HEROES WORK HERE
NOW YOUR DOCTOR IS JUST A CLICK AWAY
WHEN DOCTORS BECOME PATIENTS

WELCOME BACK!
WE’RE READY FOR YOU
A MESSAGE FROM LEADERSHIP

Staying Healthy Together

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

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

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

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

At Monmouth Medical Center Southern Campus (MMCSC), we assure you that your safety is our top priority. We are prepared for your return and providing for your healthcare needs. Delaying important medical issues can have devastating results. We stress the importance of patients continuing crucial infusion treatments and rescheduling those postponed elective surgeries in order to get and stay healthy. Please reschedule that critical blood work appointment and have that X-ray that you put off. At MMCSC, we have implemented practices to prevent the spread of COVID-19 and assure you the hospital is disinfected according to established best practices, and social distancing measures are in place as well as screening of both staff and patients.

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

Yours in good health,

BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

FRANK J. VOZOS, MD, FACS
CHIEF EXECUTIVE OFFICER, MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS
EXECUTIVE VICE PRESIDENT, RWJBARNABAS HEALTH

HEALTH NEWS

MMCSC GETS AN “A” FOR SAFETY

Monmouth Medical Center Southern Campus (MMCSC) was awarded an “A” Hospital Safety Score rating by The Leapfrog Group, an independent national nonprofit run by employers and other large purchasers of health benefits.

“We are honored to be recognized for an ‘A’ rating in safety and continue our journey of high reliability and outcomes for our patients and their families,” says Frank J. Vozos, MD, FACS, Chief Executive Officer, MMCSC and Executive Vice President, RWJBarnabas Health.

“Our patients’ safety is what matters most, and I am proud of our continued commitment to accreditation and to positive outcomes as reflected in this accomplishment.”

Updated twice a year, in the spring and in the fall, the Leapfrog Hospital Safety Grade is the only hospital rating focused exclusively on hospital safety.

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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 ki aplikab yo e li pa fè diskriminasyon sou baz ras, koulè, peyi orijin, laj, enfimite ouwa séks. ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 732.363.1900.
2. WELCOME LETTER. A community update from our CEOs.

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

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

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

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

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

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

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

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

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

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

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

22. WELCOME BACK! COVID-19 testing of staff and patients, extreme cleaning and many other measures make our facilities safe for care.
Our providers and staff have risen to—and well above—the unprecedented challenges of caring for patients with COVID-19. Monmouth Medical Center Southern Campus (MMCSC) is proud and grateful beyond words for the indomitable spirit and incredible work done by our teams on the front lines.
1 SAFETY FIRST: New procedures in the Emergency Department helped keep patients and staff safe.

2 ED TEAMS: Members of the MMCSC Emergency Department teams were frontline warriors.

3 A HAPPY DAY: Physicians and staff join in the “clap out” of a discharged COVID-19 patient.

4 BEHAVIORAL HEALTH: Dedicated staff and providers from RWJBarnabas Health Behavioral Health Center have been available 24/7 to meet critical mental and emotional health needs during the pandemic.

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

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

7 THANK-YOU CARDS were made with love by the children of Ridgeway Elementary School, Manchester, an art project assigned by Principal Nikki Mazur.

8 SOARING SALUTE: A special thank you to the MMCSC heroes from the community included Lev Rochel Bikur Cholim, Lakewood and Hatzolah EMS and the Lakewood Police and Fire Departments.

9 HEROES LEAD: Members of MMCSC nursing leadership worked tirelessly to support staff and patients.

10 CASE MANAGEMENT HEALTHCARE HEROES pose with special T-shirts they created in honor of Case Management Week.

11 ON THE CASE: Members of the MMCSC Critical Care Unit overcame unprecedented challenges.

To share your thanks or make a donation in support of our healthcare heroes, visit www.rwjbh.org/heroes.
At Monmouth Medical Center Southern Campus, we’ve dedicated everything we have to fighting COVID-19. And just as we’ve had the community’s back, you’ve had ours, with a steady outpouring of food, supplies, personal items and love. Please know that each and every gift has helped to keep us going. From the bottom of our hearts, thank you!

