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AN INVENTION FOR PREVENTION

A Monmouth Medical Center nurse earns praise for the IsoPouch — an innovation in COVID-19 patient care.
Middletown resident Kathleen Malouf, who works in Pediatric Medical Stay for MMC’s Unterberg Children’s Hospital, is the inventor of the IsoPouch, a simple, disposable, transparent pouch that adheres to an isolation gown. The pouch can help health workers quickly and easily gather supplies and preserve personal protective equipment (PPE).

She joins Jennifer Stinson, nurse scientist from The Hospital for Sick Children in Toronto, to be recognized among hundreds of applicants worldwide for innovative ideas aiming to improve COVID-19 patient care.

The Johnson & Johnson Nurses Innovate QuickFire Challenge series invites the millions of nurses worldwide to submit ideas for new devices, health technologies, protocols or treatment approaches. In 2020, the sixth QuickFire Challenge invited nurses from around the world to share their novel ideas aimed at improving patient care during the COVID-19 pandemic and beyond.

In announcing the challenge, Johnson & Johnson Innovation noted that the COVID-19 pandemic has raised new patient care challenges for nurses and health workers and brought into focus the obstacles that they face around the world, every day.

“COVID-19 has brought forth many new healthcare challenges, and it was inspiring to see nurses once again applying innovative thinking with the aim to create potential solutions to improve and transform healthcare,” says Lynda Benton, senior director, Corporate Equity at the Johnson & Johnson Family of Companies. “We were thrilled to collaborate with the American Organization of Nursing Leadership (AONL) and the Society of Nurse Scientists, Innovators, Entrepreneurs & Leaders (SONSIEL) in a QuickFire Challenge that could both spotlight and support the ingenuity of nurses on the front line that we’ve seen throughout this pandemic.”

Diana Johnston, MSN, RN, NEA-BC, Vice President of Patient Care Services and Regional Chief Nursing Officer, said that together with Johnson & Johnson Innovation, AONL and SONSIEL, Monmouth Medical Center is proud to share the announcement of Malouf’s award.

“In January 2020, we became Magnet designated by the American Nurses Credentialing Center, and among the criteria for our Magnet Recognition is that our nurses must be recognized for their contributions to the hospital,” she says. “Our results in this area were among those recognized as ‘exemplars,’ and this new innovation by Kathleen is an incredible example of how our nurses continue to shine.”

Malouf notes that the idea for her invention came from a desire to support delivery of more efficient and safe patient care—a need that she said escalated significantly while caring for COVID-19 patients.

“Back in April 2020, I was redeployed from my job in Pediatric Medical Day Stay to be a nurse extender in our new COVID-19 intensive care unit,” she says. “I was accustomed to using my scrub pockets to hold everything I would need when caring for my pediatric patients, but when I shifted to caring for COVID-19 patients and wearing layers of PPE, my pockets became inaccessible and I found myself unable to hold all of the supplies I needed when visiting a patient’s room. Because of this, there would be forgotten supplies or supplies that either a team member or I would drop on the floor and therefore waste—and sometimes we had to open doors to shout for assistance with a forgotten item.”

Noting that this was not an ideal situation when she and her colleagues needed to minimize moving in and out of patient care rooms and preserve PPE, she realized they needed a simple, efficient, safe way to access medical supplies needed for patient care when they could no longer rely on safely accessing their pockets.

“I noticed a lot of my fellow nurses were having the same problem and began to think about a solution, and realized what we needed was a pocket for our isolation gowns—almost like a fanny pack—that could help store supplies, stick on and come off easily with our isolation gowns, and wouldn’t interfere with our PPE—that led me to create the IsoPouch, which is short for Isolation Pouch,” she says.

The IsoPouch fits into and supports a nurses’ natural workflow in caring for COVID-19 patients, enabling nurses to use the pouch to gather the supplies they will need before entering a patient care room. It allows them to don their PPE and stick the pouch to the gown, and, when finished, just doff the pouch with the gown.

“It’s a simple solution, but it has the potential to help nurses and other frontline health workers provide more sanitary and efficient care, especially in high-stress environments like ICUs,” she adds.

Being recognized as a nurse innovator has been incredibly meaningful, according to Malouf, who notes that she is looking forward to the mentorship and the funding to help her further develop her prototypes of the IsoPouch, begin manufacturing, explore different sizes and materials and pursue a patent.

