead to other issues, such as excessive sodium intake and dietary indiscretion. In my view, once you’ve started to develop any sign of heart muscle impairment, it’s time to hang up the alcohol.”

The same caution does not hold true for sexual activity. “In most cases, patients can remain sexually active,” Dr. Rogal says. “But be sure to discuss this with your doctor to ensure there are no limitations.”

Heart failure patients will find that the benefits of a heart-healthy lifestyle far outweigh the effort required to create new habits. Says Dr. Rogal, “You can live a very productive and positive life with heart failure—as long as you follow the guidelines shared by your doctor.”

YOUR HEART DOESN’T BEAT JUST FOR YOU. GET IT CHECKED.

The cardiac specialists at RWJBarnabas Health care for approximately 20,000 heart failure patients in New Jersey each year. RWJBH provides cardiac care for patients of every age and every condition, from wellness programs to heart transplants. To schedule a checkup or to learn more about world-class heart care near you, visit www.rwjbh.org/heart.
When Katherine Bentley, MD, Director of the Pain Program at Children's Specialized Hospital, first met Harley Bourgeois, the 20-year-old had been confined to a wheelchair for more than a year.

Harley had traveled with her mother from their North Carolina home to New Brunswick so that the young woman could be evaluated for the hospital's Chronic Pain Management Program. It had been six years since Harley had been diagnosed with complex regional pain syndrome (CRPS), a chronic condition that is thought to be caused by an injury to the nervous system, and that grows more excruciating over time.

"It was a long way to come just to be evaluated, but we had to meet her, and she had to know what she would be getting into if she came back for the program," Dr. Bentley says. "It's a huge commitment. But she was ready for it."

**UNEXPLAINED ACHE**

Harley's problem started when, as a healthy middle-schooler, she had an X-ray for a minor injury that caught a suspicious abnormality on her right femur. An oncologist removed the lump, and all seemed well—but the aching in Harley's right leg never went away.

One day, the horse she was riding bucked, shooting her into the air. She landed on the same aching femur. For many months thereafter, she and her parents traveled from doctor to doctor as the pain escalated. By the time Harley got to Children's Specialized Hospital, the slightest touch—even a breeze—sent pain shooting through her body.

"CRPS is a hard diagnosis because it's a diagnosis of exclusion. You rule out everything else, test by test," Dr. Bentley says. "While we don't know everything about why a youngster might be experiencing this chronic pain, we know that intensive therapies and multidisciplinary treatment plans can help them." Harley worked with a dedicated team of physical therapists, occupational therapists, psychologists, child life specialists and physician/advanced practice nurses.

The Chronic Pain Management Program is not for the faint of heart. "Harley was weaned off her pain meds, and had hours of therapy every day, six days a week," Dr. Bentley says. The goal of therapy is to retrain the brain to decrease sensitivity to pain. Patients can take advantage of aqua therapy in the hospital's pool, as well as cutting-edge technology like the ZeroG, a dynamic support harness that helps people walk without using their full body weight.

The program also emphasizes mental preparation for reentering the normal life that so many have lost. A typical day would include meditation, individual and group psychology sessions, peer mentoring and evening recreation.

Over the course of eight demanding weeks, Harley made progress: mastering the parallel bars, walking up a stair, walking with a walker and the ZeroG harness.

Finally, one day when her mother visited, Harley surprised her by walking to her without assistance, and giving her a big hug.

That was in March 2018. Harley is now a student at North Carolina State University, fulfilling her dream of studying livestock and poultry management. She still makes time to visit her friends and former alumni of the Chronic Pain Management Program.

"The takeaway of this story is, 'never give up hope,'" Dr. Bentley says. "Harley had been in such pain and dysfunction for a long time, but she kept looking for a way to get better. And thanks to her perseverance and commitment, she did."
It’s not easy for high school students to know what they want to do with their lives. To help local youth learn about healthcare career options, Community Medical Center (CMC) created an innovative program: the Healthcare Youth Learning Collaborative, now in its fourth year.

The program hosts students for monthly sessions throughout the school year to explore various healthcare careers. It also offers them valuable volunteer experience for their budding resumes. “There are so many healthcare related careers beyond physician and nurse,” says Dr. Teri Kubiel, Vice President of Patient Experience and Community Affairs at CMC. “Our goal is to provide students that exposure.”

Dr. Marybeth Kretz, an anatomy and physiology teacher at Toms River High School East, coordinates her school’s participation in the program. “It’s been terrific. Our students enjoy it immensely,” she reports. “They’re very engaged and ask a lot of questions. They’re really getting a sense of how a hospital operates and how it takes so many different departments for it to function.”