The Monmouth Medical Center Southern Campus Foundation, the Foundation Board of Directors, hospital leadership and staff would like to share sincere thanks to all supporters of the COVID-19 Emergency Response Fund.

Now, more than ever, we are extremely grateful for the outpouring of support and generosity from our community for our frontline staff and caregivers. Your generous donations of food, personal protective equipment (PPE), monetary donations and the phenomenal parades and “clap outs” from all our local first responders, has helped to sustain the spirit of dedication and teamwork among our nurses, clinicians and all our Healthcare Heroes as they continue to provide exceptional care.
To say thank you or to donate for our healthcare heroes, visit www.rwjbh.org/give.
Monmouth Medical Center Southern Campus: Best in the U.S. for the 7th time

Achieving a Leapfrog A for the 7th time underscores Monmouth Medical Center Southern Campus’ commitment as a High Reliability Organization (HRO).

Through the concerted effort of Monmouth Medical Center Southern Campus’ physicians, nurses, staff, volunteers and leadership, patients and families benefit from the highest level of quality care and the safest possible hospital experience.
The COVID-19 pandemic has brought all kinds of uncertainty—to our finances, our health and our ability to make plans. “People have lost an important aspect of control over their activities,” says Frank Ghinassi, PhD, ABBP, Senior Vice President, Behavioral Health and Addiction, RWJBarnabas Health, and President and CEO of Rutgers University Behavioral Health Care. “As a result, we’re seeing a lot of people feeling stressed—and even a little more than that, feeling distressed.”

“We all had a rhythm and routine for our days,” he continues, “from what time we took a shower to how we dressed for work to the kinds of things we did for fun. Now all of those old rhythms are challenged, and that makes people feel confused and off-balance.” While that’s a perfectly normal reaction, Dr. Ghinassi says it’s important to take the next step. “Ask yourself, ‘What can I do in this new reality to help myself feel better and more in control?’” The answer lies in reintroducing predictability, to the degree possible in this unpredictable time.

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

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

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

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

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

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

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

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

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

1 What factors are contributing to telemedicine’s surge?

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

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

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

What are some examples of conditions that can be treated in a virtual visit?

Let’s say a person falls and cuts himself. A telemedicine visit can help determine whether he needs stitches and/or an antibiotic. Symptoms and treatment for a urinary tract infection can also be discussed virtually. If someone has a sore throat, he or she can show the back of the throat and tonsils to the doctor via video.

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

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

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

Am I at risk for contagion if I visit a physician’s office?

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

Are telemedicine visits covered by insurance?

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

How will telemedicine change healthcare in the future?

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

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

To connect with an RWJBarnabas Health medical group provider, call 888.724.7123 or visit www.rwjbh.org/medicalgroup.

CHECKLIST FOR THE BEST VIRTUAL VISIT

- Be sure the device you’re using (phone, tablet, computer) is fully charged.
- Make the call from a well-lit and quiet room to enhance the quality of the video and audio feeds.
- If you need an interpreter, let your physician’s office know ahead of time.
- In advance, write down your symptoms, when they began and how frequent they are, and any medications you’re taking.
- Keep a pen and notepad handy during the visit.
If you or a loved one is diagnosed with cancer, you'll want to seek the highest possible level of care—and clinical trials can be a critical aspect of that care. “Clinical trials offer tomorrow’s treatments today,” says Howard S. Hochster, MD, FACP, Director, Oncology Research for RWJBarnabas Health, and Associate Director, Clinical Research and Director, GI Oncology for Rutgers Cancer Institute. “As the state’s only NCI-Designated Comprehensive Cancer Center, Rutgers Cancer Institute of New Jersey and RWJBarnabas Health provide patients access to a wide range of clinical trials, many of which are not available elsewhere. We do this at Rutgers Cancer Institute in New Brunswick and
across the state at RWJBarnabas Health hospitals.” What should patients know about clinical trials? Dr. Hochster explains:

What happens in a clinical trial?
Clinical trials are research studies that evaluate new treatment options for diseases and help doctors learn which treatments are most effective.

