

A Publication of
MONMOUTH MEDICAL CENTER

SUMMER 2020

healthy *together*

**TOP-NOTCH
NURSING**

**MEDICAL
CARE
AT HOME**

**BEATING
BACK PAIN**

**CANCER CARE:
THE HUMAN TOUCH**

New Ways to Care

At RWJBarnabas Health, in addition to treating medical conditions, we actively engage on a variety of levels to promote the health and well-being of our communities.

That outreach takes many shapes, including healthy living classes, educational programs for seniors, partnerships with local arts organizations, providing healthy food and much more.

Social distancing and other pandemic-related restrictions haven't stopped these efforts, only changed their form. We're providing virtual support for all kinds of needs, including breastfeeding, perinatal mood and anxiety disorders, arthritis, addiction recovery and more. People who want to learn about wellness techniques, such as guided relaxation or chair yoga, can find what they need through our online programs. For a full list, visit www.rwjbh.org/events.

Meanwhile, we are creatively retooling signature events such as runs, walks and galas to include virtual participation. Our annual Running with the Devils 5K will be going virtual as well (learn more at rwjbh.org/runningwiththedevils). Our partners are also creating new events, such as the Somerset Patriots, who hosted sold-out drive-in movies at TD Bank Ballpark with proceeds going to the RWJBarnabas Health Emergency Response Fund to help local healthcare workers. To make a donation to the fund, visit www.rwjbh.org/give.

At Monmouth Medical Center, we deliver more babies than any other hospital in Monmouth and Ocean counties, and while in-person tours of our maternity unit and childbirth and parenting classes are on hold for now, we are providing plenty of ways for expectant parents to prepare for delivery without leaving home. We understand that as delivery nears, there's a lot to think about—especially the birth and bringing home a new baby. On page 23, you can learn more about our virtual bilingual programs, which are designed to answer questions from parents-to-be before labor begins. They also showcase our private labor and delivery and postpartum suites, as well as our NICU and Center for Perinatal Mood & Anxiety Disorders.

How we meet the needs of our diverse communities will continue to evolve, but our commitment to providing a broad range of culturally competent care for our communities hasn't changed—and never will.

Yours in good health,



BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

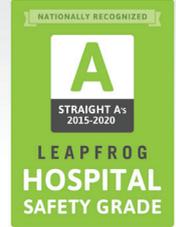


ERIC CARNEY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
MONMOUTH MEDICAL CENTER



HEALTH NEWS

**Monmouth Medical Center:
Best in the U.S.
for the 11th time
in a row**



Monmouth Medical Center | RWJBarnabas Health
Let's be healthy together.

SAFE AND HIGH-QUALITY CARE

- In July, Monmouth Medical Center (MMC) was designated as one of *Newsweek's* Best Maternity Care Hospitals 2020. The maternity care program is ranked among the best in the country, as verified by the 2019 Leapfrog Hospital Survey. The Leapfrog Group is an independent, national non-profit group run by employers and other large purchasers of health benefits.
- Last spring, MMC was awarded an A Hospital Safety Grade for 11 consecutive rating periods by The Leapfrog Group. MMC is the only hospital in the southern region to receive this grade over this period of time. The Leapfrog Hospital Safety Grade uses 28 measures of publicly available hospital safety data to assign grades to more than 2,600 U.S. acute-care hospitals twice per year.
- MMC's Leon Hess Cancer Center has achieved another three-year accreditation from the American College of Surgeons' Commission on Cancer with commendations on several standards, including oncology nursing care, accuracy of data and cancer registry education. The Leon Hess Cancer Center is the only facility in Monmouth County to be designated as an Academic Comprehensive Cancer Program. This accreditation provides assurance that patients will receive state-of-the-art services and a multidisciplinary approach to treatment, according to David Sharon, MD, Medical Director of the Leon Hess Cancer Center.

Monmouth Medical Center | RWJBarnabas Health

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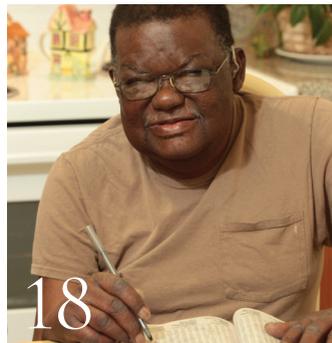
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-  RWJBarnabas Health

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*Note: This photo was taken before mask and social distancing recommendations were in place.

James Poore experienced a quick recovery from prostate cancer surgery and is back to riding his beach cruiser.

CUTTING-EDGE CANCER SURGERY



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 www.rwjbh.org/beatcancer.

A NEW ROBOTIC PROCEDURE ENABLED ONE PATIENT TO GO HOME FROM THE HOSPITAL QUICKLY.

James Poore was surprised when routine bloodwork revealed that he had high levels of prostate-specific antigen (PSA), indicating possible prostate cancer. A follow-up biopsy in September 2019 confirmed his fears. “I was shocked,” says James, 69, of Lakewood.

Thankfully, James had Stage I cancer, meaning the disease was growing slowly and was confined to his prostate, a walnut-size gland that produces fluid that carries sperm. He had a few treatment options, which included: watch and wait to see if the cancer progressed; undergo radiation therapy treatments to eradicate the cancer gradually; or have surgery to remove it immediately.

REVOLUTIONARY TECHNOLOGY

James had lost his brother to leukemia, so he didn't want to take any chances with his own health. He opted for surgery. In November 2019, he became one of the first patients at Monmouth Medical Center (MMC) to be operated on with the hospital's new robot-assisted surgery device, called da Vinci SP (Single Port). While the hospital was already using a sophisticated robotic system to perform prostate surgeries, the new device relies on a single “port,” a metal cylinder through which surgeons introduce instruments into the body, says Pierre Mendoza, MD, a urologist and robotic surgeon at MMC. “Instead of using multiple ports, which require multiple incisions, a surgeon can now make just one or two incisions,” he says. Typically, robotic prostate cancer surgery involves five or six ports. With fewer incisions, patients have a better cosmetic result, should experience less pain and may have a lower risk of infection, says Dr. Mendoza.



PIERRE MENDOZA, MD

Robot-assisted devices help surgeons perform

procedures with more precision. With the da Vinci SP system, the surgeon operates with the help of a three-dimensional, high-definition view of the surgical area. He or she controls the surgical instruments through a console, which translates the surgeon's hand movements in real time. “I expect that this new technology will improve overall outcomes for patients undergoing prostate cancer surgery,” says Dr. Mendoza. “With the enhanced visualization and precise instrumentation offered by the robotic technology, we're able to lower the risk of complications, including bleeding.” As a result, patients should have quicker recoveries, shorter hospital stays and a faster return to normal activity.

MMC is one of the few hospitals in the country and only the second in New Jersey to use this single-port robotic technology. MMC surgeons have used the da Vinci SP system in about 20 procedures so far, including prostate cancer surgeries, kidney tumor removal and kidney reconstruction. The device is also approved for certain ear, nose and throat (ENT) procedures, and it's anticipated that the technology will be approved for more types of surgery in the future.

MMC physicians have been keeping patients overnight for observation as they test the cutting-edge technology. But Dr. Mendoza predicts that in the future, most patients will have the procedure on an outpatient basis, meaning they will go home the day of the procedure. “With the single-port technique, we're now seeing patients go home immediately after surgery or in the early postoperative period, eliminating the need for an overnight stay,” he says. That's a significant improvement, since patients having traditional, open surgery stay in the hospital for five to seven days. Those who have the multi-port robotic procedure typically stay one to two days.