The positive experience students have had with the program has led to a growing interest in it. “The word-of-mouth about the Healthcare Youth Learning Collaborative has been incredible,” Kretz says. “After just the first session I had so many students approach me and ask if they could join.”

EXPANDING HORIZONS
Each month a different hospital department—ranging from respiratory therapy to food service—is explored. Students tour the department and participate in a discussion with its leaders. “This exposes them to a variety of job and career opportunities in the hospital and the community,” says Kretz. “It’s not just for those who are interested in a strictly ‘medical’ career.”

Additionally, “each student is processed as a junior hospital volunteer, and gets trained and oriented in order to complete volunteer hours throughout the school year,” explains Dr. Kubiel. Currently, CMC offers the program to juniors and seniors from two participating school districts, Toms River Regional School District and Barnegat Township School District.

“I’m so happy that the program is available,” says Kretz. “I know that CMC is doing more things in the community because of its collaboration with RWJBarnabas Health. As both a teacher in the district and a community member myself, it’s nice to know that this resource is available for us, and that they’re willing to be so involved with our students.”

For more information on the program, call 732.557.8000, extension 11256.
NO STRINGS ATTACHED

A NEWLY AVAILABLE WIRELESS PACEMAKER GAVE ONE PATIENT A NEW LEASE ON LIFE.

Your heart doesn’t beat just for you. Get it checked. To learn more about the full range of cardiac services at Community Medical Center or to schedule an appointment with one of New Jersey’s top cardiac specialists, visit www.rwjbh.org/heart.
Florence, 76, has stayed active and healthy her entire life. In her youth she loved fishing, waterskiing and sailing, and she now enjoys gardening and visiting her friends. So imagine her surprise when she found out her heartbeat was slow and out of rhythm. “I was confused,” says Florence, a longtime New Jersey resident now living in Ocean County. But the cardiology team at Community Medical Center (CMC) had the answer: a new “wireless” pacemaker that regulates the heart’s rhythm with better patient comfort and a lower risk of complications than traditionally designed pacemakers.

The CMC cardiology team began implanting wireless pacemakers—a procedure that until recently was available only at hospitals that offered open-heart surgery—in the fall of 2018.

OFF BEAT
In March 2017, Florence’s primary care physician detected an irregular heartbeat with an electrocardiogram (ECG) during a routine physical. Her doctor referred Florence to the Community Medical Center cardiology team. CMC cardiologists Leonard DiPisa, MD, and John Merlino III, DO, confirmed the diagnosis with a second ECG.

Dr. DiPisa prescribed a blood-thinning medication to prevent clotting—a common complication from irregular heartbeat—which can cause a stroke. During a routine follow-up ECG in September 2018, Florence’s heart rate dipped to 50 beats per minute (BPM) and was causing symptoms of fatigue. Slow heartbeat, or bradycardia, prevents the heart from pumping enough oxygen-rich blood to needed organs. Her low heart rate placed Florence at risk for heart failure, high or low blood pressure, chest pains, confusion, fainting and, ultimately, stroke. “I didn’t understand what was happening,” Florence says.

A clinical cardiac electrophysiologist, Dr. Merlino administered a 24-hour continuous ECG in early October to confirm the bradycardia diagnosis, and then discussed with Florence how the wireless pacemaker could help control her heartbeat.

SMALL SIZE, BIG BENEFITS
“Wireless pacemakers offer numerous advantages over traditional single-lead and multiple-lead pacemakers,” says Dr. Merlino.

One is that the inch-long wireless pacemaker is roughly 90 percent smaller than traditional pacemakers. Because of its small size, the wireless pacemaker is inserted through a catheter that is threaded near the groin, through a leg vein and up to the heart’s lower right chamber. The device is then attached to the heart with tines.

By contrast, traditional pacemakers consist of a generator, about the size of a wristwatch, and one, two or three wires (or “leads”) through which electrical pulses are sent to the heart. The wires are run through blood vessels in the chest and implanted in the heart, while the generator is implanted in the upper chest near the shoulder, where it can be seen under the skin.

“After you install a traditional pacemaker, the patient is left with a permanent lump or scar on the chest,” Dr. Merlino says. “With the leaderless pacemaker, there is no bump. The patient will forget he or she even has it.” More importantly, the tiny device controls heart rhythm without wires, or “leads.”

“Wires are the weak link in traditional pacemakers,” Dr. Merlino says. “In rare cases, the leads or wires can malfunction or become damaged over time.”

Wireless pacemakers are safe as well as effective, Dr. Merlino notes. In a 2016 New England Journal of Medicine study, 98 percent of patients who received the wireless pacemaker had stable heartbeats six months after surgery and 96 percent experienced no complications or dislodgement.

