HEROES WORK HERE

NOW YOUR DOCTOR IS JUST A CLICK AWAY

COMPASSION IN ACTION

WELCOME BACK!
WE’RE READY FOR YOU
Staying Healthy Together

For all of us who call New Jersey home, the COVID-19 pandemic has been a sobering reality. Every one of us has been affected in some way, and some have lost loved ones. To them, we extend our sincerest condolences.

Throughout these extraordinary months, New Jerseyans have come together to encourage each other and the hospitals that care for their communities. At RWJBarnabas Health, we truly have been inspired by the support we’ve received, and offer our heartfelt thanks for every donation and card, and for the countless other gestures of caring.

Most of all, of course, we wish to express our gratitude to our amazing staff—doctors and nurses caring for patients; hospital workers in the offices and on the floors; researchers seeking a cure and a vaccine; those charged with carrying out demanding new cleaning procedures; and those who have quickly adapted our facilities to care for COVID-19 patients.

Now, it’s important to look ahead and begin caring for ourselves again. During the height of the pandemic, many people delayed getting healthcare—a choice that can have devastating consequences. Please rest assured that we’ve gone above and beyond all the measures recommended by the Centers for Disease Control and other national and regional experts to keep everyone in our facilities safe.

At Jersey City Medical Center, we are screening for symptoms, taking temperatures and requiring our patients and employees to wear masks in the hospital and ambulatory facilities. We installed protective shielding at registration areas. Social distancing is observed throughout the hospital setting. During the crisis, we continued to provide urgent and emergency care treatment to return patients to optimal health and welcomed new babies into the world.

It is important to understand that care should not be delayed for patients experiencing signs and symptoms of a heart attack, stroke or other emergencies. We are here for you, ready to safely provide you the highest care.

We look forward to supporting your good health in whatever way we can.

Welcome back.

Yours in good health,

BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

MICHAEL PRILUTSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
JERSEY CITY MEDICAL CENTER
2. **WELCOME LETTER.**
   A community update from our CEOs.

4. **HEROES WORK HERE.**
   We’re beyond grateful for the incredible work of our teams on the COVID-19 front lines.

6. **DONORS ARE HEROES, TOO.**
   A sampling of the valuable—and much appreciated—support we’ve received during the pandemic.

9. **STAYING STRONG WHILE SOCIAL DISTANCING.**
   Simple steps can help you regain a feeling of control.

10. **6 QUESTIONS ABOUT TELEMEDICINE, ANSWERED.**
    You don’t have to be a technology whiz to have a video visit with your doctor.

12. **CLINICAL TRIALS: WHAT EVERY CANCER PATIENT SHOULD KNOW.**
    A trial offers patients a chance to benefit from the latest treatment.

14. **NEW WAYS TO LEAD IN CANCER TREATMENT.**
    Collaboration and innovation are driving a new era in oncology.

15. **ADVANCED OPTIONS FOR TREATING AUTISM.**
    Telehealth services and intensive treatments offer new help.

16. **POWER PARTNERSHIPS.**
    Working together to help make New Jersey healthier.

17. **YOUR SUPPORT SUSTAINS US.**
    Communities have stepped up for their local hospitals—and you can still help.

18. **COMPASSION IN ACTION.**
    We don’t have space to tell all our stories of care and courage. Here are just a few.

20. **SAFE AND SOUND IN THE E.D.**
    Rigorous procedures ensure the safety of Emergency Department patients and staff.

22. **WELCOME BACK!**
    COVID-19 testing of staff and patients, extreme cleaning and many other measures make our facilities safe for care.
Our providers and staff have risen to—and well above—the unprecedented challenges of caring for patients with COVID-19. Jersey City Medical Center (JCMC) is proud and grateful beyond words for the indomitable spirit and incredible work done by our teams on the front lines.
OUR HEROES: JCMC nurses are healthcare heroes in the fight against COVID-19.

2 STEPPING UP: Michael Loftus, MD, Chief Medical Officer, started his journey at JCMC at the very beginning of the pandemic.

3 ON ROUNDS: Michael Prilutsky, President and CEO of JCMC, checks in with staff.

4 PRIDE AND PPE: Selfless and courageous frontline heroes.

5 KEEPING IT CLEAN: Environmental Services staff are essential to keeping our hospital clean and safe.

6 SAFETY FIRST: Security personnel provide masks to staff and authorized visitors.

7 MOBILE HEALTH: During the pandemic, RWJBarnabas Health Mobile Health Services have stood ready to provide expert care in any emergency.

8 A TIME TO CELEBRATE: As “Here Comes the Sun” plays on the PA system, nurses and staff clap out for a patient preparing to be discharged.

9 MEETING NEEDS: Dedicated staff and providers from RWJBarnabas Health Behavioral Health Center and Network have been available 24/7 to meet critical mental and emotional health needs during the pandemic.

10 MASKED MARVELS: Chief Nursing Officer Margaret Ames, DNP, MPA, RN (third from left) and nursing staff proudly wear superhero shirts with the saying “And that's how I saved the world.”

11 PEER RECOVERY: Certified Peer Recovery Specialists from the RWJBarnabas Health Institute for Prevention and Recovery offer support to patients with substance use disorders.

12 ALL TOGETHER NOW: The entire JCMC staff is united in the fight against COVID-19.

To share your thanks or make a donation in support of our healthcare heroes, visit www.rwjbh.org/heroes.
The Jersey City Medical Center Foundation has been overwhelmed by the outpouring of support from the community—from businesses, schools, food establishments, civic and community groups, individuals and more. The generous support and words of encouragement kept our heroes on the front line going. THANK YOU!
A BIG HIT: Film Industry Feeds the Frontline delivered 500 hot meals for our healthcare workers.