BEST CANDIDATES

The ideal candidates for the new single-port robotic procedure—in which robotic instruments are introduced into the body through one incision—are patients with Stage I or II prostate or kidney cancers, which haven't spread to other organs, says Pierre Mendoza, MD, a urologist and robotic surgeon at Monmouth Medical Center. Also eligible are patients who need pyeloplasty, a reconstructive procedure for kidney blockages.

In some cases, patients with more advanced cancer of the prostate or kidneys may also be good candidates for single-port robotic surgery, says Dr. Mendoza.

A SMOOTH RECOVERY

James's surgery went well, and he was ready to go home the day after the procedure. He took only a few painkillers for a day. The only side effect he experienced was mild urinary incontinence, which is associated with all prostate cancer surgeries. Nearly all patients have complete recovery of urinary control within a few months.

During his recovery, James walked his dog, Sandy May, every day. Eventually, he returned to one of his favorite activities—riding his beach cruiser. During the summer, he rode it to a nearby park several miles away. Overall, James is grateful he doesn't have to worry about the cancer any longer. “It's a big relief,” he says.

To learn more about robotic surgery at Monmouth Medical Center, call **888.724.7123**.





BATTLING SEIZURES

THE PEDIATRIC NEUROLOGY PROGRAM OFFERS STATE-OF-THE-ART TESTING AND TREATMENT FOR CHILDREN WITH EPILEPSY.

Last summer, the Pediatric Neurology Program at The Unterberg Children's Hospital at Monmouth Medical Center (MMC) welcomed two new pediatric neurologists: Rina Goldberg, MD, and Aviva Bojko, MD. With these experienced physicians at the helm, the program provides expert evaluation and treatment of children with a range of neurological problems—autism, epilepsy, attention deficit hyperactivity disorder and headaches. Drs. Goldberg and Bojko, who are board-certified in

pediatric neurology and epilepsy, specialize in treating epilepsy, which affects about 470,000 children in the U.S., according to the Centers for Disease Control and Prevention.

COMPREHENSIVE TESTING

Epilepsy is marked by seizures, which occur as a result of a disruption in electrical communication between brain cells. Most cases are mild, and children usually outgrow the condition, says Dr. Goldberg. "Many children with epilepsy are likely to

become seizure-free within two years," she says. "Epilepsy is often curable. Even when it's not, it doesn't need to interfere with leading a productive life." There are several medications available to treat it—and new ones are being introduced every few years. (See "The Right Treatment.")

Symptoms of epilepsy aren't always clear-cut (see "Surprising Signs of Epilepsy"). "One of my patients had been treated for anxiety and wasn't responding," says Dr. Bojko. "One day, she fell on the floor and experienced a convulsion. No one realized that she was actually having seizures that manifested as anxiety." The patient was admitted to the hospital, and testing showed that she was having seizures in the part of the brain



To learn more or to make an appointment with a neurology specialist at Monmouth Medical Center, call **732.923.7790**.

known as the right temporal lobe.

At MMC, testing is performed to determine whether a child suffers from epilepsy—and what type he or she has. Drs. Goldberg and Bojko use state-of-the-art equipment known as a video EEG (electroencephalogram), which involves attaching metal discs called electrodes to the scalp to monitor electrical activity in the brain. Video is used to capture any behavioral changes and body movements that occur. It enables physicians to correlate brain waves with behaviors (for instance, the eyes rolling upward could be a seizure or a tic).

MMC offers four different types of EEG, which are performed by a certified EEG technician:

- A routine EEG, which lasts for 20 minutes, with or without video
 - A four-hour video EEG, during which a technician observes a child while he or she is awake, drowsy and sleeping. “Sometimes abnormalities are only present when a child is drowsy or asleep,” says Dr. Goldberg.
 - An overnight video EEG, in which a child becomes an inpatient at MMC and is observed
 - A home EEG, in which a patient brings the equipment home for 24 to 72 hours, with or without video
- Sometimes additional tests are



From left: Jennifer Parise, Office Supervisor; Aviva Bojko, MD; Rina Goldberg, MD; Michelle Kovary, NP; and Michelle Skokowski, CMA. **Note: These photos were taken before mask and social distancing recommendations were in place.**

performed during EEG testing. The goal is to trigger abnormal brain waves, which indicate the child is likely to have a seizure. These tests include sleep deprivation; photic stimulation, in which a strobe light is used to determine if vision abnormalities could be causing seizures; and hyperventilation, which

SURPRISING SIGNS OF EPILEPSY

Seizures—which occur when an abnormal group of brain cells starts firing—can be subtle, and they aren’t always recognized by parents and pediatricians. “If your child experiences abnormal movement out of the blue—and it occurs more than once—see a neurologist,” advises Aviva Bojko, MD, a pediatric neurologist. Here are some subtle symptoms that may indicate epilepsy:

- visual hallucinations
- a humming, buzzing or splashing sound
- a rising feeling in the chest or belly, which can be misinterpreted as anxiety
- infantile spasm, in which a baby wakes up from a nap and flexes and extends his or her upper body—possibly with head nodding—and then cries. This may occur every few seconds over the course of five minutes and can be confused with colic.
- unexplained tingling in the same body part that comes and goes
- severe, unexplained vomiting at night
- abnormal movement (eye blinking, shaking in the arms or legs, head movements)
- sudden onset of body tics
- chronic inattentiveness (staring off into space for about 10 seconds multiple times a day)



THE RIGHT TREATMENT

While the cause of epilepsy is often unknown, there can be a genetic component. There are many genes associated with epilepsy, and knowing which one a child carries can help a physician choose the most effective treatment to stop seizures, says Rina Goldberg, MD, a pediatric neurologist. Treatment typically involves anticonvulsant medications. Occasionally, a child may have another condition as well, such as autism, migraine headaches or a mood disorder. Some medications can treat epilepsy and another condition simultaneously.

involves rapid breathing.

Video EEG can also be useful in evaluating children in the Emergency Department. If the test indicates a child is having a seizure, he or she can be treated right away. It can also be used to determine whether a seizure has stopped, says Dr. Goldberg. “State-of-the-art video EEG helps us to provide the best care for children with epilepsy,” she says.



TOP-NOTCH NURSES



MONMOUTH MEDICAL CENTER HAS ACHIEVED THE PRESTIGIOUS MAGNET® RECOGNITION.

Monmouth Medical Center (MMC) recently became Magnet designated and reaffirmed its commitment to excellence in healthcare, with contented nurses at its heart. The criteria for Magnet Recognition, which is conferred by the American Nurses Credentialing Center (ANCC), are rigorous. A hospital must meet 60 standards, and the review process can last for several years. “This couldn’t have been achieved without the amazing teamwork of our nursing staff,” says Eric Carney, President and CEO of MMC.

The Magnet application process starts with a written application. Once it’s been submitted, Magnet staff members conduct a site visit to “clarify, verify and amplify,” according to Julie Villa, MSN, RN, CCRN-K, Magnet Program Director at MMC. Last November, the Magnet team visited MMC to meet with nurses, physicians, members of the community and staff members. “We are so proud of the team,” says Diann Johnston,

MSN, RN, NEA-BC, Vice President of Patient Care Services and Regional Chief Nursing Officer. “We had three days of back-to-back meetings, and our nurses really did shine.”