“For the longest time, I’ve been keeping a list on my phone of ideas that could help improve patient care or our daily workflow, and when I heard about this Johnson & Johnson Nurses Innovate QuickFire Challenge from our Magnet Program Director, I thought it would be a great opportunity,” she says. “It means so much to be recognized for one of my ideas, and I’m really looking forward to the mentorship and the funding to help me further develop my prototypes of the IsoPouch, begin manufacturing, explore different sizes and materials and pursue a patent.

“Nurses are not conditioned to be thought of as innovators, but nurses are in the trenches of healthcare every day, so our insights are vital in innovation,” she adds. “We are constantly adapting, growing, changing, learning and overcoming obstacles, and I would encourage nurses with great ideas to take a leap of faith and come forward with your ideas and products, because just by believing in yourself, you can change healthcare. It’s within your power.”

To learn more about the Johnson & Johnson Nurses Innovate QuickFire Challenge awardees, visit https://nursing.jnj.com/innovate-with-us/nurses-innovate-quickfire-challenge.
WHERE WOMEN CAN TURN

The Leon Hess Cancer Center and Jacqueline M. Wilentz Comprehensive Breast Center are helping women face — and conquer — cancers of all kinds.

RWJBarnabas Health and Monmouth Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options. Call 844.CANCERNJ or visit rwjbh.org/beatcancer.
Cancer statistics can be scary: The American Cancer Society anticipates more than 56,000 new cases in New Jersey this year, including 8,300 incidence of breast cancer in females. But as chilling as those numbers sound, hospitals like Monmouth Medical Center (MMC) are boosting survival rates by using an evidence-based approach for medical and surgical procedures—including cutting-edge options for women’s cancers.

While environment and genetics can increase risk, the reality is that all women can develop cancers such as breast, cervical, ovarian and uterine. For that reason, MMC doctors advise screening as early as possible.

“Women in the 35-to-50-year-old age group have a unique opportunity to positively impact their future health through choices made today,” says Trishala Meghal, M.D., an MMC oncologist and hematologist who specializes in breast and gynecologic cancers. “These choices include following preventive healthcare habits like routine screening mammograms and pap smears, which can detect cancers in early—and often the easiest-to-treat—stages.”

TREATING BREAST CANCER

Screening mammograms and years of improved treatments have been vital to the progress in increasing breast cancer survival rates. The Jacqueline M. Wilentz Comprehensive Breast Center at MMC has been at the forefront in patient care—it offers digital and tomosynthesis mammograms, MRI, ultrasound, bone-density testing, breast-specific gamma imaging, genetic counseling, breast surgery and stereotactic breast biopsy and more state-of-the-art procedures.

Most women should get a screening mammogram starting at age 40, with annual mammograms beginning earlier for women at a higher risk of breast cancer. Patients who are at increased risk of breast cancer are screened at intervals based on their risk.

“It has been known as the place to come when you want to be cared for in a thorough and compassionate way,” says Manpreet K. Kohli, M.D., the hospital’s director of breast surgery and cancer liaison physician with the Commission on Cancer.

The Wilentz Center’s approach to compassionate care begins at screening and is shared across a multidisciplinary team that includes breast radiologists who perform biopsies, a team of pathologists, fellowship-trained breast surgeons, radiation oncologists, medical oncologists, plastic surgeons, nurse navigators, genetic counselors, nutritionists, social workers and research nurses, notes Dr. Meghal.

“Our goal is to provide cutting-edge, advanced treatments in a compassionate and supportive environment,” Dr. Meghal says. “We use tools to measure anxiety and distress in patients recently diagnosed with breast cancer. Our social workers assess not only our patients’ mental well-being, but also help connect them with support groups. Among others in the team, they are our patients’ cheerleaders throughout this journey.”

Alexander King, M.D., regional director of Breast Radiology, which encompasses MMC as well as Monmouth Medical Center Southern Campus in Lakewood and Community Medical Center in Toms River, notes that the center truly gives patients the attention they deserve. The hospital recently welcomed dedicated breast imagers Jessica Kondraciuk, M.D., and Dina Morgan, D.O., who Dr. King says “are radiologists who are dedicated breast imagers, meaning they are trained in identifying and diagnosing breast cancer.”

Once breast cancer is diagnosed, the team and the patient will determine the best course of treatment together. Gene expression profiling of the breast tumors with the use of Oncotype “has better allowed us to spare more women of chemotherapy,” Dr. Meghal says. But for patients needing chemo, treatment is administered by specialized infusion nurses.