FOOT SOLDIERS: Dr. Scholl’s Shoes donated hundreds of pairs of insoles for JCMC staff.

CRITICAL EQUIPMENT: Michael Prilutsky, President and CEO of JCMC, inspects a shipment of ventilators donated by Tesla.

POWER PACKING: Lord Abbett and Aramark assembled dinners for JCMC healthcare workers.

KIND GESTURE: KIND snack company donated 2,300 wholesome bars during Nurses Week 2020.

COMFORT AND JOY: Chief Medical Officer Michael Loftus and JCMC Foundation VP Nicole Kagan (center) accepted 100 homemade comfort bags donated by Keren Vered and Finally Home JC.

GOOD TO GO: Goya donated a pallet of food in support of healthcare workers on the front lines.

CHILDREN’S SPECIALIZED HOSPITAL: The Long Term Care team from CSH in Mountainside thanks the Front Line Appreciation Group for a donation of breakfast sandwiches.

To share a note of thanks or make a donation to Jersey City Medical Center, visit www.rwjbh.org/give.
Welcome your new arrival with all the comforts of home.

Our Lord Abbett Maternity Wing offers safety, comfort and privacy.

We've taken every precaution to ensure that your baby's birth is a safe and personal experience, such as testing patients for COVID-19, allowing one birth partner or support person, temperature checks every 12 hours and masks upon entry. And with private, hotel-like rooms, our state-of-the-art maternity wing is a safe, tranquil place to heal and bond with your baby. Learn more at rwjbh.org/maternity
The COVID-19 pandemic has brought all kinds of uncertainty—to our finances, our health and our ability to make plans. “People have lost an important aspect of control over their activities,” says Frank Ghinassi, PhD, ABBP, Senior Vice President, Behavioral Health and Addiction, RWJBarnabas Health, and President and CEO of Rutgers University Behavioral Health Care. “As a result, we’re seeing a lot of people feeling stressed—and even a little more than that, feeling distressed.”

“We all had a rhythm and routine for our days,” he continues, “from what time we took a shower to how we dressed for work to the kinds of things we did for fun. Now all of those old rhythms are challenged, and that makes people feel confused and off-balance.”

While that’s a perfectly normal reaction, Dr. Ghinassi says it’s important to take the next step. “Ask yourself, ‘What can I do in this new reality to help myself feel better and more in control?’” The answer lies in reintroducing predictability, to the degree possible in this unpredictable time.

• Create a new routine. “Establish a new set of patterns,” advises Dr. Ghinassi. “Go to bed and get up in a regular way. Eat at set intervals, not all day long just because you’re not far from the refrigerator. Work out or take a walk regularly. These new routines will become familiar and comforting.”

• Make plans to socialize with others. “Meaningful connection with family and friends is not going to happen automatically,” says Dr. Ghinassi. “Create ways to communicate with people who are important to you, using FaceTime, letters, phone calls or whatever medium you do best. And keep in mind that Snapchat and Instagram are one-way communication, not true socializing.”

• Build a new set of activities that give you pleasure. “A lot of things we like to do can’t happen now because they involve going to crowded places like movie theaters, restaurants, concerts and stadiums. We need to find activities that will bring us pleasure and are doable within our current limitations,” says Dr. Ghinassi. “That could involve playing or listening to music, streaming films, gardening, painting or any other enjoyable hobby.”

If social distancing has led to behaviors that could be destructive, such as overeating or drinking too much, or if the blues have crossed the line into depression, don’t hesitate to reach out for help. “There are many front doors to behavioral healthcare,” Dr. Ghinassi says. “You can ask a trusted healthcare provider to recommend a counselor. If your employer has an Employee Assistance Program, take advantage of that. Seek out your local mental health facility or call the New Jersey Hopeline at 855.654.6735. Call the RWJBarnabas Health Access Center, which is available 24/7, at 800.300.0628.”

• And take heart. “We’ll get through this,” says Dr. Ghinassi. “Humans are enormously adaptable. Through millennia of plagues, famines, wars and pestilence, we’ve risen to every challenge. It’s in our DNA. We’re going to learn and restructure, draw strength from each other and find solutions.”

For help accessing mental health services, call the RWJBarnabas Health Access Center at 800.300.0628.
YOU DON'T HAVE TO BE A TECHNOLOGY WHIZ TO HAVE A VIDEO VISIT WITH YOUR DOCTOR.

Virtual online doctor visits have been available for some time—but since the COVID-19 pandemic, they’ve soared. “During just one week in April, doctors in our medical group conducted more than 10,000 telemedicine visits,” says Andy Anderson, MD, President and Chief Executive Officer of the RWJBarnabas Health medical group.

Stay-home orders during the lockdown have played a huge role in the increase, but other causes are also speeding up telemedicine’s adoption. Dr. Anderson tells how and why:

1 What factors are contributing to telemedicine’s surge?
Historically, demand for telemedicine was driven by urgent issues, rather than by routine or other kinds of care. Habit has played a role, too—the expectation that
patients and physicians need to physically be together in order to get the best possible care.

Now, there’s a greater openness to using technology platforms in all realms of our lives. Those platforms are increasingly sophisticated, so that patients and providers can really see each other, see the parts of the body in question and read each other’s expressions.

