Rising to the Challenge

During the COVID-19 pandemic, changes in healthcare have been unprecedented. Fighting a new and unpredictable virus and making it safe for patients to receive all types of care under these extraordinary conditions have become our top priorities.

We’re proud of how RWJBarnabas Health has risen to these challenges, as stories in this issue show. From new mothers who need help with breastfeeding to seniors looking for advice on how and whether to have social interactions, we’re here for you with support and guidance.

We offer telehealth services for children and adults through RWJBarnabas Health TeleMed, which makes virtual visits available for many issues in both primary and specialty care. If an in-person doctor visit is required, know that all physicians in our RWJBarnabas Health Medical Group have implemented additional safety standards for their offices, including social distancing, mask wearing, intensified disinfection protocols, and COVID-19 screening of patients and staff.

Of course, in the event you or a loved one need to go to the hospital, you can rest assured that each facility in the RWJBarnabas Health system has taken every precaution for the safety of patients, visitors and team members.

As a high reliability organization, Monmouth Medical Center Southern Campus (MMCSC) has implemented numerous safeguards and taken extra precautions to provide a safe environment for our patients and visitors. Safety is an all-encompassing effort and a priority for Eric Carney, the new President and Chief Executive Officer at MMCSC (for more details about the executive transition, see the article on pages 4 and 5). We’ve taken everything the medical profession has learned about COVID-19 and implemented best practices throughout the hospital, with everything we do a building block aimed at keeping our hospital safe. And as we implement all of these safeguards, we remind you that what has not changed is the concern we have always shown for our patients’ wellness, as we remain focused on ensuring that the physical environment is always prepared for your visit.

At RWJBarnabas Health, caring for the community is our mission and our passion. Please take good care of yourselves by wearing a mask when needed, washing your hands frequently and practicing social distancing.

Yours in good health,

BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

ERIC CARNEY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS AND MONMOUTH MEDICAL CENTER

Monmouth Medical Center Southern Campus complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. For more information, see link on our home page at www.rwjbh.org/monmouthsouth. MMCSC cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al 732.363.1900. MMCSC konfòm ak lwa sou dwa sivil fèdèl ki aplik li ou l laj. ATANSYON: Si w pa kreyol Ayisyen, gen sèvis ed pou lang ki disponib gratis pou ou. Rele 732.363.1900.
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THANKS TO DR. FRANK VOZOS, MONMOUTH MEDICAL CENTER AND MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS WILL KEEP THE COMMUNITY HEALTHY FOR DECADES TO COME.
A new executive team

In September, two top leaders at RWJBarnabas Health Southern Region hospitals who have worked closely with Monmouth Medical Center Southern Campus (MMCSC) Chief Executive Dr. Frank J. Vozos were named to new executive roles at the Southern Campus facility. Eric Carney, President and CEO of Monmouth Medical Center (MMC), assumed the same role at MMCSC. Philip Passes, DO, Vice President of Practice Integration, RWJBarnabas Health Southern Region, became Chief Administrative Officer for MMC and MMCSC. “Eric and Dr. Passes have worked closely with Dr. Vozos for the past several years as part of our Southern Region team,” says Bill Arnold, MHA, President of the RWJBarnabas Health Southern Region. “I’m confident that this new leadership structure will further strengthen MMC and its Southern Campus and expand pathways to outstanding care for our patients.”

Clockwise, from far left, p. 4: Frank J. Vozos, MD, FACS, at Monmouth Medical Center (MMC) with then Chief Operating Officer Bill Arnold, MHA, who now serves as President of the RWJBarnabas Health Southern Region. Dr. Vozos speaks at the 125th anniversary celebration of MMC. Dr. Vozos at the dedication of Monmouth Medical Center Southern Campus (MMCSC) with New Jersey Senator Bob Singer. Dr. Vozos, a surgeon who trained and practiced at MMC, in an OR construction area at the hospital during an ambitious expansion project. Dr. Vozos at the dedication of MMC’s Gamma Knife Center.

NOTE: These photos were taken before mask and social distancing recommendations were in place.

After 40 years of service, Frank J. Vozos, MD, FACS, Executive Vice President, RWJBarnabas Health, and Chief Executive, Monmouth Medical Center Southern Campus (MMCSC), will retire at the end of this year. “Dr. Vozos has dedicated his career to caring for the health of our communities,” says Bill Arnold, MHA, President of the RWJBarnabas Health Southern Region. “As a surgeon, community leader, hospital administrator and friend, Dr. Vozos has not only personally provided outstanding patient care to many but has successfully worked to improve how we deliver care on all levels.”

Dr. Vozos began his career at Monmouth Medical Center (MMC) in 1975, when he completed a five-year residency program in general surgery. He became a fellow of the American College of Surgeons and a diplomate of the American Board of Surgery. For two decades, Dr. Vozos served as director of the general surgery residency program at MMC. He was also president of the hospital’s medical and dental staff. In 1998, he became executive director of MMC and only the second physician in New Jersey to take on a top hospital leadership role.

A few of his many notable achievements:

- Dr. Vozos led MMC’s growth in cancer services. He oversaw the dedication of the Leon Hess Cancer Center, the Jacqueline M. Wilentz Comprehensive Breast Center and the Cheryl L. Diamond Cancer Care Pavilion. To help families cope with the disease, he formed a partnership with the international nonprofit Cancer Support Community.

- MMC’s Eisenberg Family Center—which has the largest number of deliveries in Monmouth and Ocean counties—expanded. The hospital added a new postpartum pavilion, an additional newborn nursery and an expanded Hirair Grade is the only hospital rating focused exclusively on hospital safety.

- Over the years, Dr. Vozos has been active in many local service organizations, including the American Red Cross, Prevention First, Boy Scouts of America, a host of area Chambers of Commerce and Long Branch Tomorrow, a volunteer organization that originally created the redevelopment plan for the Long Branch oceanfront. He has had the privilege of being honored by many of these organizations. He notes a strong allegiance to the local police and fire departments and first aid squads, and he takes pride in his appointment during the 1990s as a “police surgeon” in recognition of his support of the law enforcement community.