A SUCCESSFUL SITE VISIT

Among the criteria for Magnet Recognition: Nurses must be recognized for their contributions to the hospital. “We recently honored one of our medical-surgical nurses for solving a workflow problem,” says Villa. Another standard: a Chief Nursing Officer who leads organizational change that affects the entire hospital. “Diann co-led a committee that helped drive hand hygiene compliance, which has virtually eliminated our hospital-acquired infections,” says Villa. “Our results were actually recognized as ‘exemplars’ during the Commission of Magnet conference call.”

The Magnet surveyors also toured the nursing units, spoke with the nurses and physicians, and met with the medical staff and the executive team to evaluate the

Top: Employees at the January 15 Magnet Recognition celebration. Above, from left: Julie Villa, MSN, RN, CCRN-K, Magnet Program Director, and Diann Johnston, MSN, RN, NEA-BC, VP of Patient Care Services. **Note: These photos were taken before mask and social distancing recommendations were in place.**

“A COMMITTEE HELPED DRIVE HAND HYGIENE COMPLIANCE, WHICH HAS VIRTUALLY ELIMINATED OUR HOSPITAL-ACQUIRED INFECTIONS”

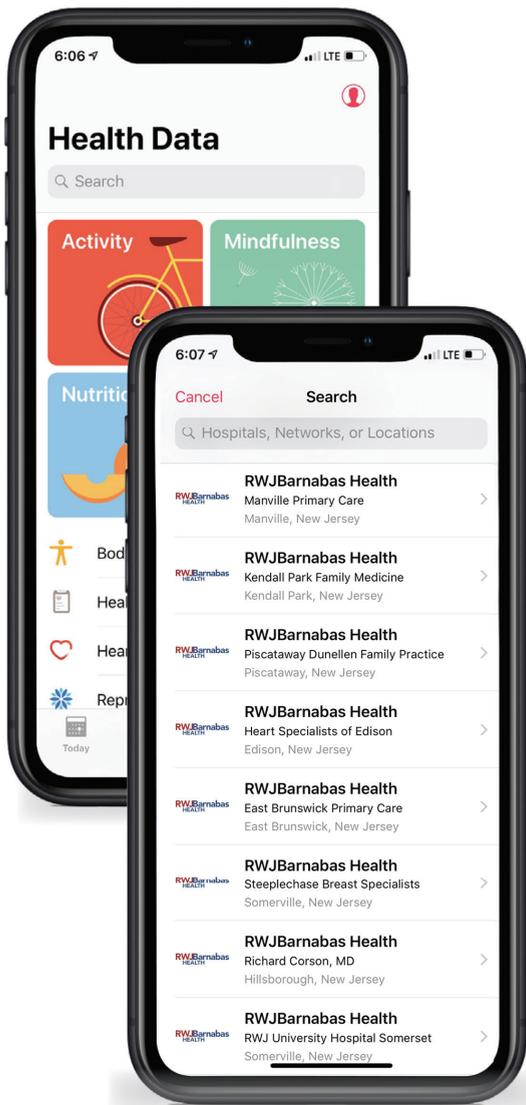
physicians’ rapport with the nursing staff. They also met with the nursing executive team and managers to get a sense of their communication. “ANCC wants to know whether the leaders’ strategic goals are incorporated into the staff nurses’ day-to-day work,” says Villa.

Ultimately, the site visit feedback was positive. “The Magnet appraisers said we had a lot to be proud of,” says Villa. “They told us that our staff engagement far exceeds that of other Magnet organizations.” In January, more than 100 employees gathered in MMC’s auditorium when ANCC called them with the good news—the organization’s first Magnet designation with seven exemplars (outcomes or stories that exceed the expectations of a Magnet organization). “I can’t put into words the pride we felt,” says Villa. “We couldn’t have anticipated a better outcome.”

To learn more about Monmouth Medical Center, visit www.rwjbh.org/monmouth.

YOUR HEALTH, AT YOUR FINGERTIPS

Now you can manage your healthcare right from the Apple Health app on your iPhone. You can easily keep track of allergies, conditions, immunizations, vitals and more, and consolidate your health records in a timeline—all in one place. Here's how:



1

If you don't have one yet, create a username and password for the RWJBarnabas Health Patient Portal (www.rwjbh.org/patientportalenroll).



2

Download the Apple Health app from the Apple Store. (You'll need an iPhone running iOS 11.3 or later.)



3

Be sure your iPhone is password-protected, ideally with two-factor authentication.



4

Go to the Health Records section of the Health app, search for RWJBarnabas Health, and log in.



5

After you log in once, your health records will start to appear in the Health app, and will update automatically.

Download the Apple Health app at the Apple Store and access your RWJBarnabas Health medical records at www.rwjbh.org/patientportalenroll.





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

patient’s home,”
 Silva says.

Communicate constantly. This is essential in two ways. First, the nurse navigator is the central clearinghouse for information provided from the many specialists on

a cancer patient’s care team—medical oncologists, radiation oncologists, surgical oncologists, social workers, nutritionists and more. The navigator can ensure that no aspects of treatment fall through the cracks and that the patient receives the highest quality of care.

Second, the navigator can follow up to be sure a patient understands what’s happening.

“Doctors do a great job of explaining, but often you can see the patient’s mind drift off as the person starts to worry about things like, ‘Who’s going to pick my kids up from school?’” Silva explains. “A navigator can talk to the patient later about what he or she understood and relay the necessary information over again in smaller bits so it’s easier to process.”

Set priorities. “Sometimes what feels urgent to a patient is not clinically urgent, but our nurse navigators have the ability to know what is truly time-sensitive,” Silva explains. “For example, recently a young man needed to see a specialist as soon as possible. Based on the navigator’s intervention, he was able to get in to see the doctor in one day.”

Save time. Often, a patient needs several medical procedures—for example, an echocardiogram and a port insertion before chemotherapy treatment can begin. A nurse navigator can arrange for multiple appointments to be scheduled at the same facility on the same day. “A navigator is key to making sure all the pieces fit together and to minimizing the time a patient needs to spend at a facility,” Silva says.

“An oncology nurse navigator is a critical part of a patient’s cancer care team,” she continues. “He or she is the kind of person who can anticipate what’s needed and make it happen—and who has a relentless desire to help patients.”

CANCER CARE: THE HUMAN TOUCH

HOW ONCOLOGY NURSE NAVIGATORS HELP PATIENTS

Patients who seek care through the RWJBarnabas Health (RWJBH) Oncology Access Center have a big advantage: They get connected to an oncology nurse navigator who acts as their problem-solver and supporter before, during and after treatment. The oncology nurse navigator becomes an important member of the patient’s healthcare team and serves as his or her advocate while compassionately supporting their physical, emotional and spiritual needs from diagnosis through survivorship.

“When you choose RWJBarnabas Health for your cancer care, you’re not only getting quality care, but someone to walk beside you on your treatment journey,” explains Jeanne Silva, RN, Director, Nurse Navigation, Oncology Services at RWJBH. “Moreover, we coordinate all of our resources, so that if a patient has a problem—be it financial,

social or medical—the navigator can help the patient get the benefit of resources from throughout the health system.”

When a patient makes an appointment with an RWJBH cancer provider, the oncology nurse navigator will follow up with the patient the next day. “The navigator asks if there are any questions about the upcoming appointment and goes through some of the specifics of what will happen,” Silva says.