In the RWJBarnabas Health medical group, we have an easy-to-use platform for telemedicine visits. It’s as simple as a click to get into a virtual room for an appointment. It’s also secure and is fully HIPAA-compliant.

2 What are some examples of conditions that can be treated in a virtual visit?
Let’s say a person falls and cuts himself. A telemedicine visit can help determine whether he needs stitches and/or an antibiotic. Symptons and treatment for a urinary tract infection can also be discussed virtually. If someone has a sore throat, he or she can show the back of the throat and tonsils to the doctor via video.

Chronic conditions, such as COPD [chronic obstructive pulmonary disease], congestive heart failure or asthma could be managed through a video visit, as a physician is able to observe whether a person is short of breath, for example, or whether his legs are swollen.

Diabetes that is not well controlled can also be discussed, as the patient can report his blood sugar levels and medication can be adjusted accordingly.

It’s important to note that in any of these cases, a visit can begin as a video visit and then become an in-person visit if the condition warrants it. If you aren’t sure what the best course of action is—video, in-person office visit or Emergency Department visit—don’t feel you have the burden of having to make the decision on your own. Call your physician’s office and have a conversation.

3 What about well visits and checkups?
Clearly, some exams and procedures require an in-person visit. However, many aspects of a wellness visit, specifically a Medicare Annual Wellness Visit, can be conducted virtually. A physician can ask about, for example, colon cancer screenings or mammograms, home safety and more. Patients like that they can save time and don’t have to travel.

In addition, we’re hoping to see increased use of monitoring devices that can transmit information from patient homes to physician offices, including blood pressure monitors, blood glucose monitors, pulse oximeters and even wireless scales.

4 Am I at risk for contagion if I visit a physician’s office?
At RWJBarnabas Health medical group offices, we’ve taken the necessary steps to make it very safe to visit in person. We have social distancing plans, including the use of Plexiglas barriers, a distance line at checkout areas, modified waiting room seating and limitations on the number of patients scheduled during a specified time frame. We also follow rigorous cleaning regimens, offer hand sanitizer stations and more.

5 Are telemedicine visits covered by insurance?
During the early stages of the pandemic, Medicare, Medicaid and many private insurances expanded their coverage for telemedicine. The situation is evolving, so check with your insurer, but our sense is that coverage for telemedicine will continue to expand.

6 How will telemedicine change healthcare in the future?
While the COVID-19 crisis has pushed us into this world fast, I think healthcare will be sticking with telemedicine from now on. Telemedicine is not a solution for everything, but it is a solution for a lot more things than we realized. It’s a great tool to have in our toolkit.

The most important message we have for patients is to continue to make your health a priority. Don’t put off care if you aren’t feeling well, or postpone contacting your physician for help managing any chronic health conditions. Whether virtually or in person, your provider is there to help you.

To connect with an RWJBarnabas Health medical group provider, call 888.724.7123 or visit www.rwjbh.org/medicalgroup.
If you or a loved one is diagnosed with cancer, you’ll want to seek the highest possible level of care—and clinical trials can be a critical aspect of that care. “Clinical trials offer tomorrow’s treatments today,” says Howard S. Hochster, MD, FACP, Director, Oncology Research for RWJBarnabas Health, and Associate Director, Clinical Research and Director, GI Oncology for Rutgers Cancer Institute. “As the state’s only NCI-Designated Comprehensive Cancer Center, Rutgers Cancer Institute of New Jersey and RWJBarnabas Health provide patients access to a wide range of clinical trials, many of which are not available elsewhere. We do this at Rutgers Cancer Institute in New Brunswick and
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diagnoses received the same type of treatment. For years, everyone with certain cancer diagnoses received the same type of treatment for their cancers, but not everyone reacted the same way. Now we’re able to use clinical trials to make progress in precision medicine, where we can specifically target, on a molecular level, the gene mutations or changes that make an individual’s normal cells turn into cancer cells.

Another exciting area now is immunotherapy—using a person’s own immune system to fight cancer. We’ve learned that cancer cells have ways to mask themselves from the immune system. Today, we’ve seen many breakthroughs in drugs that restore the body’s ability to fight off cancer cells.

CAR T-cell therapy is another promising area of research. It involves obtaining immune cells from a patient, reengineering them in a lab to make them as effective at fighting cancer as possible, then reinjecting them into the patient’s body. This results in a “living” therapy with ongoing benefit.

Currently, Robert Wood Johnson University Hospital in New Brunswick, in conjunction with Rutgers Cancer Institute, is one of only two certified programs in the state to offer this form of immunotherapy.

To learn more about clinical trials, visit www.cinj.org/clinical-trials. To speak with a clinical trial navigator to explore your options, call the Oncology Access Center at 844.CANCERNJ.

A CLINICAL TRIAL FOR COVID-19 TREATMENT

Rutgers Cancer Institute is spearheading a statewide clinical trial for the drug hydroxychloroquine as a potential treatment for COVID-19 patients. Though the trial is not limited to cancer patients, Rutgers Cancer Institute is well positioned to lead such a study because of its extensive experience with clinical trials as the state’s only NCI-Designated Comprehensive Cancer Center.

Hydroxychloroquine, while a subject of much public discussion, has not yet been tested in a large, controlled clinical trial to determine its effectiveness. “Until we get the results of a clinical trial, we just don’t know if there’s any role for hydroxychloroquine in treatment for COVID-19,” says Rutgers Cancer Institute Director Steven K. Libutti, MD, who is also Senior Vice President, Oncology Services, RWJBarnabas Health, and Vice Chancellor, Cancer Programs, Rutgers Biomedical and Health Sciences.