Generally, clinical trials evaluate the safety and effectiveness of new drugs, use current drugs in a new manner or combine drugs to evaluate their effectiveness. Every clinical trial must be approved by regulatory authorities to be sure the scientific evidence merits this kind of investigation and that it’s ethically sound.

Clinical trials are undertaken only when we have evidence that the new approach is likely to be better than the standard treatment. Patients should speak with their physicians about the risks and benefits, including possible side effects, of the treatment being studied.

During a trial, patients will have many staff members paying attention to them—physicians and research staff including nurses, data managers and others—who’s job is to make sure they get the treatment exactly as written in the protocol.

Who’s eligible for a clinical trial?
Every patient who has a cancer diagnosis should ask whether a clinical trial might be right for him or her, and should consider a clinical trial at every step of the cancer journey. Sometimes a trial isn’t appropriate at the beginning, but may be later on.

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

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

What are some examples of cancer research taking place in clinical trials?
For years, everyone with certain cancer diagnoses received the same type of treatment for their cancers, but not everyone reacted the same way. Now we’re able to use clinical trials to make progress in precision medicine, where we can specifically target, on a molecular level, the gene mutations or changes that make an individual’s normal cells turn into cancer cells.

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

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

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

A CLINICAL TRIAL FOR COVID-19 TREATMENT

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

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

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

THREE PATHWAYS

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

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

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

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

COLLABORATION AND INNOVATION ARE DRIVING A NEW ERA IN ONCOLOGY.

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

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

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

MANY MINDS

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

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

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

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

VIRTUAL CARE FOR CANCER PATIENTS

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

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

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

“As we always say, ‘Cancer doesn’t travel well,’” explains Dr. Evens. “Telemedicine doesn’t replace in-person care, but we knew there was an appetite for this service. Who wants to drive an hour or more on the parkway or turnpike for a consult when you don’t have to?”

Healthy Together | 14 | COVID-19 Special Issue
Stay-at-home orders during the pandemic have posed particular challenges for children and adults with autism spectrum disorder (ASD). Deprived of face-to-face services, they have been lacking the stimulation and training they need, and have spent much less time interacting with others than usual.

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

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

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

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

EXPANDED SERVICES

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

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

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

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

At 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.
At RWJBarnabas Health (RWJBH), we have always been committed to meaningful partnerships with organizations that share our vision to create healthier communities. Their efforts during the COVID-19 pandemic, however, have taken their support to a whole new level. “We asked our partners to help us in several ways—through donations, through disseminating educational information and through support for our frontline healthcare heroes,” says Justin Edelman, Senior Vice President, Corporate Partnerships, RWJBH. “The response was beyond what we ever could have imagined.”

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

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

To learn more about corporate partnerships at RWJBarnabas Health, visit www.rwjbh.org/partnerships.
The offers from the public began as soon as the crisis did. People emailed, texted and called hospitals, some in tears, wanting to know how they could help local healthcare providers. They sent money. They donated dinners. They sent cards. Someone had a friend who had a friend whose company could provide personal protective equipment (PPE). A small painting business had 20 face masks to donate. A hardware store provided gloves. The contributions came in a steady stream.

“The donations were from longtime loyal donors as well as those who had never made a gift to one of our hospitals before,” says Glenn Miller, Executive Vice President and Chief Development Officer at RWJBarnabas Health (RWJBH). “People wanted to make sure that our doctors, nurses and staff had what they needed to stay healthy and do their jobs.

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

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

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

ONGOING NEED

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

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

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

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

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

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

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

To donate to Monmouth Medical Center Southern Campus or to RWJBarnabas Health, visit the Emergency Response Fund at www.rwjbh.org/give.
WE DON’T HAVE SPACE TO TELL ALL OF THE STORIES OF CARE AND COMPASSION WE’VE SEEN IN THESE CHALLENGING TIMES. HERE ARE JUST A FEW.