“Thanks to Dr. Vozos’s outstanding leadership, Monmouth Medical Center and Monmouth Medical Center Southern Campus will continue to thrive,” says Arnold. “We are proud to build on his many successes.”

and Anna Hovnanian Foundation Regional Newborn Center.

- Dr. Vozos oversaw the dedication of the Geriatric Emergency Medicine Unit and the Unterberg Children’s Hospital at MMC.

- After becoming president and CEO of MMCSC in 2016, Dr. Vozos expanded and enhanced the hospital’s programs and services. He oversaw the development of the unique James and Sharon Maida Geriatrics Institute. He also managed the establishment of the Jacqueline M. Wilentz Comprehensive Breast Center at MMCSC.

- Under his leadership, MMCSC placed within the top 10 performers in New Jersey and the top five performers in the RWJBarnabas Health system for several key patient satisfaction areas.

- In 2019, MMCSC received an A safety grade from The Leapfrog Group. Updated twice a year, in the spring and in the fall, the Leapfrog Hospital Safety Grade is the only hospital rating focused

Monmouth Medical Center Southern Campus | RWJBH.ORG/MONMOUTHsouth
After having a lumpectomy for an early breast cancer, Nancy Stevens is back to enjoying her favorite activities.
In the fall of 2019, Nancy Stevens, 78, was surprised when a routine mammogram revealed a suspicious area in her left breast. “There was no cancer in my family,” says the antique dealer in Smithville. “I didn’t know what to do. I had heard that RWJBarnabas Health had good breast care, so I called and was referred to Dr. Schulman.” Nancy saw breast surgeon William Schulman, MD, at Monmouth Medical Center Southern Campus (MMCSC) in November. “I liked him immediately,” she says. “He is soft-spoken, and he made me feel comfortable.”

Dr. Schulman recommended a core biopsy guided by ultrasound. Nancy had the procedure in early December, and it showed that she had invasive ductal carcinoma in her left breast. The tumor was only 8 millimeters and was considered Stage I (an early cancer).

PERSONALIZING TREATMENT

When formulating a treatment plan for Nancy, Dr. Schulman took into account the fact that she has a serious lung condition called bronchiectasis, in which the airways are scarred. As a result, she’s vulnerable to lung infections. Dr. Schulman advised that Nancy have a lumpectomy, in which the tumor is removed. Her lymph nodes didn’t need to be biopsied, and she wouldn’t need radiation therapy after surgery. “We tailored the treatment to Nancy so that it protected her from the side effects that can be associated with aggressive treatment,” says Dr. Schulman. “With a more aggressive surgery, she would be exposed to anesthesia for a longer period of time. Also, radiation therapy can have an impact on the lungs. Clinical studies show that the approach we took is highly effective in women in Nancy’s age group.”

Nancy had the lumpectomy the day after Christmas. “I had no pain,” she recalls. “The nurses were positive and reassuring. I went home the same day, and life went on.” Nancy had no complications or postoperative problems, says Dr. Schulman. He sent her to a radiation oncologist to confirm that she didn’t need radiation therapy, and the doctor agreed that it wasn’t necessary. He also referred her to Seth Cohen, MD, Regional Director of Oncology Services for the RWJBarnabas Health Southern Region and a medical oncologist. Since Nancy’s tumor was hormonally sensitive, Dr. Cohen prescribed an estrogen-blocking therapy, which she will take for five years to reduce the risk of a recurrence.

MINIMIZING SIDE EFFECTS

In previous years, a patient with Nancy’s type of tumor might have undergone lymph node biopsies and radiation therapy in addition to the lumpectomy and hormone therapy. “We’ve learned through landmark studies that evaluation of lymph nodes and postoperative radiation therapy may not have an impact on well-being and survival in patients like Nancy,” says Dr. Schulman. “Sometimes, more treatment isn’t necessarily better for a patient. By treating Nancy’s cancer in a less aggressive way, she experienced few side effects, and her chances of survival are excellent.” With the type of tumor Nancy had, her 10-year survival rate is 90 percent, says Dr. Schulman. She was able to avoid the possible side effects of radiation therapy, which include thickening of the breast skin, shrinkage of the breast and chronic pain. Removing lymph nodes can lead to chronic pain and swelling in the arms, says Dr. Schulman. “As long as a patient is willing to take hormone therapy, he or she won’t jeopardize survival,” he adds.

Today, Nancy is cancer-free and happy the experience is behind her. She will see Dr. Schulman three to four times per year for the first two years after her treatment, and then once every six months in the third through fifth years. After that, she’ll see him once a year. “I’m relieved this is over,” she says. “I didn’t think breast cancer could happen to me. I felt comfortable and secure at Monmouth Medical Center Southern Campus. It was great that I didn’t have to go to New York or Philadelphia to get top-notch treatment.”
Alexander King, MD, a board-certified radiologist, was named to the newly created position of Regional Director of Breast Radiology for the Southern Region, which encompasses Community Medical Center, Monmouth Medical Center and Monmouth Medical Center Southern Campus.

Under your leadership, will there be any changes to breast imaging services?

We’re expanding our hours and plan to add new imaging locations to make mammography more accessible. We’re also assessing each patient’s lifetime risk of developing breast cancer based on factors such as family history. Using this information, we’ll create a personalized screening plan for each patient. For women who have a 20 percent or higher lifetime risk of developing breast cancer, annual breast MRI screening is recommended in addition to annual mammograms. All of our recommendations are in line with the American College of Radiology and the Society of Breast Imaging.

What is your vision for the breast radiology service?

Our vision is to enhance our team approach to providing comprehensive breast cancer care for all patients—close to home. For example, if a patient who comes in for a mammogram needs a biopsy and is diagnosed with cancer, we can connect him or her with a surgeon and a medical oncologist in our vast network of cancer specialists. We provide integrated cancer care, from diagnosis to treatment to survivorship.

What differentiates your breast imaging services from those at other hospitals?

We see breast health as a unique medical specialty and give it the attention it deserves. Our radiologists are dedicated breast imagers, meaning they are trained in identifying and diagnosing breast cancer. Also, we can refer patients to healthcare providers and oncology support specialists within the RWJBarnabas Health system. We’re streamlining the process of follow-up care by using nurse navigators, who offer guidance to patients.