Radiation therapy is led by oncologists Sang E. Sim, M.D., and Mitchell Weiss, M.D., both of whom have mastered innovative techniques like prone breast radiotherapy and the deep inspiration breath hold. Other options available at MMC include immunotherapy and antibody drug conjugates. According to Dr. Meghal, immunotherapy takes advantage of the person’s own immune system to help kill cancer cells. On the other hand, antibody drug conjugates are a new class of drugs which combine highly potent cytotoxic therapy with monoclonal antibodies specific to particular cancer antigens. “It spares the normal cells of the toxicity to a certain extent,” she says. These therapies are currently used in setting of triple negative breast cancer that has spread to other parts of the body and HER2 positive breast cancers.

When surgery is required, the breast surgery team uses the latest technologies, such as Magseed, which allows flexible and precise tumor localization during surgery. The Magtrace technique is a non-radioactive method to determine if the cancer has spread and “allows us to achieve the highest standard in breast cancer staging.”

“This enables the medical oncologists to better treat and prevent recurrence of breast cancer,” Dr. Meghal says. “With the recent addition of fellowship-trained breast surgeon Dr. Stephanie Ng joining Dr. Kohli, patients are able to obtain prompt surgical consultations to ensure the most expeditious care.”

TREATING GYNECOLOGICAL CANCERS

The Leon Hess Cancer Center’s Gynecologic
Oncology Program is dedicated to addressing the individual needs of each patient and focusing on the diagnosis and treatment of ovarian, uterine, cervical, endometrial and vulvar cancers, among others. Gynecologic oncologists lead monthly tumor board meetings to discuss cases and review treatment options, and they work with physicians in radiation oncology, gynecology and medical oncology to coordinate each patient’s care.

As part of the Gynecologic Oncology Program, Dr. Meghal works with Blerina Salman, M.D., who recently joined the multidisciplinary team and MMC’s chief of gynecologic oncology, Thomas Hackett, D.O.

“We are very honored to have one of the best gynecological oncologic surgeons, Dr. Hackett, and Dr. Salman on the team,” Dr. Meghal says. “Together, they have expertise in minimally invasive surgeries and robotic surgeries for uterine, cervical and ovarian cancers.”

Like breast cancer, the decline in the incidence of cervical cancer has been largely attributed to screening programs such as pap smear and HPV vaccination. Pap smears are recommended every three years starting at 21 years of age, and the frequency may range from every three to five years, depending on the type of test performed. Women at increased risk for ovarian cancer may be eligible for screening with transvaginal ultrasound, adds Dr. Meghal, who prior to her oncology training was a practicing OB/GYN.

“To study tumors, oncologists use Next-Generation Sequencing to capture a large amount of genomic information to provide molecular rationale for appropriate targeted therapy,” she says. “This technique is routinely available and used by our medical oncologists at MMC.”

While chemotherapy is unable to discriminate between malignant and non-malignant cells, targeted therapy directly targets cancer specific mutations and can also inhibit growth of blood vessels that supply the tumors. “Targeted therapies are often associated with more favorable patient outcomes, given they are significantly less likely to result in off-target side effects,” she says, noting that one type of targeted therapy—PARP inhibitors—has revolutionized the treatment of ovarian and breast cancers.

Our goal is to provide cutting-edge, advanced treatments in a compassionate and supportive environment.”

—Trishala Meghal, M.D., Monmouth Medical Center

To learn more about the programs and services of the Leon Hess Cancer Center, call 732.923.6568 or visit mmccancer.com.

ABOUT THE LEON HESS CANCER CENTER

The Leon Hess Cancer Center at Monmouth Medical Center continues to break barriers in cancer care through its state-of-the-art institute for surgical, medical oncology. It has earned accreditation from NAPBC, COC and the American College of Radiology. The cancer center offers a full spectrum of highly advanced technology that is dramatically helping cancer patients recover faster and with fewer side effects in a very compassionate and supportive environment. Additionally, through its partnership with Rutgers Cancer Institute of New Jersey, the state’s only National Cancer Institute-designated Comprehensive Cancer Center, MMC provides access to advanced treatment options including immunotherapy, precision medicine and clinical trials not available elsewhere.
Your family has no history of breast cancer. 
You still need a mammogram.

It's curious how healthy habits can become go-to excuses. But don't excuse yourself from getting a mammogram. At RWJBarnabas Health, we offer the latest in comprehensive breast health services including mammograms, 3D mammograms, genetic testing, breast surgery and more — like peace of mind. And with breast health centers conveniently located throughout New Jersey, finding us is simple, too.

Making excuses is easy. Making an appointment is easier. Schedule your visit at rwjbh.org/mammo.

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Monmouth Medical Center

We've taken every precaution to keep you safe.
So if you've put off cancer care due to COVID-19, please don't delay it any longer.