That’s just the beginning. Oncology nurse navigators, who are located at each RWJBH facility, also do the following:

Identify possible barriers to treatment. Does the patient have financial or insurance concerns? Does the patient have family or friends who can provide support? Is there a transportation issue? The nurse navigator can identify and help with these problems right away. “In one case, we

were able to get a patient to see a specialist located 70 miles away from the



To contact the Oncology Access Center,
 call 844.CANCERNJ (844.226.2376).



Sam Jarmer made remarkable progress at Children's Specialized Hospital and continues doing well with outpatient therapy.

'THE SKY'S THE LIMIT'



Children's Specialized Hospital®
An RWJBarnabas Health facility

AFTER A TRAUMATIC NECK INJURY, INTENSE PHYSICAL THERAPY HELPS A TEENAGER MOVE AGAIN.

July 24, 2019: a grayish, unremarkable day on the beach at Ocean Grove. Lifeguard Sam Jarmer, 16, dives into the water to cool down, but hits a hidden sandbar.

Soon after, Sam's mom, Jessica, sitting on the beach several blocks away, sees a call from Sam's boss come in on her phone. "I immediately knew not only that he was injured; I could feel that it was bad," she remembers.

When he hit the sandbar, Sam suffered a burst fracture in the C6 vertebra near the base of the neck and lost the ability to move his arms and legs. A fellow lifeguard jumped in to lift his head above the water, and a trauma team was dispatched from a nearby hospital. Sam was strapped to a backboard, and six of his fellow lifeguards carried him to a waiting ambulance.

"He kept saying, 'I'm so sorry, Mom,' because we were supposed to go on vacation the next day," Jessica remembers.

Sam was in surgery for six hours while the burst vertebra was replaced with a titanium cage. He spent the next five days

recovering at the hospital. At that point, he could occasionally raise his arms a bit, but nothing more.

It was time for intensive inpatient rehabilitation and therapy at Children's Specialized Hospital (CSH) in New Brunswick. "I remember feeling that this would be the place that would make it all better," Jessica says.

MAKING PROGRESS

The first piece of good news came from Michele Fantasia, MD, Director of the Spinal Cord Injury Program at CSH. Her evaluation determined that Sam's injury was "incomplete," meaning that Sam still had some motor and sensory function below the level of injury. "As I say with all incomplete injuries, 'The sky's the limit,'" Dr. Fantasia told Jessica.

Four months of recreational, physical and occupational therapies followed. "The occupational therapists made modifications

for everything," Jessica remembers. "They kept constructing things in some kind of magical workshop they had." There was a special fork to help Sam relearn how to feed himself, a device to help him brush his teeth and more.

"Everyone at Children's really helped me when I was at one of the lowest points in my life with my injury," says Sam. "They just showed compassion in all of the support and love that they gave me." On November 19, Sam was discharged from CSH.

Today, Sam continues with a rigorous program of outpatient physical therapy. During the COVID-19 lockdown, he did his exercises via telemedicine for a few weeks. His older brother, home from college, was there to help.

Sam continues to work on his core muscles, arms and fingers. He now has muscle control in all parts of his legs and continues to work on walking independently. "I'm staying positive," he says. "I know it will take time and I'll be back to where I was, but for now I've just got to keep pushing forward."

To learn more about Children's Specialized Hospital, call **888.244.5373** or visit **www.childrens-specialized.org**.

At Children's Specialized Hospital, we provide world-class care for children and young adults who face special health challenges across the state of New Jersey and beyond. Our locations in Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Toms River and Warren treat everything from chronic illnesses and complex physical disabilities like brain and spinal cord injuries to developmental and behavioral issues like autism and mental health.



[ANYTOWN] A musical with a mission: “Anytown,” an original educational musical, tells the story of Hope, a high-achieving high school student who becomes addicted to opioids after a soccer injury. The show has toured middle and high schools in New Jersey and was developed through a partnership with George Street Playhouse in New Brunswick, RWJBH and the Horizon Foundation of New Jersey.



[BEAT BUS] They've got the beat: Students in Long Branch, Asbury Park and Neptune have experienced a state-of-the-art mobile recording studio to create their own music thanks to the Beat Bus, a collaboration between Lakehouse Music Academy and the Asbury Park Music Foundation that is supported in part by RWJBH. In addition to providing a means of creative expression and new ways to collaborate, the Beat Bus helps prepare students for success in the digital age.



[ASBURY PARK MUSIC + FILM FESTIVAL]

Making (sound) waves: The Asbury Park Music + Film Festival, of which RWJBH is a Founding Partner, celebrates the role of music in film, as well as the shore town's long history as an incubator of great music. It benefits underserved children in Asbury Park and surrounding areas by providing music education, instruments and social connection opportunities. **Note: All photos on these pages were taken before the COVID-19 pandemic and social distancing guidelines.**



SUPPORTING ARTS FOR THE HEALTH OF IT

PARTNERSHIPS WITH LOCAL ARTS GROUPS HELP PROMOTE THE WELL-BEING OF COMMUNITIES.

Research has shown that the arts stimulate creativity, ease stress, promote joy, improve memory and enhance education. That's why RWJBarnabas Health (RWJBH), with its strong commitment to creating and sustaining healthy communities, partners with local arts organizations.

"We understand the clear and beneficial impact that taking part in the arts has on health and well-being," says Michael Knecht, Senior Vice President of Strategic Marketing and Communications for RWJBH. "These partnerships are an important way for us to help people in our communities and also support local grassroots organizations."

RWJBH supports a broad range of arts events. Music, dance and film are high on the list: RWJBH has sponsored the Asbury Park Music + Film Festival; the Bridge Arts Festival

in Bayonne; the Montclair Jazz Festival; the Central Jersey Jazz Festival; Maplewoodstock Music & Art Festival; the "Sounds of the City" free outdoor concerts presented by the New Jersey Performing Arts Center in Newark; and the SOMA Film Festival in South Orange and Maplewood.