Medical oncologist Seth D. Cohen, MD, was named to the newly created position of Regional Director of Oncology Services for the Southern Region.

What do you hope to achieve in your new role?

All three hospitals have the same goal: to provide the most advanced comprehensive and compassionate care for patients, including cutting-edge therapeutics and clinical trials. A team of medical oncologists works closely with our surgical oncologists and radiation oncologists in the Southern Region. We harness their individual expertise in various cancers, such as breast, lung, colorectal and lymphoma, to deliver top-notch care to patients.

How do patients benefit from clinical trials?

Clinical trials are research studies used to find better ways to prevent, diagnose and treat cancer. In the Southern region, we have more than 30 trials underway right now in collaboration with Rutgers Cancer Institute of New Jersey, the state’s only National Cancer Institute-designated Comprehensive Cancer Center.

What are the advantages of receiving treatment at one of the Southern Region hospitals?

We know that cancer doesn’t travel well, so it’s important that patients have access to the most advanced treatment options, such as clinical trials, close to home. There’s no need for them to travel to a large city to receive the best cancer care. In addition, we provide genetic testing to individualize a patient’s treatment plan. If they need to be admitted to the hospital, their doctor is nearby.
A senior citizen who lives alone had become depressed. Her family said she seemed confused when they spoke to her on the phone. Should she allow visitors into her home to help her, or was the risk of contagion too great?

An elderly couple was being urged to attend the wedding of a dear family member, and they very much wanted to be there. Should they go?

These and similar questions are being debated daily by older adults, who are among the groups most at risk for severe illness from COVID-19. "When stay-at-home recommendations began, many assumed that there would be a clear end date and kept a stiff upper lip as they socially isolated," says Jessica Israel, MD, Senior Vice President of Geriatrics and Palliative Care for RWJBarnabas Health and a member of RWJBarnabas Health Medical Group.

However, as questions about transmission and treatment persist, it's become clear that life will not be going back to "normal" anytime soon—and prolonged isolation has health risks as well. "Today, older adults need to evaluate the risk of having an interaction vs. the risk of not having it," says Dr. Israel. "And we all need to be open to the fact that there's no one-size-fits-all answer for everybody."

THREE QUESTIONS
To weigh out the pluses and minuses of a social interaction, Dr. Israel advises, ask yourself three questions:

"What are the risks of what I'm thinking about doing?" Will people be masked, will there be the ability to wash or sanitize hands, and will commonly touched surfaces be sanitized? Will the event be indoors or outdoors?

"How am I feeling emotionally?" Are you emotionally OK, or is staying inside affecting your ability to live your life successfully? For example, do you have a hard time getting motivated to get out of bed to begin your day? Have you lost interest in talking to people on the phone or in doing things you could enjoy, such as sitting outside?

"How am I feeling physically?" Is your health good, or do you have trouble with normal activities, such as walking from room to room? Have you been putting off care for a health condition?

Based on these considerations, Dr. Israel advised the family of the depressed older woman that she should have visitors. "It was becoming an unsafe situation, and when it comes to depression, you can't solve everything with medication," she says. "The family had been trying to protect her by staying away, but she needed to see them in person, with all appropriate safety measures taken, of course."

As for the elderly couple who were invited to the wedding, Dr. Israel asked them whether all guests would be masked and practice social distancing. The answer was no. "I had to tell them that I thought it would be too unsafe for them. They actually felt relieved," she says.

"People come to me all the time and say, 'Can I go to the hairdresser? Can I go to a restaurant that has outdoor seating?'" says Dr. Israel. "I tell them there may not be a great answer. No activity is without any risk at all, so you have to consider what you can do to mitigate that risk."

The one activity that's definitely off-limits for now is hugging grandchildren, says Dr. Israel. "We're still learning, but it looks like young people spread the virus very easily, even if they show no symptoms at all," she says. "I hate to say it, but hugging grandkids should be on hold for a while longer."

To learn more about healthcare for seniors at RWJBarnabas Health, visit www.rwjbh.org/seniorhealth.
VIRTUAL SUPPORT IS HELPING NEW AND EXPECTING MOMS GET THROUGH THE PANDEMIC SAFELY.

NEW MOTHERS, NEW CHALLENGES
The experience of being pregnant and having a baby is different during the era of COVID-19. In-person baby showers aren’t happening. Pregnant women aren’t seeing friends and coworkers on a daily basis, so they can’t have the kind of “Is this normal?” discussions that tend to come up between expecting and experienced mothers.

After the baby is born, many women have to go without help from other family members because of travel restrictions or fears of bringing COVID-19 into a home with a newborn.

“Many families are trying to navigate the emotional, physical and social challenges often experienced after the birth of a baby without the traditional support of friends and family,” says Suzanne Spernal, Vice President for Women’s Services at RWJBarnabas Health (RWJBH). “We’ve been hearing that pregnant women feel anxious because they’re isolated and not able to experience pregnancy and new motherhood as they’d imagined they would.”

For many women, help has come in the form of virtual support groups, facilitated by experts at RWJBH hospitals. Specific topics vary from hospital to hospital, but two groups are open to all: virtual support for mood and anxiety disorders (PMADs) and virtual support for breastfeeding.

“One of the most important things women learn in these groups is that the things they’re feeling are normal and they can talk about them,” Spernal says. “We’ve created comfortable, safe virtual spaces for expecting and new mothers.”

MANAGING ANXIETY

Women may come to a PMAD group feeling that they’re alone, but in fact, PMAD—which used to be called postpartum depression—affects 1 in 5 pregnant and new moms. Though a very real illness, it is temporary and treatable, and peer support has been shown to be a powerful help.

In the group, new and expecting mothers may express their sadness or anger, or feelings of being overwhelmed, without feeling judged.

“The conversations these women are having are so meaningful,” Spernal says. “Some of them feel so isolated and sad at the beginning of a session, and by the end they’re actually smiling and have been given a handful of resources they can immediately tap into as soon as the session is over.”

Conversations can continue in a private Facebook community, and telehealth visits with a behavioral health specialist can be arranged. “We’ve been able to open the doors for more women to get support for mood and anxiety disorders because the virtual groups have eliminated geographic barriers,” Spernal says.