Any patient who would benefit from a traditional single-lead pacemaker can be considered for a wireless pacemaker, but the new device cannot be used for patients who need a conventional two-lead (or dual-chamber) pacemaker to synchronize the heart’s ventricles or stimulate blood flow from the heart. “The wireless pacemaker was designed to function like a single-lead pacemaker,” Dr. Merlino explains. “The technology to mimic multiple-lead pacemakers has not yet been developed.”

GAIN WITHOUT PAIN
Florence agreed to receive the wireless pacemaker, and Dr. Merlino performed the implant October 24. The minimally invasive procedure takes 20 to 30 minutes, slightly less time than traditional pacemaker placement, but with reduced postsurgical pain. Wireless pacemaker recipients are kept at the hospital overnight and monitored for complications then released the next morning. “I didn’t feel anything after surgery,” Florence says, “maybe a slight pain in my groin from the small incision, but that was it. It was very easy.”

Today, Florence is back home with her garden, and recently spent time with her brothers in Pennsylvania. She says she feels great.

“I would absolutely recommend this pacemaker to anyone,” she says.
You know that concussions can pose a serious hazard for student athletes. But do you know how common they are? It’s estimated that 20 percent of all high school athletes who play contact sports—not just football, but also sports such as soccer and lacrosse—will suffer a concussion during a given year.

As part of its ongoing commitment to children’s safety, Community Medical Center (CMC) launched an innovative initiative, Return to Play, in 2017. This program—a joint effort between physicians and physical therapists—is designed to help local student athletes return to sports safely following a concussion or injury.

The hospital also offers free cardiac and concussion screenings to local students through its Matthew J. Morahan III Health Assessment Center for Athletes (see sidebar).

Here, Ray Howard, PT, DPT, OCS, regional director of Rehabilitation Services for Community Medical Center, (pictured far right) gives an overview of the Return to Play program and its benefits.

Which students do you treat?
We’re available to students ages 12 to 18.

How do student athletes find their way to you?
Ideally, even before playing, athletes take a computerized test through us or through their school, which measures their cognition levels and reaction times. That way if they get a concussion, we have baseline data for them and know where they started.

If they’re ever suspected of receiving a concussion—the symptoms can include loss of consciousness, headache, nausea, lack of concentration, loss of memory and sensitivity to light and/or sound—they are brought to our emergency department. There, in addition to being treated, they receive a prescription to come back in 48 to 72 hours to begin the Return to Play program.

How does Return to Play work?
First, a post-impact test is conducted on the patient, measuring any cognitive changes versus their baseline. Then, if our physician clears the patient, we begin him or her on a five-day progressive exercise program, which is held in the afternoons after school.

While the patient exercises, our physical therapists monitor his or her blood pressure and closely watch for symptoms of concussion, such as headache or nausea. If symptoms appear, we go back to the previous level of exercise that was not symptomatic for the patient. Exercises can begin with treadmill walking and stretching, then progress to jogging and training with light weights. Later on, the patient could progress to heavier weight lifting and higher-impact exercise. After successfully finishing the program, the student sees a physician again, who clears the patient to return to their sport.

Why is it important not to return to sports too soon following a concussion?
The brain needs healing time, and unlike a broken bone or a sprained ankle, we have no way of looking at the brain and saying it’s better. If you return too soon, the recovery may take a lot longer, or the person might not recover fully. It’s unusual, but in some cases it can even lead to death.

How does Return to Play’s approach benefit kids who’ve had a concussion?
It’s a slow and cautious recovery and leads to the best outcomes overall in terms of reducing the possibility of long-term damage to a young person’s brain.
FREE CARDIAC AND CONCUSSION SCREENINGS

It’s crucial for athletes to keep track of their cardiac health and to be tested for concussion whenever they have a head injury. The Matthew J. Morahan III Health Assessment Center for Athletes, which provides education, evaluation and assessment of sports injuries, helps accomplish these goals. It offers cardiac screenings for patients ages 6 to 18, and also performs non-invasive concussion screening for children ages 5 and up.

Free screenings are offered twice a year—cardiac screenings for children ages 6 to 18, and concussion screenings for ages 5 to 18. For more information, email teamlink@rwjbh.org.

To have your child evaluated and treated for sports-related injuries or post-surgical rehab, call 732.557.8000, ext. 13283. A prescription from a physician is required. Concussions should be evaluated immediately in the Emergency Department.
On October 22, 2018, 116 golfers braved unseasonably brisk weather to participate in Community Medical Center (CMC) Foundation’s Robert H. Ogle Golf Invitational at the Hollywood Golf Club in Deal.