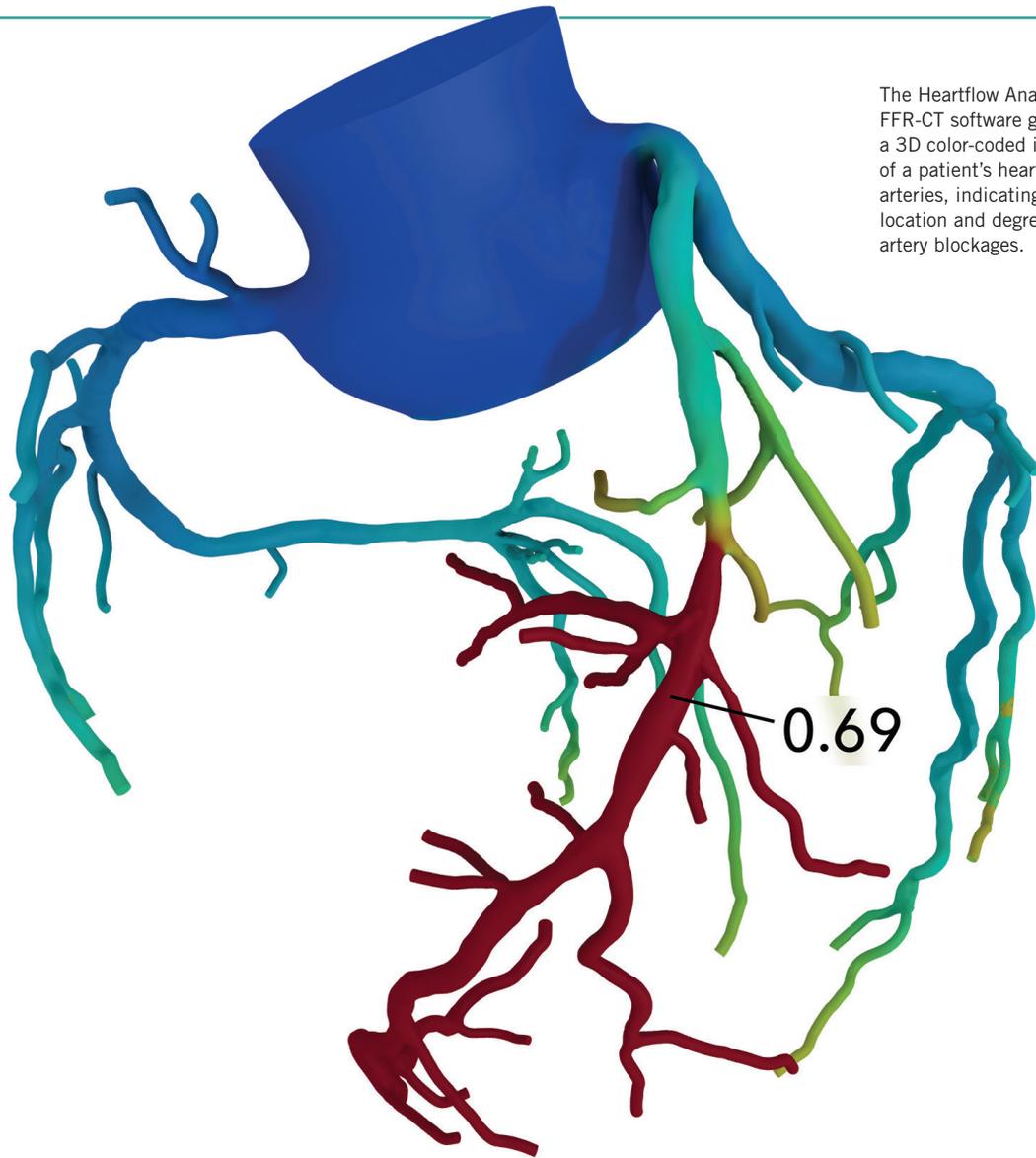
Drama has a place as well. RWJBH is a sponsor of the New Jersey Repertory Company, a professional nonprofit theater in Long Branch with a mission to develop and present new plays. And in a proactive move to help stem the opioid epidemic among young people, RWJBH has partnered with the George Street Playhouse in New

Brunswick and the Horizon Foundation of New Jersey to create "Anytown," a one-hour musical that demonstrates how addiction can happen to anyone. The show has toured to schools throughout the state, followed by Q&A discussions with students.

"These partnerships are all part of the RWJBarnabas Health commitment to reaching out beyond the walls of our medical centers to help people get and stay healthy in all kinds of ways," says Knecht. "And they're wonderful examples of how meaningful collaboration with local organizations can make an impact throughout the state."

To learn more about RWJBarnabas Health corporate partnerships, visit www.rwjbh.org/corporatepartners.





The Heartflow Analysis FFR-CT software generates a 3D color-coded image of a patient's heart and arteries, indicating the location and degree of artery blockages.

A HIGH-TECH LOOK AT THE HEART

**DOCTORS CAN NOW USE ARTIFICIAL INTELLIGENCE FOR A NONINVASIVE,
HIGHLY ACCURATE TEST FOR CORONARY ARTERY DISEASE.**

“After the test, they told me I was a walking time bomb,” says Ray Duarte, 50.

As the Regional Director of Information Technology at Monmouth Medical Center Southern Campus and at Monmouth Medical Center, Ray had volunteered to be among the first for an advanced noninvasive technology known as Fractional Flow Reserve Computed Tomography (FFR-CT). This test evaluates how well blood flows through a patient’s heart arteries and determines whether—and where—blockages exist.

“I had upper back pain on and off, for which I was seeing a chiropractor with no relief,” says Ray. “I did have high cholesterol, which I was addressing with improved diet and exercise, and a family history of heart disease.

“However, due to my active lifestyle and symptoms that were not typical for heart disease, my primary care doctor told me he would never have recommended so much as a stress test for me,” Ray recalls.

But the FFR-CT test showed that Ray’s right coronary artery was 99 percent blocked. Without the test and subsequent treatment, such a blockage could have led to a heart attack at any time.

FINDING THE BLOCKAGES

The powerful, artificial intelligence-based FFR-CT test is used to diagnose coronary artery disease (CAD)—blockages in the blood vessels supplying the heart. CAD is a leading cause of death in the U.S., accounting for 600,000 to 700,000 deaths

per year. It can cause shortness of breath, chest pain (typical and atypical) and heart attack, and can lead to death.

When a patient has chest pain or suspicious symptoms, the usual

noninvasive ways of detecting inadequate blood flow include an **electrocardiogram (ECG)**, which uses electrical signals; a **stress test**, in which blood flow is tested while a patient exercises, via ECG or an **echocardiogram (ECHO)**, which uses ultrasound waves; or a **nuclear stress test**, which uses radioactive dye and an imaging machine. In addition, a **computed tomography (CT) scan** can show calcium deposits that could narrow arteries.

Prior to FFR-CT technology, however, the only way physicians could see for certain whether coronary arteries were blocked was to do an invasive procedure, known as **cardiac catheterization and angiogram**. In this procedure, a special dye is injected through a long, thin, flexible tube (catheter) that is threaded through an artery in the leg up to the arteries of the heart.

If a blockage is found, the cardiologist can decide whether to correct it during the angiogram—for example, by inserting a small tube (stent) to keep the artery open—or to send the patient for bypass surgery.

ARTIFICIAL INTELLIGENCE

While a crucial and sometimes lifesaving technology, an angiogram often shows no significant blockages, according to Rajesh Mohan, MD, MBA, FACC, FSCAI, an interventional cardiologist and Chief Medical Officer at Monmouth Medical Center Southern Campus (MMCSC).

That’s where noninvasive FFR-CT comes in. Using “machine learning,” an application of artificial intelligence, the software compares images from existing CT scans of a patient’s heart to an ever-growing database of tens of thousands of other CT images. This large database helps physicians analyze the likelihood that any specific blockage could cause harm and also provides direction about treatment.

“The FFR-CT technology creates a three-dimensional image of blood vessels and color-codes them based on

the severity of the blockage,” says Dr. Mohan. “It then also shows how each blockage impacts blood flow to the heart.” Armed with this knowledge, a physician can decide whether lifestyle changes, medication, a stent or surgery is the best course of action.

“With this information, we can give our patients a more definite diagnosis and have confidence in the best treatment plan without putting them through unnecessary invasive procedures,” says Dr. Mohan. “Its accuracy is unlike that of any other noninvasive tests available to us.”

IS FFR-CT FOR YOU?

Since CAD is a common type of heart disease, many patients can benefit from this advanced technology.

However, FFR-CT is not available everywhere. Specialists at MMCSC are among the first in the state to use it, and MMCSC is the earliest hospital in the state to utilize it in the Emergency Department and throughout the hospital, as well as for outpatients.

“The test needs to be done appropriately, according to criteria set by the American College of Cardiology,” says Dr. Mohan. “Patients need to have symptoms—for example, chest pain or shortness of breath on exertion, which a lot of people actually disregard.