BREASTFEEDING BASICS

Breastfeeding is good for both mother and baby, but it comes with many challenges—from latching-on to milk supply, tongue-tie, pain, pumping, diet, weaning and more. In virtual breastfeeding support groups, women connect with other new mothers as well as International Board-Certified Lactation Consultants to get the answers they need.

Lactation consultants allow moms to take the lead by raising issues that are of concern to them and provide their professional advice and insight as needed.

“When I got home from the hospital, I missed the support of the great lactation consultants and nurses there,” says Lauren Tran, 34, of South Orange, who had a baby boy in mid-June. “I wondered if it would feel silly to do a breastfeeding group virtually instead of in person. But that feeling went away quickly, and we are building camaraderie and getting to know each other just as we would if we were in person.”

“Knowing I’m not alone in challenges I’m dealing with is so helpful,” says Shlomit Sanders, 33, of Elizabeth, who gave birth in April. “There are breastfeeding behaviors in babies that first-time moms have no idea about—for example, a feeding position that works great one time and not at all the next. It’s so comforting to normalize these behaviors.”

“At RWJBarnabas Health, we’ve made ourselves available to all of the pregnant and parenting women in our communities, and we welcome their questions,” Spernal says. “We want them to have a great experience, even as they take all the measures needed to stay safe and healthy during the pandemic.”

To learn more about virtual breastfeeding support, visit www.rwjbh.org/breastfeedingsupport.

To learn about the PMAD group, visit www.rwjbh.org/PMADsupport. To learn more about maternity care at RWJBarnabas Health, visit www.rwjbh.org/maternity.
RADIATION ONCOLOGY:
IT TAKES A TEAM

PATIENTS IN THE RWJBARNABAS HEALTH SYSTEM HAVE ACCESS TO THE MOST ADVANCED TREATMENTS FOR CANCER.

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.
Radiation oncology, which uses precisely targeted doses of high-energy radiation to eliminate cancer cells, is an effective treatment for a wide range of cancers.

Within the field, though, are numerous treatment options, and that leads to crucial questions. Would a patient’s cancer respond best to external beam radiation therapy, in which high-energy rays are directed from the outside into a specific part of the body? Or internal radiation, which involves putting a source of radiation inside the patient’s body? And within those two categories, which specific treatment is most likely to be more effective for a particular patient?

Cancer patients in New Jersey can be assured that they have the best minds in the field on their cases, thanks to the unique partnership between RWJBarnabas Health (RWJBH) and Rutgers Cancer Institute of New Jersey, the state’s only National Cancer Institute-Designated Comprehensive Cancer Center.

“All of the radiation oncology doctors at the 11 hospitals in the RWJBarnabas Health system and Rutgers Cancer Institute consult with each other. We don’t hesitate to pick up the phone,” says Bruce Haffty, MD, FACR, FASTRO, FASCO, Chair of Radiation Oncology for Rutgers Cancer Institute and for Rutgers Robert Wood Johnson Medical School and New Jersey Medical School.

“Moreover, we all know what technologies are available throughout the system. So if a patient at one of our cancer centers needs a treatment that’s available at Rutgers Cancer Institute or any RWJBarnabas Health facility, we ensure that treatment can be offered based on the individual patient needs. If a clinical trial at any of those places could benefit a patient, his or her oncologist will know about it and the patient will have access to it,” explains Dr. Haffty, who is also the Associate Vice Chancellor for Cancer Programs.

“In this way, we can provide a seamless continuity of advanced care that’s of great benefit to our patients,” he says.

**CONSISTENT CONNECTION**

Physicians at RWJBH and Rutgers Cancer Institute represent a vast array of cancer specialties. “A physician can call a specialist at another RWJBarnabas Health hospital to consult on any case,” Dr. Haffty says. “For example, I get calls all the time about cases in my specialties, breast cancers and head and neck cancers. The same kind of discussions go on among experts in gastrointestinal, brain, blood cancers—all kinds of subspecialties within radiation oncology.”

Such consultations aren’t left to chance. Cancer specialists at RWJBH and Rutgers Cancer Institute meet regularly to discuss their cases. “We’ve implemented peer-review planning sessions, where every new patient case at each facility is peer-reviewed by multiple physicians,” says Dr. Haffty. “Physicians share their ideas about what treatments might best benefit the patient—perhaps Gamma Knife, CyberKnife, proton therapy or other sophisticated radiation therapy techniques. Very few health systems have all of these options available.”

Physicians and patients also have the benefit of the most up-to-date national research and the latest clinical trials. As one of just 51 U.S. institutions designated a Comprehensive Cancer Center by the National Cancer Institute, Rutgers Cancer Institute is a leader in conducting cancer research and translating scientific discoveries into novel treatments.

“The partnership between Rutgers Cancer Institute and RWJBarnabas Health is unique in that it offers the latest technology available in combination with all of our subspecialty expertise,” says Dr. Haffty, “and anybody who walks in the door anywhere in the system has the benefit of all of it.”

Your cancer care is too important to wait. Our cancer centers and our hospitals have taken every precaution as we continue to provide the most advanced cancer care. To schedule an appointment with one of our cancer specialists, call 844.CANCERNJ (844.226.2376).
At 8 years old, Aiden Shanklin is wheelchair-dependent, has a sensory processing disorder and functions at the level of a 1-and-a-half-year-old.

He also loves to laugh, listen to the acoustic guitar, ride horseback and swim or run his hands under water. Aiden is doing these things and living his best possible life, thanks to the loving care of his family and the expertise of doctors at Children’s Specialized Hospital (CSH).

“Children’s Specialized Hospital has provided us with such excellent care. I couldn’t ask for a better team for Aiden,” says his mother, Nicole. “They have given us the opportunity to provide him the best quality of life that we can.”

QUESTIONS ANSWERED

When Aiden was 9 months old, Nicole became concerned because he had trouble holding his head up and had no trunk control. “When I would go to lift him, it felt as if I were picking up a rag doll,” she says.