“Both the initial hype about the benefits of hydroxychloroquine and the stigma that followed were inappropriate. With this trial, we’ll have well-analyzed data from a well-conducted study in order to make a recommendation about that agent’s use.”

THREE PATHWAYS

The study consists of three “arms.” One will test hydroxychloroquine in conjunction with the antibiotic azithromycin; one will test hydroxychloroquine alone; and one will provide supportive care for six days, followed by a course of hydroxychloroquine. Patients’ blood will be tested for levels of the SARS CoV-2 virus prior to treatment and at regular intervals thereafter. The study is open to people who are age 18 or over, have been diagnosed with COVID-19 and meet other eligibility requirements.

In addition to Rutgers Cancer Institute in New Brunswick, the trial is being offered at Robert Wood Johnson University Hospital in New Brunswick; Monmouth Medical Center in Long Branch; Saint Barnabas Medical Center in Livingston; Morristown Medical Center; Overlook Medical Center in Summit; and University Hospital in Newark.

For information on how to take part in the trial, call Rutgers Cancer Institute’s Office of Human Research Services at 732.235.7356 or email statewide_research@cinj.rutgers.edu.

STEVEN K. LIBUTTI, MD

Requirements for participation vary. Criteria may include age, gender, type and stage of cancer, other existing medical conditions and treatment history.

Before patients can participate in a clinical trial, they must sign an informed consent document, which explains all aspects of the trial as well as alternative treatment options.

What are some examples of cancer research taking place in clinical trials?

For years, everyone with certain cancer diagnoses received the same type of treatment. For years, everyone with certain cancer diagnoses received the same type of treatment.
NEW WAYS TO LEAD IN CANCER TREATMENT

COLLABORATION AND INNOVATION ARE DRIVING A NEW ERA IN ONCOLOGY.

Every week, up to 40 of New Jersey’s top cancer experts virtually convene as part of the new N.J. Statewide Cancer Programs Collaboration—a unique approach initiated and implemented by Steven K. Libutti, MD, Director, Rutgers Cancer Institute of New Jersey, and Senior Vice President, Oncology Services, RWJBarnabas Health.

“As the state’s only NCI-Designated Comprehensive Cancer Center, we felt that it was important that we communicate with other cancer programs in New Jersey during the COVID-19 pandemic,” says Dr. Libutti. “We felt we could learn quite a bit from hearing about other experiences, and that each program shouldn’t have to go through the learning curve on its own.”

In addition to Rutgers Cancer Institute and RWJBarnabas Health, all major cancer programs in the state participate, including those at Atlantic Health System; Capital Health Cancer Center; MD Anderson Cancer Center at Cooper; John Theurer Cancer Center at Hackensack University Medical Center, Hackensack Meridian Health; Hunterdon Healthcare; Inspira Health Network; Regional Cancer Care Associates; Saint Peter’s Healthcare System; St. Luke’s University Health Network, Warren; Summit Medical Group; Trinitas Comprehensive Cancer Center; and Penn Medicine|Virtua Cancer Program.

MANY MINDS

Subgroups in the areas of medical oncology, radiation oncology, surgical oncology and operations meet throughout the week to discuss topics relevant to their programs. On Friday mornings, all participants join a call to exchange information and insights.

“We’ve come up with plans for how to safely continue and then augment surgical oncology and other care during the pandemic,” says Dr. Libutti. “What are the right testing regimens to use? How do you open up surgery facilities safely to protect patients and providers from exposure? Which treatment regimens can be delivered at home, and which can be delayed without bad consequences for patients?

“Oncology itself is a very collaborative field, because so many modalities are used to treat a cancer patient in a very coordinated way,” continues Dr. Libutti. “It’s not a huge leap for us to extend collaborations beyond the borders of health systems.”

Patients in New Jersey will reap the benefits. “Our state sees 50,000 new diagnoses and 16,000 deaths from cancer every year,” says Dr. Libutti. “We’re going to leverage the strengths of each program to work together to help cancer patients.”

VIRTUAL CARE FOR CANCER PATIENTS

The Rutgers Cancer Institute of New Jersey, in partnership with RWJBarnabas Health (RWJBH), had already begun a pilot program for cancer consultations via video. The pandemic accelerated the expansion of the plan to almost all of the groups’ cancer specialists.

The specialists are using a secure platform, which is private and simple for patients to access. In addition to convenience, telemedicine has a number of benefits for cancer patients:

• The elimination of potential exposure for patients with compromised immune systems
• The ability to have several specialists virtually present at the meeting
• The capacity to have geographically distant family members at the meeting
• The means to effectively share information with patients. “As I’m talking to a patient, I can show a picture of, for example, lymph nodes, and also type out instructions on the screen and then email these to the patient,” says Andrew M. Evens, DO, MSc, Associate Director for Clinical Services and Director, Lymphoma Program, Rutgers Cancer Institute, and Medical Director, Oncology Service Line, RWJBH.

“As we always say, ‘Cancer doesn’t travel well,’” explains Dr. Evens. “Telemedicine doesn’t replace in-person care, but we knew there was an appetite for this service. Who wants to drive an hour or more on the parkway or turnpike for a consult when you don’t have to?”
Stay-at-home orders during the pandemic have posed particular challenges for children and adults with autism spectrum disorder (ASD). Deprived of face-to-face services, they have been lacking the stimulation and training they need, and have spent much less time interacting with others than usual.