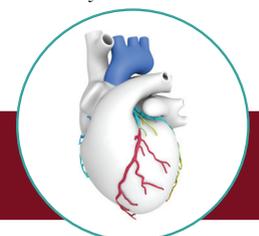
“If these exist in association with some of the coronary risk factors like smoking, hypertension, diabetes, high cholesterol and family history, then I think that patient is an ideal candidate for this study.”

As for Ray Duarte, a stent procedure opened his blocked artery, his back pain has resolved and medication is controlling his cholesterol. He is back to an active lifestyle.

Says Dr. Mohan, “We at Monmouth Medical Center Southern Campus are excited and privileged to introduce such a cutting-edge, revolutionary technology.”



RAJESH MOHAN, MD



Your heart doesn’t beat just for you. Get it checked. To learn more about FFR-CT or to find a cardiac specialist, call **888.724.7123** or visit **www.rwjbh.org/heart**.



MIND, BODY AND HEALTH

WHY CARING FOR THE WHOLE PERSON IS THE FUTURE OF HEALTHCARE

At his yearly physical, a patient is found to be 35 pounds over ideal body weight. He has hypertension, and his lab results indicate prediabetes. His doctor urges him to change his diet, be more active and lose the extra weight to reduce his risk for stroke, heart disease and diabetes.



FRANK A. GHINASSI, PhD

The patient acknowledges that he should. But at his next yearly physical, he's still 35 pounds overweight.

In that all-too-common scenario lies the possibility for a new approach to healthcare,

one that simultaneously provides help for behavioral as well as physical issues. "The goal is to help people make better choices—about things like what they eat, how they exercise and about alcohol and nicotine—and thereby avoid many chronic health disorders," says Frank A. Ghinassi, PhD, ABBP, Senior Vice President, Behavioral Health and Addiction at RWJBarnabas Health (RWJBH), and President and CEO of Rutgers University Behavioral Health Care.

"Through integrated care delivery, we want to treat both body and mind, preferably in the same location and during the same healthcare visit," he says.

In the case of the overweight patient, for example, the primary care provider will look to determine the cause of the

patient's inability to lose weight. "Is the issue genetic? Does the patient have a low metabolism?" asks Dr. Ghinassi. "Or is there a mood disorder that's affecting energy level and motivation?"

Once barriers to a healthier lifestyle are identified, doctors and behavioral health specialists can work together to develop solutions tailored to the patient's specific needs.

AN INTEGRATED APPROACH

"Often, people with behavioral and addiction disorders are treated 'from the neck up' and are referred to dedicated behavioral health offices," says Dr. Ghinassi.

But that approach can create roadblocks. "Maybe the patient can't get an appointment for three weeks, or he doesn't like the idea of walking into a building that says 'counseling services' or 'psychiatry' on the sign," he explains.

To provide coordinated care, RWJBH and Rutgers University Behavioral Health Care are bringing services closer together. "At many of our primary care and pediatric delivery sites, primary care physicians work with psychologists or social workers who are located in the same office suite or in the same building," says Dr. Ghinassi. "A patient can be offered a chance to meet the physician's behavioral health colleague even before leaving the initial appointment, find out what might be possible and perhaps find it easier to commit to following up with a subsequent call or visit." The next evolution of care at RWJBH and Rutgers University Behavioral Health Care will be to have a clinical social worker or psychologist located right in the same office space as the primary care provider.

Integrated healthcare is the future, Dr. Ghinassi believes. "People tend to come to a healthcare system when they're in crisis—they need coronary artery surgery, for example, or their depression makes them unable to function in daily life. Of course, we'll always be there for those people," he says.

"However, we're evolving to an equal focus on early screening and intervention. Together, RWJBarnabas Health and Rutgers University Behavioral Health Care are on a mission to improve the health and life satisfaction of patients and families throughout New Jersey."

For help accessing mental health services, call the RWJBarnabas Health Access Center at **800.300.0628**.





DMITRY OLEYNIKOV, MD, FACS

THE MOST ADVANCED SURGICAL CARE

THE NEW HEAD OF SURGERY AT MONMOUTH MEDICAL CENTER EXPLAINS HIS COMMITMENT TO PERFORMING MINIMALLY INVASIVE PROCEDURES IN A SAFE ENVIRONMENT.

In July, Monmouth Medical Center (MMC) welcomed Dmitry Oleynikov, MD, FACS, the new Chairman of the Department of Surgery. He is a nationally recognized expert in gastrointestinal surgery, complex hernia repair and revisional bariatric surgery. Over the course of his career, Dr. Oleynikov has published more than 200 peer-reviewed articles and more than 250 abstracts. Here, he explains his goals and how patients will benefit.

What attracted you to Monmouth Medical Center?

As the Chief of Minimally Invasive Surgery at the University of Nebraska Medical Center, I performed a variety of robotic surgeries, including gallbladder removal and complex hernia repairs. I

also co-founded a company that develops miniature robots for surgical use. In recent years, I was working on clinical trials to obtain U.S. Food and Drug Administration (FDA) approval for a next-generation robot. I was excited about the opportunity to return to clinical practice and work at a large, innovative academic medical center.

What are miniature robots?

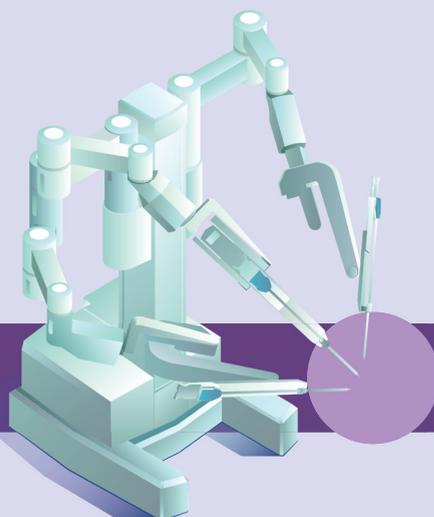
Several different robots are currently used for surgery, but they're large, expensive and can't be moved from room to room. I created a handheld, portable robot that allows surgeons to perform minimally invasive abdominal surgeries in any hospital or surgery center. It's small, easy to control and weighs just two pounds (comparable robots weigh around 2,000 pounds). It's also expected to be less expensive than the ones currently in use. With this robot, which is being studied for colon surgeries, the surgeon operates through a single incision in the belly button. This leads to a quicker recovery and a lower risk of infection. I'm currently developing similar devices for gallbladder, hernia and prostate surgeries.

How is MMC ensuring safe elective surgery?

Prior to surgery, patients have a telehealth visit with the perioperative team and are tested for COVID-19. During an operation, we wear personal protective equipment to reduce the risk of infection. We also use advanced disinfecting technology to sanitize our equipment. Finally, we try to perform operations on an outpatient basis so patients can recover at home.

What are your goals as the new Chairman and how will patients benefit?

I'm committed to performing surgery in a safe and minimally invasive way. Nearly every subspecialist at MMC is using top-of-the-line robotic technology to perform prostate, gallbladder, spine and uterine surgeries. (See the story on page 4.) In addition, we aim to provide value-based surgical care. We track patient outcomes to determine how we can provide the best care for the lowest risk and cost. MMC is a leader in patient safety, excellent outcomes and innovation, and I'm delighted that I have the opportunity to take this impressive surgical program to the next level.



To learn more, visit www.rwjbh.org/welcomeback.