A pediatrician diagnosed Aiden with cerebral palsy (CP), a disorder of movement, muscle tone or motor skills caused by damage to or abnormal development of the brain. CP symptoms often include exaggerated reflexes, floppy or rigid limbs and involuntary motions.

Aiden lived with this diagnosis for six years. Then he was taken to see Adam Aronsky, MD, a developmental and behavioral pediatrician at CSH in Mountainside. Dr. Aronsky felt that Aiden’s clinical picture did not align with those of CP patients and suggested that he undergo genetic testing. That led to the discovery that Aiden actually had a GRIN2B mutation, a genetic disorder with symptoms very similar to those of CP.

“Because the symptoms of CP and GRIN2B-related syndrome are so similar, our treatment plan has not changed,” Nicole says. “However, the new diagnosis has provided a lot of answers to my questions.”

Aiden now sees three physicians at the CSH Mountainside location who work together to help with his treatment plan. Dr. Aronsky treats Aiden’s bone and muscle function. JenFu Cheng, MD, a physical medicine and rehabilitation physician (physiatrist), provides Botox injections that assist with the parts of Aiden’s body that have high muscle tone (spasticity). Neurologist Andrea Richards, MD, assesses any episodes he may have. For example, when there was concern that a laughing condition was a sign of a seizure, she was able to determine that it was just part of Aiden’s personality.

“This experience has taught me that it’s OK to ask questions, even if you think they don’t make sense or seem silly,” Nicole says.

“I encourage other families going through similar experiences to go with their gut, ask questions, research everything you can and share your experiences with others. You never know who will benefit from your story.”

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. We 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 conditions. We have convenient locations throughout the state: Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Toms River and Warren.
If someone says their heart is broken, you instantly know what that means: The person is feeling deep grief, usually from the loss of a love relationship or the passing of a loved one. The pain is emotional, but it can feel—and be—physical as well.

In fact, cardiac specialists know extreme emotional stress can actually “break” a heart’s functioning by reducing the ability of heart muscles to pump, thereby depriving the brain and organs of oxygen-rich blood. This is called stress cardiomyopathy, also known as “broken heart syndrome,” and cases have been on the rise.

“Recent data show an increase of four times the number of stress cardiomyopathy cases compared to before the COVID-19 pandemic,” says Fadi Chaaban, MD, Director and Chief of Cardiology at Clara Maass Medical Center and a member of RWJBarnabas Health Medical Group.

**HOW IT HAPPENS**

“The mechanism for triggering stress cardiomyopathy is not completely understood, but it’s possible that there is a link between the brain and the heart where you have a high activation of neurons in the brain stem,” says Dr. Chaaban. “These in turn secrete a tremendous amount of stress hormones and neuropeptides, which could be captured by the receptors of the heart, leading to a temporary dysfunction of an area in the heart.” However, the COVID-19 virus attacks the heart in many ways that are still not completely understood, he notes.

Stress cardiomyopathy has the same symptoms as a heart attack: chest pain, shortness of breath, sweating, dizziness, nausea and vomiting, weakness and pounding of the heart. In addition to being triggered by intense emotion, it can be caused by significant physical stress, such as a severe asthma attack or a broken bone.

“Many times, a patient comes in with what presents as a heart attack, and we discover it was actually stress cardiomyopathy only after further testing, such as an echocardiogram or angiogram,” says Dr. Chaaban.

Women, especially those over 50, seem to be more at risk of emotion-caused stress cardiomyopathy. When men have the condition, it is more often caused by physical stress.

**MANAGING STRESS**

“We don’t know why some people get stress cardiomyopathy and others don’t, but what we can tell patients is that they are highly likely to fully recover,” says Dr. Chaaban. “We generally need to provide supportive treatment for several weeks, with medications to help improve blood pressure, remove fluid from the lungs and prevent blood clots.” For very sick patients, a ventilator or an intra-aortic balloon pump may be needed.

Managing stress is the most important thing anyone can do to protect the heart, he says. “The best way to de-stress yourself is to live a healthy life—stay active, eat well and maintain a healthy weight as well as a positive attitude,” he says. “Life is stress, but you can learn not to take things personally and become more resilient to whatever life throws at you.”

The most urgent message Dr. Chaaban has is for people to pay attention to their symptoms. “If you’re stressed out and suddenly feeling chest pain, don’t ignore it,” he says. “Get checked as quickly as possible. Call 911 or go to the Emergency Department. That’s a controlled environment where we can help you and support you until the stress has passed and your heart has healed.”

Your heart doesn’t beat just for you. Get it checked. To find a cardiac specialist at RWJBarnabas Health, call 888.724.7123 or visit www.rwjh.org/heart.
Not long ago, virtual doctor visits—appointments conducted via video or phone—were relatively rare. Now they’re commonplace, and they’re here to stay. “The pandemic gave telehealth a jump-start, but I believe it will become a permanent part of the healthcare delivery system,” says Andy Anderson, MD, President and Chief Executive Officer of the combined medical group of RWJBarnabas Health and Rutgers Health. “We are seeing ever-increasing use of our RWJBarnabas Health TeleMed services.”

Telehealth can be used for primary and routine medical care, as well as for some aspects of specialty care. “There’s still enormous value in face-to-face appointments and physical examinations, and that will never go away,” says Dr. Anderson. “But telehealth has many uses, both for convenience and for making and maintaining the doctor-patient connection.” Here, he explains why.

**Can a wellness visit be done through telehealth?**

A good deal of preventive screening can be done this way. A doctor can ask, “Have you had your mammogram? Have you scheduled your colonoscopy? What kind of diet are you consuming? Are you sleeping well?” Patients can self-report their weight and, if they have a blood pressure cuff at home—as many patients do—their blood pressure numbers. A doctor can screen for cognitive issues, give referrals, advise on a plan for self-care and recommend future tests and appointments.

Telehealth is not, clearly, a full substitute for an in-person visit and examination. But it is a valuable way for people to get many of their healthcare needs met.

**Besides wellness visits, what other kinds of primary care can be conducted virtually?**

If you have an acute issue—for example, a cut or sprain, or a possible urinary tract infection—telehealth is a way to sort out the next steps, such as a doctor office visit, trip to urgent care or a prescription.