“It’s a situation where problem behavior is more likely to occur,” says Wayne Fisher, a professor in the Department of Pediatrics at Rutgers Robert Wood Johnson Medical School and Director of the Rutgers Center for Autism Research, Education and Service (RUCARES). “We wanted to provide support for kids and families to help them manage the situation more effectively.”

The result was the development of ABA (Applied Behavior Analysis) Short-Term Telehealth Services provided by Children’s Specialized Hospital (CSH). The services begin with a quick-start evaluation. For children with severe problems whose behavior may be dangerous to themselves, a behavior stabilization and safety program is developed in two 90-minute appointments. For children with mild to moderate ASD, a quick-start behavior management program and behavior management group are available over the course of eight appointments via a simple-to-access, private telehealth platform.

Though telehealth services for people with autism have been available in other states, it was not an option in New Jersey until an executive order as part of the COVID-19 response allowed it. Fisher hopes the trend continues.

“This method has many benefits. It really helps families, many of whom travel quite a distance for in-person specialized care, in terms of convenience,” he says. “For specialists, there’s therapeutic value in seeing the child and family at home, under naturalistic conditions.”

EXPANDED SERVICES

The ABA short-term telehealth program is part of an expansion of autism services that CSH now offers through a collaboration with RUCARES. This summer will see the opening of CSH RUCARES, the first center of its kind in New Jersey dedicated to innovative research, education and service to support children and adults with ASD.

CSH RUCARES will accept patients for a new Severe Behavior Disorders Program, which will provide specialized services to children and adolescents with autism and other developmental disabilities who display dangerous behavior such as self-injury and aggression. Patients will undergo intensive outpatient treatment from a team of board-certified behavior analysts and registered behavior technicians. “Our program has a data-based approach based on empirical research, and all of our staff and faculty are highly trained,” explains Fisher, who is the Director of CSH RUCARES.

CSH is also expanding its Pediatric Feeding Disorders Program with a new program for children who have not progressed through traditional feeding programs. “It’s a data-based, intensive, goal-driven day program. We see patients for about eight weeks, then transition to outpatient follow-up services once or twice a week,” says Cathleen Piazza, Director of the Pediatric Feeding Disorders Program at CSH and a professor in the Rutgers Graduate School of Applied and Professional Psychology. “We also find telehealth services very valuable because we can work with and see the patient where he or she eats, in real time.”

To learn more about Children’s Specialized Hospital, call 888.244.5373 or visit www.childrens-specialized.org.
At RWJBarnabas Health (RWJBH), we have always been committed to meaningful partnerships with organizations that share our vision to create healthier communities. Their efforts during the COVID-19 pandemic, however, have taken their support to a whole new level. "We asked our partners to help us in several ways—through donations, through disseminating educational information and through support for our frontline healthcare heroes," says Justin Edelman, Senior Vice President, Corporate Partnerships, RWJBH. "The response was beyond what we ever could have imagined."

Our corporate partners had our back. New Jersey Devils/Prudential Center provided a significant and impactful monetary donation in addition to protective equipment and more than 10,000 tickets to future events for our healthcare heroes. Rutgers University Athletics donated protective equipment and used its reach on social media to educate our communities on important safety tips, while the Somerset Patriots raised funds through online memorabilia auctions, merchandise sales and a pop-up food truck event. Too numerous to mention, the supportive efforts from so many of RWJBH’s partners (see list at right) have been crucial to our mission.

On behalf of RWJBH and all of our partner organizations, we wish you good health and good fortune at all times. Together, we’ll be there for you.

Warmest thanks to these partners:
- Cedar Stars Academy
- Cure Insurance Arena
- George Street Playhouse
- Lakewood BlueClaws
- Mets Radio Network
- Monmouth University Athletics
- MSG Networks
- New Jersey Devils/Prudential Center
- New Jersey Golf Foundation
- NJPAC
- New Jersey Youth Soccer Association
- Novo Nordisk New Jersey Marathon & Half Marathon
- Princeton University Athletics
- Pure Basketball
- Rutgers University Athletics
- RWJBarnabas Health Arena
- Seton Hall University Athletics
- Somerset Patriots
- Special Olympics New Jersey
- Trenton Thunder
- Yankees Radio Network

To learn more about corporate partnerships at RWJBarnabas Health, visit www.rwjbh.org/partnerships.
The offers from the public began as soon as the crisis did. People emailed, texted and called hospitals, some in tears, wanting to know how they could help local healthcare providers. They sent money. They donated dinners. They sent cards. Someone had a friend who had a friend whose company could provide personal protective equipment (PPE). A small painting business had 20 face masks to donate. A hardware store provided gloves. The contributions came in a steady stream. “The donations were from longtime loyal donors as well as those who had never made a gift to one of our hospitals before,” says Glenn Miller, Executive Vice President and Chief Development Officer at RWJ Barnabas Health (RWJBH). “People wanted to make sure that our doctors, nurses and staff had what they needed to stay healthy and do their jobs.”

“The word ‘heroes’ gets used a lot, and admiration for the dedication of our caregivers was driving this outpouring of support,” he continues. “Supporters saw our caregivers getting up to go to work every day under incredibly difficult circumstances, fighting to save lives.”

As of mid-May, the RWJBH system as a whole had received nearly $11 million in support. Of that amount, $6.7 million came in checks and online gifts, large and small; $3.2 million in donated PPE and other supplies; and $870,000 in food donations.