HEALTHCARE AT HOME

PATIENTS ARE MONITORED AND LEARN
HOW TO MANAGE SYMPTOMS THROUGH
AN INNOVATIVE PROGRAM.

When Norris Mack, 71, was discharged from Monmouth Medical Center (MMC) after being treated for chronic obstructive pulmonary disease (COPD), he didn't have to return to the hospital shortly afterward for follow-up visits, as patients often do. Instead, an MMC staff member came to his home in Long Branch to ensure he was recovering well.

Through a new telemedicine platform called Vivify Health, MMC patients like Norris can be monitored remotely for COPD, a lung disease that obstructs airflow and causes shortness of breath, coughing and wheezing. Remote patient monitoring is available through the Healthy Lives Program, which is designed to help patients with serious illnesses such as COPD, heart failure, heart attack and pneumonia manage their symptoms and reduce their need for emergency care and hospital readmissions. A multidisciplinary team of medical professionals—physicians, nurses, nutritionists, pharmacists and social workers—monitors patients and helps them become more involved in their care through education and consistent follow-up.

In Norris's case, a respiratory therapist visited him at home two to three times a week for a month to check on his breathing, blood pressure, weight and the level of oxygen in his blood. During each visit, Norris answered questions about his health on an iPad. The information was sent electronically to nurses at MMC, who determined whether Norris needed medication adjustments, closer monitoring, a follow-up call, further testing or care at the hospital.

In addition to COPD, Norris suffers from kidney failure and undergoes dialysis three to four times per week. So he appreciated not having to leave his home for additional medical appointments. "The Vivify Health program is very helpful," says Norris. "It has helped keep me going and has saved me some trips to the hospital."



CHANDLER PATTON, MD



With the help of a home monitoring program, Norris Mack, a COPD patient, has been able to stay out of the hospital and enjoy favorite activities, such as doing crossword puzzles and spending time with his friend and roommate, Mary.

REDUCING READMISSIONS

The home monitoring program began in November 2018 after medical staff members noticed that COPD patients made frequent hospital visits, says Chandler Patton, MD, Medical Director of the Healthy Lives Program and Medical Director of Pulmonary and Critical Care at MMC. "Some patients would come to the hospital, be treated, get better and then rapidly return to the hospital within a few days or weeks," says Dr. Patton. "We wanted to try to break that cycle."

The hospital began sending a respiratory therapist to the homes of COPD patients who had been recently discharged to keep tabs on them. The therapist typically sees patients in their homes for up to a month after hospital discharge to ensure their recovery is on track. "This effort has been very successful," says Dr. Patton. "Patients appreciate that they don't have to come back to the hospital, and there's been a decrease in readmissions." Another benefit: Patients don't have to worry about cancelling a doctor's appointment if they're not feeling well.

Prior to the introduction of the Vivify

Health program, about 25 percent of patients who had been hospitalized for COPD were readmitted to the hospital within 30 days. Now, that figure has dropped to 10 percent. Over the course of a year, only five COPD patients out of 50 who used the home monitoring program had to be rehospitalized, says Carmen Manzo-Goral, APN-C, a Healthy Lives nurse practitioner.

EXPANDING THE PROGRAM

The home monitoring program was so successful with COPD patients during the first year of implementation that it was expanded in November 2019. "When we saw the hospital readmission rates drop, we decided to include the patients who can't come see us because they have pneumonia or heart failure," says Denise Yaman, DNP, Director of the Healthy Lives Program.

Norris used the Vivify Health program in July and October 2019 after being hospitalized for COPD. Both times, he did not need to be readmitted within 30 days of discharge. Manzo-Goral credits the program with sparing him a lot of unnecessary suffering. "It's kept him out of the hospital several times," she says.

To learn more about the Healthy Lives Program at Monmouth Medical Center, call **732.923.6702**.



A woman with dark hair and glasses, wearing a grey hoodie, is smiling while painting the seat of a white wooden chair with teal paint. She is holding a paintbrush and a can of paint. The background is a workshop or home office with various items on shelves.

GOODBYE, BACK PAIN

**A CUTTING-EDGE SURGERY ENABLED ONE PATIENT
TO RETURN TO HER ACTIVE LIFESTYLE QUICKLY.**

Johanna Robinson is back to hand-painting furniture after robotic spine surgery.

For more than a year, the pain in Johanna Robinson's back was so debilitating that she struggled to get out of a chair. "If I sat for a while, it was hard to get up," says Johanna, 63, of Belmar. "I had a lot of pain and stiffness, and I could barely walk."

In July 2019, Johanna was diagnosed with degenerative disc disease, in which the spinal discs—which act as shock absorbers between the spinal bones—break down, and spinal stenosis, in which the spinal canal narrows, putting pressure on nerves. Her symptoms, which included back pain that sometimes radiated to her left leg, improved after receiving corticosteroid injections, but the treatment didn't bring lasting relief.

Johanna consulted spine surgeons Marc Menkowitz, MD, and Steve Paragioudakis, MD, at Monmouth Medical Center (MMC). They recommended surgery using the hospital's new robotic system for spine procedures. MMC is only the second hospital in New Jersey to use the Globus Medical ExcelsiusGPS robot for minimally invasive spine surgery. The robot can be used to treat damaged discs, scoliosis and other back problems.

The ExcelsiusGPS system combines a robotic arm with computer-assisted navigation. CT scan and X-ray images of the spine are taken prior to a procedure. These images are used to create a surgical plan, which helps the physician guide the robotic arm to a specific area of the spine.

The surgeon is able to view the procedure on a monitor, which provides real-time feedback. With this technology, the procedure is more accurate and less invasive than traditional surgery, according to Dr. Menkowitz. "We can be precise to the millimeter," he says. "Once we navigate to where we want to be in the spine, the system locks us into the surgical pathway."

Patients benefit from this high-tech surgical system in several ways. Since the procedure is so precise and involves small incisions, there's less blood loss, tissue damage and scar tissue. Patients recover more quickly and with less pain than with traditional spine surgery, says Dr. Menkowitz. As a result, hospital stays tend to decrease by about a day, on average.



From left: Spine surgeons Marc Menkowitz, MD, and Steve Paragioudakis, MD, perform minimally invasive procedures using a new robotic system, which helps patients recover more quickly and with less pain. **Note: This photo was taken before mask and social distancing recommendations were in place.**

Another advantage: The patient is exposed to less radiation during the surgery because fewer X-rays need to be taken to guide the procedure, says Dr. Menkowitz.

Since MMC introduced the ExcelsiusGPS in October 2019, the system has been used in more than 20 spine surgeries performed by Drs. Menkowitz and Paragioudakis. They are seeing positive results. "This is the wave of the future," says Dr. Menkowitz. "I think all spine surgeries will be done this way eventually."

A FAST RECOVERY

Last October, Johanna had a three-hour surgery that involved two procedures. One was a lumbar laminectomy, which involved removing spinal bone that was putting pressure on spinal nerves. The other was a spinal fusion to stabilize her back. "The surgery went very well," says Dr. Menkowitz. "Johanna's recovery has been significantly quicker compared to patients who had the standard procedure. A week after the surgery, she wasn't taking any pain medication, and she was walking without any assistive devices."

Johanna spent three nights in the hospital (she has a heart condition, which lengthened her stay by about a day) and was thrilled that she was able to get up and move around the day after surgery. She took narcotic medication in the hospital for a few days to ease the postoperative pain, but when she got home she only needed to take over-the-counter acetaminophen for a few days.