Also, aspects of care for chronic conditions like diabetes, heart failure and high blood pressure can be managed via telehealth. A doctor can ask about blood sugar levels, about symptoms and about medication side effects. The physician can see certain symptoms over video, such as swelling in legs.

Chronic disease management should be done in a combination of in-person and telehealth visits. But many patients have been very happy to have routine check-ins take place in a video visit, sparing them time they’d have to spend traveling to the doctor’s office.

**When an in-person visit isn’t practical, why not just have a telephone call?**

We encourage a video visit whenever possible, and fortunately, the technology for having one has become very simple to use. There’s a huge visual component to communication—body language, expression. It’s important to see the patient and have them see you when you’re counseling or coaching them, or asking about side effects.

**Are there any special issues for children?**

For kids, much of their preventive care has to do with getting vaccines on schedule, so they’ll need in-person visits more than most adults.

**Can telehealth be used for COVID-19 screening?**

Absolutely. In fact, it’s a very important screening tool because, ideally, you don’t want a person to show up to a medical office and potentially expose other people. An initial screening can be done effectively over the phone or via a video call by asking about the patient’s health history and symptoms. Then prescriptions, tests or other next steps can be arranged as needed. The same is true, by the way, for people who have a bad cold or the flu.
Thanks to the support of the Monmouth Medical Center Southern Campus (MMCSC) Foundation, the Jacqueline M. Wilentz Comprehensive Breast Center was able to purchase an additional three-dimensional (3D) mammography unit as part of its expansion. This type of mammography produces many thinly sliced images of the breast, helping to improve cancer detection.

“The MMCSC Foundation supports the hospital’s efforts to provide the community with better access to quality mammography services,” says Denice Gaffney, Vice President of the MMCSC Foundation. Funds for the unit, which cost $368,000, were raised at the 2019 Flavors of the Jersey Shore Food & Wine Tasting.

The Jacqueline M. Wilentz Comprehensive Breast Center has been recognized for its commitment to excellence. It has achieved the highest certification level offered by the National Quality Measures for Breast Centers. The Center has also been designated as a Breast Imaging Center of Excellence by the American College of Radiology’s Commission on Quality and Safety and the Commission on Breast Imaging. It’s the first facility in Monmouth and Ocean counties to be granted a three-year accreditation by The National Accreditation Program for Breast Centers. Recently, the Center received the Women’s Choice Award for America’s Best Breast Centers. The Center is located in Long Branch but has satellite centers in Lakewood, Colts Neck and Howell.

**STATE-OF-THE-ART BREAST CARE**

More patients now have access to the most advanced type of mammography.

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The Breast Center provides comprehensive breast care. In addition to mammograms, the Center offers breast MRI, breast ultrasound, bone density testing, breast-specific gamma imaging, genetic counseling, breast surgery and stereotactic breast biopsy, in which a biopsy is guided by three-dimensional mammography imaging.

**HIGH-QUALITY SERVICES**

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To support the Monmouth Medical Center Southern Campus Foundation, visit [www.rwjbh.org/monmouthsouth/giving.org](http://www.rwjbh.org/monmouthsouth/giving.org).

**SAVE THE DATE!**

Monmouth Medical Center Southern Campus Foundation will host the following events in 2021. Reserve your tickets now by calling 732.886.GIFT.

- **JUNE 12**
  - Humanitarian Gala at Eagle Oaks Country Club, Farmingdale

- **AUGUST 2**
  - 18th Annual Golf Classic at Eagle Oaks Country Club, Farmingdale

- **OCTOBER 21**
  - Flavors of the Jersey Shore Food & Wine Tasting, Pine Belt Showroom, Lakewood
Ray Duarte is back to cycling after he received a stent to keep his coronary arteries open and reduce the chance of a heart attack.
A CARDIAC IMAGING TEST DETECTED A LIFE-THREATENING HEART PROBLEM IN AN AVID CYCLIST.

Last November, doctors at Monmouth Medical Center Southern Campus (MMCSC) were getting ready to launch Fractional Flow Reserve CT (FFR-CT), a noninvasive imaging test that uses artificial intelligence software to evaluate patients with chest discomfort and symptoms that indicate heart disease. Ray Duarte, the Director of Information Technology and Services at MMCSC and Monmouth Medical Center (MMC), was working on the project with Rajesh Mohan, MD, MBA, FACC, FSCAI, an interventional cardiologist and Chief Medical Officer at MMCSC. Dr. Mohan told Duarte that he needed volunteers to test the technology. Duarte, 51, of South Brunswick, offered to take the test. He had been experiencing back pain while cycling, and he didn’t know what was causing it. Duarte had seen a chiropractor but didn’t experience any relief. “Later that day, I received a phone call from Dr. Mohan,” he says. “Dr. Mohan said, ‘The good news is, the software is very accurate. The bad news is, your right coronary artery is 99 percent blocked.’ At any moment, he could have a heart attack.

Duarte was shocked. “I was freaking out,” he recalls. “I was a walking time bomb, and I thought I was going to die. I said, ‘What do we need to do?’” Dr. Mohan told him he needed a stent, which helps blood clots from forming in arteries and reduce the risk of a heart attack. He also was prescribed low-dose aspirin, which thins the blood and reduces the risk of a heart attack. He already takes medication for high blood pressure.

“I FELT ENERGIZED”

One week before Duarte learned he was on the brink of having a heart attack, he was taking an 80-mile bike ride to Frenchtown, Pa., with friends. Initially, he thought his back pain might be related to being hunched over while cycling. Turns out, it was actually related to Duarte’s heart problem because it disappeared after the stent was placed.

Two weeks after Duarte’s procedure, he was back at work. “I felt energized,” he recalls. He began a cardiac rehabilitation program at MMC, where he performed strength-training exercises, rowed, walked on a treadmill and rode an Airdyne exercise bike while his heart rate and oxygen levels were monitored. “I bought an Apple watch to monitor my heart rate,” he says. “An alarm will sound if I exceed 190 beats per second.” Duarte was supposed to participate in six months of cardiac rehabilitation, but he had to stop after five months due to the COVID-19 pandemic. He was pleased with the program. “Staff members always reminded me about my appointments and medications,” he says.