“RWJBH hospitals have always enjoyed wonderfully generous support from the communities they serve,” Miller says. “In recent months, I think our doctors and nurses were certainly reminded about how much people value them and the work they do.”

ONGOING NEED
The money raised goes into the RWJBH system’s Emergency Response Fund, where it’s used to purchase much-needed equipment and supplies.

The fund also is used to support frontline hospital workers. “When employees need to be quarantined away from their families, we’ve been able to help make that happen,” Miller says. “Other colleagues needed childcare so they could come to work. And sadly, we’ve lost colleagues, and we’re working to develop resources to address the repercussions of such terrible losses.”

Beyond tangible support, the outpouring from the community provided an invaluable morale boost. “For healthcare workers going through this experience, to take a break and find a hot meal or a card or a note—it’s meant the world to them,” Miller says. “When you feed someone, you’re enriching their body, obviously, and also their soul.”

The Emergency Response Fund remains open. “We’re in an ongoing crisis, and philanthropy will continue to play an important role in helping us prepare for any surges or future outbreaks,” Miller says.

In addition, capital projects, new programs and equipment upgrades will still need to be funded for each medical center. “We’re incredibly grateful for the outpouring of support, and the tremendous positive impact it has on our work and our commitment to keeping communities healthy,” Miller says. “We cannot thank people enough.”

The gifts also have a benefit for the giver. “We’ve heard that people in the community want to feel that they have the ability to bring hope,” says Miller, “and that they’re empowered to make a difference.”

COMMUNITIES HAVE STEPPED UP FOR THEIR LOCAL HOSPITALS IN A BIG WAY—AND YOU CAN STILL HELP.

To donate to Jersey City Medical Center or to RWJ Barnabas Health, visit the Emergency Response Fund at www.rwjbh.org/give.
WE DON'T HAVE THE SPACE TO TELL ALL OF THE STORIES OF CARE AND COURAGE WE'VE SEEN IN THESE CHALLENGING TIMES. HERE ARE JUST A FEW.

COMPASSION IN ACTION

‘ANGELS DOING GOD’S WORK’

ROLANDO LAVARRO
JERSEY CITY COUNCILMAN AT LARGE, RECOVERED COVID-19 PATIENT

“At first, I had a fever, cough and sore throat. I was given an antibiotic for possible strep throat.

Then I began to feel much, much worse—chills, body aches, loss of taste and smell, gastrointestinal issues and extreme fatigue. I was given a different antibiotic, but my fever just kept getting higher.

I suspected COVID-19, and I was worried because I have underlying issues that could put me at greater risk. At that time, you couldn’t get the test unless you’d been out of the country within the past 14 days or had been exposed to a person known to have the virus, so my request was denied.

I tried to appeal the decision, but again was told no. Finally, after an appointment with a different doctor, I was cleared to go for a drive-through test. The results would take three to five days to come in.

At that point, my symptoms were very bad. At my wife’s urging (Lavarro is married to RWJBarnabas Health employee Veronica Lavarro), I made an appointment to see Dr. Deval Gadhvi, who is a primary care doctor. Dr. Gadhvi arranged for me to go to an urgent care facility for X-rays and blood work.

There, they told me that my blood pressure and oxygen levels were alarmingly low, so low that I needed to go to the Emergency Department right away. That was a very hard time—going home to tell my wife and daughter that I had to go to the hospital. I drove myself because I didn’t want them to be exposed.

To be honest, I was so miserable that I don’t remember a whole lot about those days in the hospital, except that the nursing care was amazing. They were so compassionate and attentive. They were angels doing God’s work.

I have two main takeaways from this. The first is that people have to really advocate for their health and keep trying to get answers. I give all credit to my wife for urging me to see Dr. Gadhvi, and I don’t like to think of what my condition might have been if I hadn’t done that.

The second is that, as we reopen the economy, we can’t ease up on all those precautionary measures—wearing masks, social distancing, washing our hands. The COVID-19 virus is still out there, and you need to practice self-care.”
SOMETIMES HEROES WEAR MASKS

FRANK BERNARD BOBADILLA
NURSE MANAGER,
7 EAST MEDICAL SURGICAL UNIT

Heroes Work Here: This sign greets me every day as I walk into work.

To be honest, there are times when I do feel like a literal comic book superhero. You can’t help it when you’re wearing a face mask and protective eyewear similar to Spider-Man or Batman. As I walk into my unit, my colleagues are barely recognizable in their PPE [personal protective equipment]. It’s anyone’s guess as to who is who.

The bigger change is the patient population we’ve been seeing in our medical-surgical and stroke unit. We had to quickly acclimate ourselves to the specialized care that COVID-19 patients require. Rapid responses, intubations and cardiac arrests unfortunately have become the norm.

Despite these changes, our teamwork dynamic has remained as strong as ever. When emergencies are called overhead, everyone knows their role and does their part, even if it’s just to observe those going into the isolation rooms and providing a quick cross-check to ensure everyone’s PPE is appropriate.

The long day ends with the removal of my N95 mask and a quick look in the mirror at the deep markings it has left on my face. I know the marks are only temporary—and so is COVID-19. The virus has proven to be a formidable adversary, but we will continue to fight the battle, hopeful that we will soon come out victorious.

TREATED WITH TLC

ALBERT AMMARITO
NAVY VETERAN, RECOVERED COVID-19 PATIENT

When I first heard about COVID-19, I really didn’t believe in it. I had no concerns, I went to work. Then I felt sick for four or five days—coughing, fever, diarrhea and no sense of taste or smell. Finally, I was feeling so bad that I called 911 and they took me to Jersey City Medical Center’s satellite Emergency Department in Bayonne.