After the operation, Johanna wore a back brace for support and participated in physical therapy for two months to strengthen her abdominal muscles and improve her cardiovascular fitness. She's relieved that she's able to walk on the treadmill without shooting pain in her left leg. "I'm a lot better now," she says. "I have no trouble walking and climbing the stairs, and I can get up much better after sitting. No one would know that I had surgery."

In fact, Johanna was feeling so well that she took an eight-day Caribbean cruise in January. "I'm so glad I had the robotic surgery because my recovery was much faster than it would have been otherwise," she says.

To learn more about robotic surgery at Monmouth Medical Center, call **888.724.7123**.





WALK YOUR HEART OUT

ONCE AGAIN, RWJBARNABAS HEALTH IS TEAMING UP WITH THE AMERICAN HEART ASSOCIATION TO RAISE FUNDS FOR LIFESAVING CARDIOVASCULAR RESEARCH.



Your heart doesn't beat just for you. Get it checked. To reach a Monmouth or Ocean County cardiac specialist, call **888.724.7123** or visit www.rwjbh.org/heart. To register and learn more about the Virtual Shoreline Heart Walk, visit www.shorelineheartwalk.org.

Bill Arnold, MHA, President of the RWJBarnabas Health Southern Region, which spans Monmouth and Ocean counties. The Southern Region includes Community Medical Center, Monmouth Medical Center and Monmouth Medical Center Southern Campus and an expansive network of primary and specialty care offices and outpatient centers.

On Sunday, October 25, the American Heart Association (AHA) will hold the Virtual Shoreline Heart Walk to raise \$175,000 for cardiovascular research. Among the goals: to prevent strokes, correct heart defects in babies and find better ways to treat high blood pressure. The AHA is currently providing more than \$3.2 million in funding for cardiovascular research in New Jersey.

This year, RWJBarnabas Health Southern Region President Bill Arnold, MHA, will chair the walk, which will be virtual to ensure the health and safety of all participants. "We're thrilled Bill Arnold is leading our 2020 campaign," says Tara Novak, Regional Director, Shoreline NJ, at the AHA. "With his involvement, we have the potential to reach new heights of success and community impact. We are grateful for the support of RWJBarnabas Health. Many of the system's leaders serve on our boards and committees or chair events and campaigns."

APART BUT TOGETHER

Anyone can participate in the virtual event by walking in their neighborhood or engaging in a physical activity of their choice at home. Participants will be able to join an event web page on the day of the Heart Walk and take part in activities. As always, people can participate individually or as part of a team. Some families team up to honor a heart attack or stroke survivor or memorialize someone who died from cardiovascular disease. The AHA encourages participants to create their own fundraising web pages to request donations from friends and family.

Area residents will benefit from the walk in several ways. Those who participate in the event will receive information on healthy lifestyle habits and nutrition. In addition, people will benefit from the enhanced cardiovascular education and care funded by the event. "I'm honored to serve as chair of the Virtual Shoreline Heart Walk, which brings together Monmouth and Ocean counties," says Arnold. "It's critical to support the AHA's mission of improving cardiovascular health—especially during this extraordinary time."



During three-hour virtual childbirth preparation classes, Ana M. Pinto, MSN, RNC, CBC, discusses the stages of labor and other important details.

RECOGNITION FOR SAFE MATERNITY CARE

Monmouth Medical Center (MMC), which delivers more babies than any other healthcare facility in Monmouth and Ocean counties, is the only hospital in the region that's recognized by The Leapfrog Group for meeting its quality and safety standards on three key maternity metrics—rates of C-section, episiotomy and early elective delivery—for two consecutive years. MMC is also a Level III Regional Perinatal Center, meaning the hospital provides subspecialty care for complex maternal medical conditions, obstetric complications and fetal conditions. In addition, in July, the hospital was designated as one of *Newsweek's* Best Maternity Care Hospitals 2020 based on data from the 2019 Leapfrog Hospital Survey. "We've built one of the safest obstetrical and gynecologic services in New Jersey," says Robert A. Graebe, MD, Chairman of Obstetrics and Gynecology at MMC. "We continue to expand and upgrade our facility and services to match our commitment to quality care and patient safety."

MMC is taking all appropriate precautions to continue to ensure the highest quality of care, protection, support and comfort for maternity patients. Most recently, the hospital introduced a "drive-through" COVID-19 swab testing option for all expectant mothers who are 38 weeks or later. This allows for weekly testing until their delivery.

For now, MMC's maternity classes are only offered virtually. "Patients who participate in the virtual classes like the fact that they can review the educational materials on their own time," says Pinto. "They're happy to get the information they need at home."

GETTING READY FOR BABY

EXPECTANT PARENTS ARE BENEFITING FROM VIRTUAL CLASSES AND ONLINE HOSPITAL TOURS.

When the pandemic began, expectant parents began calling The Eisenberg Family Center at Monmouth Medical Center (MMC) to find out if childbirth preparation classes were being offered virtually. In response, the hospital began using the InJoy program to educate expectant parents about childbirth preparation, newborn care and breastfeeding.

MMC provides two classes on each topic per month. They are offered in the evenings and on weekends, and they are given in English and Spanish. Participants receive instructional booklets prior to each class to prepare for a Zoom session with a certified instructor from MMC. During each three-hour virtual childbirth preparation session, couples learn about the stages of labor, breathing and relaxation techniques, pain management and how partners can assist during labor. Virtual breastfeeding

and newborn care classes last about two hours. During breastfeeding sessions, certified lactation consultants discuss the importance of nursing and review the techniques that will help ensure a successful experience. In newborn care classes, participants learn about diapering, swaddling, bathing and infant safety measures, including CPR and choking prevention.

CONVENIENT CHILDBIRTH EDUCATION

Classes are limited to four couples. "This gives them the time they need to ask questions," says Ana M. Pinto, MSN, RNC, CBC, Coordinator of Obstetrical Services. "The sessions are very interactive, and they are more personal because the groups are smaller than the in-person ones." Couples can also tour The Eisenberg Family Center online at their convenience.

For more information on delivering at Monmouth Medical Center or taking the hospital's virtual tour or classes, contact Ana M. Pinto, MSN, RNC, CBC, at **732.923.5024** or ana.pinto@rwjbh.org.





Pictured: Alan Shamah

“ You all make a difference, you all contribute, and you show fearlessness and self-sacrifice. You are all HEROES and we all clap for you.

–Alan Shamah

From the moment Alan Shamah arrived with COVID-19 symptoms at Monmouth Medical Center, he felt reassured even though it was mid-April and the emergency room was busy from the pandemic. “I cannot tell you how comforting this experience was just getting processed,” Shamah said. “I was brought to my own room without waiting very long. Many people checked on me, and this calmed my fears and decreased my discomfort.”

All healthcare workers were attentive and at no time did they rush their visits to Alan’s bedside. Rather, they displayed an extreme sense of caring. “When I needed something, at the push of a button, someone would come across the intercom or stop in, regardless of the time of day. 3 a.m. does not matter here. The staff was really here for me.”

By watching Shamah constantly, checking his labs, and keeping him updated, doctors were able to report that he was on the road to recovery. “What impressed me most about the doctors at MMC was that they all collaborated with my own doctors in my recovery. They all worked together despite the fact that so much information was changing. They made the best decisions for me, getting me to where I am today: healthy.”

For more information on our grateful patient program, visit monmouthgiving.org

**The POWER of
THANK YOU**