BACK TO BIKING

Not surprisingly, Duarte couldn’t wait to get back on his bike. “The first thing I said was, ‘When can I ride?’” he recalls. “My physical therapist told me I could go short distances.” Three weeks after Duarte had the stent placed, he rode 30 to 40 miles. In May, six months after the procedure, he was able to resume long bike rides. His goal was to complete a 100-mile bike ride this year, but he was sidelined after he fell off his bike and injured his shoulder over Memorial Day weekend. “I tore my rotator cuff and shoulder tendon, and I needed surgery,” he says.

Today, Duarte has recovered and is back to training for the 100-mile bike ride. He hopes he’ll be able to do it next year. In the meantime, he’s grateful to Dr. Mohan and the FFR-CT technology. “I swear by it, and I know other patients can benefit from it, too,” he says. In a strange twist of fate, his life’s work—technology—saved his life. “It’s very rewarding,” says Duarte. “I owe Dr. Mohan and FFR-CT my life.”

Your heart doesn’t beat just for you. Get it checked. To reach a Monmouth Medical Center Southern Campus cardiac specialist, call 888.724.7123 or visit www.rwjbh.org/heart.
Whether you’re experiencing lingering effects from a mild COVID-19 infection or were hospitalized and are experiencing fatigue and other medical problems, you might benefit from rehabilitation at Monmouth Medical Center Southern Campus (MMCSC). The hospital has launched the COVID-19 Survivors Rehabilitation and Recovery Program to help patients recuperate. “Patients are experiencing a lot of health problems related to the virus,” says Charles Markowitz, MD, Medical Director of the Department of Rehabilitation at MMCSC.

Doctors have discovered that the virus can lead to reduced lung function, cardiac problems, kidney failure, skin rashes, strokes, dizziness, blood clots, low blood pressure, urinary retention and cognitive impairment. It can also exacerbate diabetes. There are a few explanations for this: The body’s aggressive response to the virus can cause inflammation, and the virus itself can damage the cells lining blood vessels. The medications used to treat the virus, such as steroids and those that maintain blood pressure, can also lead to side effects.

**A MULTIDISCIPLINARY APPROACH**

The MMCSC program offers many rehabilitation services, such as outpatient physical therapy, occupational therapy, speech and language therapy, electromyography (EMG) testing for nerve problems, electrocardiogram (EKG) testing to measure the heart’s electrical activity, and pulmonary and cardiac rehabilitation. The hospital also provides wound care, mental health counseling and vascular treatment and testing. “We take a multidisciplinary approach to rehabilitation,” says Dr. Markowitz. The providers discuss each patient’s progress to ensure their needs are being met.

Patients who are experiencing weakness can use parallel bars to practice walking and devices to help them stand better. Patients with fatigue and breathing problems can benefit from pulmonary therapy. “They can walk on a treadmill or perform arm exercises while their oxygen and heart rate are monitored,” says Dr. Markowitz. Each patient receives a customized treatment plan. “With various interventions, our patients improve,” he says.

**ARE YOU A CANDIDATE FOR REHABILITATION?**

The following symptoms can be treated in the COVID-19 Survivors Rehabilitation and Recovery Program:

- anxiety, depression and/or insomnia
- chest discomfort, palpitations and/or poor endurance with physical activity
- shortness of breath, coughing and/or pain with deep breathing
- muscle pain or weakness, joint pain and/or stiffness
- impaired or altered sensation or numbness, radiating pain in the limbs and/or localized weakness in the legs/feet or hands
- balance problems, weakness, new visual problems, hearing difficulties, difficulty thinking and/or confusion
- difficulty chewing or swallowing and/or difficulty speaking
- difficulty urinating and/or urinary incontinence
- poor appetite, nausea or vomiting, frequent diarrhea, gastrointestinal discomfort and/or bowel incontinence
- bedsores or other skin sores involving the lower back and/or limbs or feet

**MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS CAN HELP**

If you suffered from COVID-19, either at home or in the hospital, don’t hesitate to seek follow-up care to get your life back on track. Call the COVID-19 Survivors Rehabilitation and Recovery Program at 732.942.5921 or speak with your primary care physician today.
In March, Abhijit Chatterjee, MD, a geriatrician at the James and Sharon Maida Geriatrics Institute at Monmouth Medical Center Southern Campus (MMCSC), referred Maxwell Friedlich to pulmonary rehabilitation to help him breathe better. Maxwell, 89, of Manchester has chronic obstructive pulmonary disease (COPD) and a condition called silicosis, in which there's scarring in the lungs as a result of breathing in silica, a mineral found in sand, quartz and other types of rock. During rehabilitation, Maxwell performed upper arm rotations with five-pound weights strapped on his arms. He also walked on a treadmill and worked out on a recumbent bike. He learned to inhale through his nose and exhale through his mouth, which helped improve his pulmonary function. “It makes breathing a lot easier,” he says.

**CREATING WORKS OF ART**

Breathing better allows Maxwell to continue to do one of the things he enjoys most: teach neighbors in his retirement community, Leisure Village West, how to create stained glass pieces. Every year, he takes his students—who range in age from 65 to 97—to stained glass exhibits, such as a craft show in Philadelphia. He also takes his class to local exhibits, such as one at the historical society in Toms River. One 96-year-old member of the group enjoys the class so much that he resisted his family’s efforts to relocate him. “When people create a stained glass item, it’s very satisfying,” says Maxwell. “I told one retired elementary school art teacher that she was an artist after she created a piece, and she was thrilled.”

After a brief pause due to the COVID-19 pandemic, Maxwell returned to pulmonary rehab and finished at the end of July. “I’m functioning as well as possible, and I’m hoping to continue the program after I see my cardiologist for a checkup,” he says. Maxwell is also pleased with Dr. Chatterjee’s care. “He was aware of what I was striving for,” he says. “He’s very knowledgeable about geriatrics.”