In those early days, COVID-19 test results took forever to come back, but I was treated for all my symptoms, and the test later came back positive. I was sent to the main Jersey City Medical Center campus, where they put me in an isolation room.

I was nervous and scared, and my body was hurting. I had a triple bypass at Jersey City Medical Center last March, so the doctors were especially careful about checking my heart as they treated me throughout my entire stay at the hospital.

All the caregivers there were absolutely fantastic. They’d always spend a little extra time to ask you how you were feeling, bring you an extra cup of coffee, talk about outside life. There are no words to say how great these people are. On a scale of 1 to 10, I give them 100.

After almost two weeks, I was feeling better and was released to go home. Now I can’t wait to get back to work. And I thank God for Jersey City Medical Center. First, I had a triple bypass and then I had COVID-19, and both times they pulled me through.

BOTH SIDES OF THE EXPERIENCE

MADHUWATTIE (PRIYA) PARSAAM,
RN-BC, MSN-S, BSN, BS, PATIENT CARE COORDINATOR

Since the beginning of this pandemic, I have had the profound opportunity to help those in need. It has been difficult to see patients with this virus. The nursing staff do our best to help everybody regain strength and faith. Seeing patients recover and make their way home melts my heart. They give me, and all of us, hope.

I have also experienced being a COVID-19 patient, and it was one of the toughest experiences I’ve ever gone through. I couldn’t have overcome it without my Jersey City Medical Center family. I was treated at the main hospital ED and at the satellite ED in Bayonne on two different occasions, and each time I was treated with the utmost respect and kindness.

Now I’ve recovered and have gone back to work to help my co-workers in the fight against this pandemic. I am so glad to be a part of the best medical team at Jersey City Medical Center. I wouldn’t have it any other way!
RIGOROUS PROCEDURES ENSURE THE SAFETY OF EMERGENCY DEPARTMENT PATIENTS AND STAFF.

Emergency Department (ED) visits fell sharply during the height of the coronavirus crisis, in New Jersey and nationally as well—and that has doctors worried.

“In the RWJBarnabas Health system, we’ve seen our ED volume decline by 50 percent overall, and by up to 85 percent for pediatric EDs,” says Deven Unadkat, DO, Chairman and Medical Director of Emergency Medicine at Jersey City Medical Center (JCMC).

“The problem is that disease prevalence doesn’t change,” he explains. “Heart attacks, strokes, asthma, intra-abdominal diseases such as appendicitis and diverticulitis—COVID-19 didn’t make them go away, but we’ve been seeing these patients in the ED less and less.”

The probable reason: fear. “The likelihood is that people have been putting off care because they’re afraid to go into the hospitals and be exposed to COVID-19,” says Dr. Unadkat. “That concerns us because delaying care for many conditions can lead to disability and even death, and those risks are not necessary.

“The main message we want people to hear is, ‘It’s safe to come to the ED, so don’t put it off,’” he continues. “We’ve put many layers of protection in place for our patients and for our staff.”
• Separation of COVID-19 and non-COVID-19 patients upon entry
• Setting aside special areas that are completely separate from COVID-19 patients and caregivers
• Creation of “negative pressure” isolation rooms that prevent airborne contaminants from drifting to other areas in the hospital
• Provision of masks for all staff and patients
• Frequent disinfectant wiping of surfaces and equipment.

“Our environmental services staff is doing a fantastic job of deep-cleaning our EDs,” says Dr. Unadkat. “Every doorknob, every surface, is continuously being wiped with disinfectant.”

CARDIAC CONCERNS
Doctors have long pounded the drum for patients to call 911 if they experience symptoms of a heart attack. “Time is heart muscle,” says Mary Abed, MD, Chief of Cardiology at JCMC and a member of RWJBarnabas Health medical group. “The sooner we can treat you after the onset of symptoms—ideally, within 90 minutes—the less damage to your heart.”

Dr. Abed urges people to be aware not only of the classic symptoms of a heart attack (see list, above) such as chest pain or a feeling of heaviness in the chest, but of non-traditional symptoms such as shortness of breath as well.

Adding complexity to the situation is the fact that the novel coronavirus seems to exacerbate a range of other cardiovascular problems. “COVID-19 is a multi-organ system disease which primarily impacts the lungs, but can also affect the kidney, liver, heart and brain. We have learned that there is a hematological/vascular effect that puts patients at risk for increased blood clotting in the body,” says Dr. Abed. “It’s possible that a patient may have heart disease that has not been recognized, and with the stress of COVID-19 illness a cardiac event occurs. The event can be any of the known cardiac syndromes, including heart attack or heart failure, pulmonary emboli and/or arrhythmias. We just don’t have all the answers yet.”

The important thing to know, she says, is that the advice for going to the ED is the same now as it was before COVID-19. “Pay attention to symptoms,” says Dr. Abed, “and don’t hesitate to call 911.”

STROKE RISK
The coronavirus-related clotting that can lead to heart attacks also appears to increase risk for stroke.

A stroke occurs when a blood vessel that leads to the brain is blocked by a clot, or ruptures, leading to death of brain cells as they’re robbed of oxygen- and nutrient-rich blood. Immediate treatment can minimize the long-term effects of stroke, such as speech and movement difficulties, and even prevent death.