This annual event raises funds for CMC’s community health and education programs. The first Golf Invitational was held in 1989, and in 1994, the event was named in memory of Robert H. Ogle, who was a hospital and Foundation Trustee. “Bob Ogle was ahead of his time,” says Peter Van Dyke, Esq., Chair, CMC Foundation Board of Trustees and member of the hospital Board. “He recognized the value of creating a healthy community by offering area residents access to education and screening programs. His foresight to support community education and outreach programs has helped Community Medical Center advance the health and well-being of Ocean County.”

A true visionary, Ogle advocated that hospitals should have a broad definition of health, and he worked to establish community-based health and wellness programs. Tragically, Ogle developed brain cancer and passed away in 1994. He was an avid golfer and the volunteers on the Foundation golf committee felt that it would be appropriate to remember him in this way and direct the funds of this annual event to the programs that were so important to him.

In 2018 CMC conducted nearly 200 health and wellness programs touching more than 24,000 men, women and children. These include educational classes and cancer screenings for uninsured men and women as well as programs that focus on diabetes and cardiac health. While many of the community health programs are disease-specific, others are general wellness programs touching on nutrition and exercise.

CMC also works with local schools to inform children about healthy eating and making healthy living choices. “This event provides important funding for the programs that were so meaningful to Bob,” says Richard Pallamary, Vice President of CMC Foundation. “We are fortunate his wife, Ruth, daughter, Megan, and her husband, Todd Banach, and their children attend the event every year, adding a special touch to this fundraiser.”

To contribute your time or donate toward CMC’s programs and services, visit cmcgiving.org.
Healthy Resolutions FOR 2019

LOOKING BACK ON 2018, WHAT WERE YOUR RESOLUTIONS?
HOW ARE YOU DOING SO FAR IN 2019?

It's never too late to start the journey to a healthier you. Set new goals or continue previous ones with help from Community Medical Center—and let’s be healthy together!

ACHIEVE MY WEIGHT-LOSS GOAL
Have you considered weight-loss surgery? Find out if it is right for you at our next Center for Bariatrics informational seminar. For details or to register, call 888.724.7123.

LEARN MORE ABOUT MY GENETIC RISKS FOR CANCER
Some people have genetic factors that make them more likely to get certain forms of cancer. Our genetic counseling program pairs patients and families with a board-certified genetic counselor to learn more about possible risks. For more information, call 732.557.2154.

IMPROVE MY SLEEP QUALITY
Going to bed earlier, cutting back on caffeine and minimizing late-night time on your phone, computer and tablet are great ways to help you sleep better. If you’ve taken steps to improve sleep quality but aren’t seeing results, our experts in the Center for Sleep Disorders can help. Call 732.557.2798.

MAKE HEALTHIER DECISIONS ABOUT WHAT I EAT
It can be difficult to make healthy eating choices, but small actions, like choosing water instead of a sugary drink or starting your day with a healthy breakfast, can make it easier for you. If your physician has prescribed a special diet for you, contact our Outpatient Nutrition Counseling Team at 732.557.8000, ext. 11484.

HAVE BETTER CONTROL OF MY DIABETES
Managing diabetes means healthy food choices, exercise and routinely testing your blood sugar. Controlling diabetes can be complicated, but you’re not alone. The Center for Diabetes Education offers self-management classes and support groups with new topics every month to help you manage your diabetes and enjoy life. To contact the Center for Diabetes Education, call 732.349.5757.

TAKE STEPS TOWARD TAKING STEPS WITHOUT PAIN
Joint pain can have a massive impact on your mobility and quality of life, but there are solutions available to help manage and treat the pain. Contact the Total Joint Replacement and Spine Institute at 732.557.8194.

KEEP MYSELF HEALTHY
Wellness checkups are an important part of maintaining good health. Find physicians and schedule an appointment through our Physician Referral Service at 888.724.7123.

HAVE A POSITIVE IMPACT ON MY COMMUNITY
Community Medical Center is dedicated to the health and wellness of Ocean County. Help us care for others—donate to the Community Medical Center Foundation by calling 732.557.8131, or become a volunteer by calling 732.557.8129.

...
Your heart doesn’t beat just for you.

Get it checked. It beats for your husband or wife, your children and grandchildren. It beats for your brothers and sisters, your friends and lovers. It beats for everyone who cares deeply about you. So please, get your heart checked. For them. For you. For more information and to make an appointment with one of New Jersey’s top cardiologists, visit rwjbh.org/heart.

Community Medical Center

Let’s be healthy together.