To learn more about the James and Sharon Maida Geriatrics Institute, call 732.886.4700 or visit [www.rwjbh.org/monmouthgeriatrics](http://www.rwjbh.org/monmouthgeriatrics).
Cardiovascular disease, which encompasses stroke, aneurysms, peripheral vascular disease and heart disease, is the No. 1 cause of death in the U.S. These conditions are caused primarily by smoking, high cholesterol, high blood pressure and diabetes. The keys to survival are early detection and prevention of complications. This requires coordinated, multidisciplinary care by primary care physicians and cardiovascular specialists. Together, they diagnose disease and provide state-of-the-art treatment.

Over the last several years, the RWJBarnabas Health Southern Region has taken steps to deliver high-quality cardiovascular care to residents across Monmouth and Ocean counties. To provide the most comprehensive vascular care in these areas, Randy Shafritz, MD, RPVI, FACS, a board-certified vascular and endovascular surgeon and Associate Professor of Surgery at Rutgers Robert Wood Johnson Medical School, has been appointed Regional Director of Vascular Services for Monmouth Medical Center, Monmouth Medical Center Southern Campus and Community Medical Center. He is also a member of the RWJBarnabas Health Medical Group.

A MULTIDISCIPLINARY APPROACH
The goal of the Regional Vascular Program is to create a Center of Excellence, which involves taking a multidisciplinary approach to treating vascular disease. Dr. Shafritz is building an expansive network of well-trained physicians and surgeons to specialize in the treatment of vascular diseases. They will have advanced training in the newest technologies, and local residents will have access to world-class expertise and facilities in their own backyard. Patients will benefit from aggressive screening for early detection of vascular disease; state-of-the-art, noninvasive testing facilities; and pleasant and convenient offices located throughout Monmouth and Ocean counties.

Regional Vascular Program physicians treat a wide range of conditions, including heart disease, carotid artery disease and stroke, kidney failure, aortic aneurysms, peripheral artery disease and venous disease, such as varicose veins and blood clots. The physicians provide comprehensive, noninvasive diagnostic vascular testing and screening in their outpatient offices and at the Southern Region hospitals. Diagnostic procedures include vascular duplex ultrasound and pulse volume recording. Each of these procedures is performed by a registered vascular technologist and interpreted by vascular surgeons, interventional radiologists and cardiologists.

AN ARRAY OF TREATMENTS
Treating vascular disease may involve medications, interventional procedures, surgery and preventive care. Oftentimes, more than one approach is required, such as interventional and surgical care, physical therapy and exercise. Most conditions can now be managed with minimally invasive, or endovascular, procedures, allowing for faster and easier recoveries. They can often be done on an outpatient basis. Physicians perform procedures such as angioplasty, in which blocked arteries are opened using balloons, catheters and stents; endovenous ablation, or laser treatment of a diseased vein; and aneurysm repairs.

State-of-the-art imaging allows vascular specialists to treat patients with complex cardiovascular issues close to home, with the same level of expertise traditionally found at large university programs.

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Better Health

The Better Health Program at Monmouth Medical Center Southern Campus (MMCSC) will engage your mind, encourage you to move and help you reflect. By joining this complimentary program—which has been designed for area residents who are 55 and over—you’ll meet like-minded people and learn from the doctors and professionals who make your well-being a priority. For more information or to become a member, call 888.726.2362.

VIRTUAL HEALTH RISK ASSESSMENTS

Appointments available upon request

Make a phone or online appointment with a registered nurse to discuss your risk for high blood pressure, stroke and diabetes. You can also ask about any health concerns. To register, call 732.597.6075 or email Kelly.Deleon@rwjbh.org.

CHAIR YOGA

Tuesdays, 9 to 9:45 a.m.

This gentle form of yoga is practiced sitting on a chair or using a chair for support during standing poses. Chair yoga helps to improve your flexibility, lung capacity, circulation, strength and balance and relieves stress. The class incorporates breathing exercises, stretching, yoga postures and relaxation. The class code will be given at registration. To register, call 732.597.6075 or email Kelly.Deleon@rwjbh.org.

ZUMBA® GOLD!

Thursdays, 9 to 9:45 a.m.

This class is designed for active older adults who are looking for a modified Zumba® class that recreates the original moves at a lower intensity. Easy-to-follow choreography focuses on balance, range of motion and coordination. The class code will be given at registration. To register, call 732.597.6075 or email Kelly.Deleon@rwjbh.org.

Cancer Support Community

The Cancer Support Community (CSC) at MMCSC helps to meet the emotional, physical and spiritual needs of patients and their family members. The CSC offers a variety of programs led by professionals, such as support groups; yoga, Tai Chi and meditation sessions; and presentations on topics such as nutrition and talking to children about cancer. Support services are free for anyone affected by cancer—patients, family members, caregivers, supportive friends and children—no matter where he or she is treated. For more information on the Cancer Support Community and its services, call 732.923.6090.

Ongoing Screenings

VASCULAR SCREENING

Vascular disease is among the leading causes of death in the U.S., yet it’s generally asymptomatic. A noninvasive, painless and simple-to-administer screening includes an ultrasound exam for aortic aneurysms and carotid artery disease and a noninvasive measure of blood flow in the legs. Results are reviewed by board-certified radiologists and forwarded to your primary care physician. Fee: $49. For more information and to register for an appointment, call 732.886.4363.

LUNG CANCER SCREENING

A low-dose computed tomography (CT) scan of the chest helps to detect lung cancer. Smokers and former smokers ages 55 to 77 with a smoking history of at least 30 “pack-years” (packs per day multiplied by the number of years a person has smoked) should have the test annually. To qualify for screening, you can’t have any symptoms of lung cancer and may not have had a chest CT scan in the past year. To schedule a lung cancer screening, call 732.923.7966.

To learn more about upcoming events at Monmouth Medical Center Southern Campus, visit www.rwjbh.org/monmouthsouth.
I’ve got cancer
but I also have an expert oncology nurse navigator on my side.

Fighting cancer can feel overwhelming, with so many meetings, decisions, procedures, and questions. Our nurse navigators ensure you don’t have to do it alone. With expertise and compassion, they can walk you through every step of your treatment process. They demonstrate the high level of care you’ll find, along with our innovative therapies and cutting-edge research, at New Jersey’s only NCI-designated Comprehensive Cancer Center.

Visit rwjbh.org/beatcancer or call 844-CANCERNJ.

Let’s beat cancer together.

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.