People with uncontrolled high blood pressure or diabetes are at increased risk of stroke, as are smokers. But the pandemic has introduced a new wrinkle: a striking increase in strokes among COVID-19 patients as young as their 30s and 40s, who had no stroke risk factors and no other COVID-19 symptoms. This new risk makes it all the more important for people to act when they have symptoms (see list, below).

“Pay attention to the suddenness of the symptoms, which could include confusion and severe headache, and call 911 so you can be taken to the hospital right away,” advises Musaid Khan, MD, Medical Director of the Stroke Program at JCMC.

COVID-19, can affect the nervous system in other ways, too, says Dr. Khan. “One of the most common ways is the loss of smell,” he says. “Another is exacerbation of seizures in people who are prone to them. All of these things have to be further investigated.”

What’s not in question is this emphatic advice from doctors: Don’t be afraid to go to the hospital if you need to. “You really have to weigh the risks and benefits,” says Dr. Khan, “and realize that the risks are much higher if you stay at home.”

To learn more about how we’re ensuring your safety at RWJBarnabas Health, visit www.rwjbh.org/welcomeback.
The safety and health of our patients and team members have always been top priorities at RWJ Barnabas Health (RWJBH). Now we’ve taken everything the medical profession has learned about COVID-19 and implemented best practices at Jersey City Medical Center and all of our facilities.

“At RWJBarnabas Health, we’ve been on a safety journey to becoming a High...
Reliability Organization for three years,” says John Bonamo, MD, Executive Vice President, Chief Quality Officer and Chief Medical Officer for RWJBH. “The high safety standards we had before the pandemic are making it possible for us to come back confident.”

Safety is an all-encompassing effort. “Every little thing we do is a building block aimed at making our facilities COVID-free,” says Dr. Bonamo.

WHAT WE’RE DOING
Testing is a major way RWJBH hospitals are keeping COVID-19 from spreading. Every admitted patient, every surgical patient and every Emergency Department patient with flu-like symptoms is tested. In addition, team members—whether they work directly with patients or not—are tested, many of them multiple times.

Hospital administrators and staff also have taken a hard look at all relevant processes, including how rooms are cleaned, how personal protective equipment (PPE) is used—even how air in the hospitals is circulated.

“As we discharge COVID-19 patients, the rooms in which they were cared for get a special deep cleaning,” says Dr. Bonamo. “We clean everything in the room to the nth degree, from top to bottom—including changing all the air filters and cleaning all the vents.”

RWJBH has taken the enormous step of retooling all of its heating and cooling systems to pull in fresh air from outside, rather than continuously recirculating the air inside a building. “It’s a big expense for the small number of infections it’s likely to prevent,” says Dr. Bonamo, “but each small yield of prevented cases adds up and is very important because of how quickly this disease spreads.”

WHAT YOU CAN DO
Although healthcare is an essential service, many people have avoided going to the doctor or hospital to limit their risk of exposure to COVID-19. That fear is unfounded when visiting RWJBH facilities—and it could be dangerous. Putting off urgent medical care or physician visits for chronic disease management, childhood immunizations and other health services can have devastating effects.

“You don’t want the virus, but you also don’t want a heart attack or a stroke, or for your child to get a different infectious disease,” says Dr. Bonamo. “You’re not protecting your health by staying away, you’re jeopardizing it.

“We take public health and safety extraordinarily seriously,” Dr. Bonamo continues. “We understand why people might want to avoid coming to the hospital, but it’s important for everyone to know that we can keep them safe and help them get healthy.”

NEW PROCESSES AT JERSEY CITY MEDICAL CENTER

For your safety, we’ve made some changes in the way we’re delivering care. Appointments are now needed for all outpatient testing and therapy. We do this to make your visit here as safe and comfortable as possible.

• To schedule a radiology imaging appointment for X-ray, CT, MRI, Ultrasound or Mammo please call central scheduling at 201.915.2400.
• For cardiovascular imaging, the number is 201.915.2448.
• For physical and occupational therapy at Jersey City Medical Center, the number is 201.915.2385.
• For speech and audiology, the number is 201.915.2720.

NO EFFORT SPARED
Preventing the spread of COVID-19

We’re going beyond the recommendations of the Centers for Disease Control and Prevention, the New Jersey Department of Health and other trusted organizations to implement best practices for preventing the spread of COVID-19. Steps we’re taking:

• Stringent cleaning and disinfection of all rooms, including all equipment, surfaces and air vents
• COVID-19 testing for all surgical patients, all admitted patients and all patients with flu-like symptoms in the Emergency Department
• COVID-19 testing for doctors, nurses and other staff. Those who have a negative test will be retested to guard against false negatives
• Continued restriction of visitors based on directives from the state of New Jersey
• Active screening of team members, patients and visitors (when permitted), as they enter a facility
• Requirement for everyone who enters a facility to wear a mask or face covering
• Strict requirements for the use of personal protective equipment (PPE) with both COVID-19 positive and non-COVID patients
• Social and physical distancing measures for all people in our facilities—in all employee and patient areas
• Strict hand hygiene rules, with hand sanitizer in all employee and patient areas
• Retooling of the heating and cooling systems in our facilities to bring fresh air in from outside rather than recirculating inside air
• Continued preparation and readiness for potential future surges.
You’ve taken every precaution.
So have we.
Welcome back.

If you’ve put off any medical care due to COVID-19, please don’t delay it any longer. As a high reliability organization, we’ve taken every precaution and continue to provide health care services. We have initiated a resumption of services in adherence to all public health guidance and regulatory policies. Learn more at rwjbh.org/WelcomeBack