COMPASSION IN ACTION

PREGNANT AND ON THE FRONT LINES

For Monmouth Medical Center Southern Campus (MMCSC) frontline staffers Jenna Whitman, Physician Assistant Director, and Victoria Belvin, RN, it has been second nature to work alongside their co-workers during the COVID-19 pandemic. The only thing that could stop them: the fast-approaching delivery dates for their babies.

Jenna, 32, a Wall resident, has worked in the Emergency Department at MMCSC for nearly eight years. She has a toddler at home and was late in her pregnancy when the crisis began.

“At first it was definitely anxiety-provoking, but after that you're like, ‘You know what? This is what I signed up for. This is what I love to do,’” Jenna says.

“I wasn’t going to jump ship, and neither did anybody else who works at the hospital,” she says. “Everybody was running away from this virus, but we were running right toward it. As scary as it was, that was cool to see.”

Victoria, 29, a Brick resident, usually works in the Endoscopy Suite at MMCSC. With many elective surgeries postponed, she was asked to support the Command Center, the vital center of operations at the hospital since mid-March.

“Most of my loved ones wanted me to stop working,” explains Victoria. “My doctor was nervous because there was no protocol in place with this new virus.” Still, she persevered. “It was scary, but everyone at the hospital was amazing,” she says. Victoria’s baby, her first, was due May 28.

Jenna, whose baby girl was due in late June, acknowledges that there were tough times. “When you’re far along in your pregnancy, you’re barely breathing normally as it is,” she says. “Then you’re hustling around wearing this N95 mask and you’re wondering how long you can do this.”

Jenna’s husband, Craig, a former Wall police officer, got a new perspective on his wife’s work. “All those years, she was scared about what I was doing at work, so it was very eye-opening to see it from the opposite side,” he says. “But I had all the faith in her that she was going to follow her training and be safe. She seemed very confident about it.”

Victoria’s husband, Scott Berger, also knew he had a supportive role to play. “As a husband and soon-to-be new father, I felt helpless in being able to keep her safe,” he says. “But I know she has an important job to do. There are a lot of people who need help.”
‘SEEING PATIENTS RECOVER GIVES ME STRENGTH’
AWANI KUMAR, MD, Pulmonologist and Critical Care, Recovered COVID-19 Patient

I n the later part of March, I became sick with COVID-19. This virus is tough; it made me so weak and tired. However, I was able to manage my illness at home and was able to come back to work after more than three weeks.

For COVID-19 outpatients, I advise them to have a thermometer and a pulse oximeter [a small device that monitors the amount of oxygen carried in the body], and check them at least three times a day. Good nutrition and good hydration are very important to help you fight the virus. And of course, put yourself in isolation from everyone, including people you live with.

Today, rounding in the ICU and CCU with colleagues, some of whom have also recovered from COVID-19, gives me strength to carry on. Seeing patients recover makes me feel more confident by being there and helping them get better. I also saw a few of them who did not make it, and that breaks my heart.

But I want people to have hope. We have an extremely high success rate of treatment for COVID-19 at Monmouth Medical Center Southern Campus. If you have symptoms of COVID-19, come to the hospital for a test and a diagnosis. We will take good care of you.”

‘THE VAST MAJORITY OF PEOPLE GET BETTER AT HOME.’
YISRAEL KADOSH, MD, Cardiologist, Recovered COVID-19 Patient

I contracted the virus, early on. I started with myalgias, muscle aches, so I stopped seeing patients and got tested. Days one through seven were mostly muscle aches, then days eight and nine were pretty bad. I had shortness of breath, cough, fever, no appetite and lethargy. I only took Tylenol and Advil, and I kept track of my level of oxygen saturation, which never went too low. On day 10, I started to feel a little better and on days 11 and 12, I felt much better. Following the advice of the infection control specialists, I came back to work, more than 15 days after the onset of infection.

I would say to people, first of all, don’t worry. If you have symptoms such as shortness of breath and high fevers, get checked out. In the hospital, we deal with the sickest. But the vast majority of people with COVID-19 get a lot better on their own at home, though it may take as long as two to three weeks.”

SAFE EMERGENCY CARE DURING A PANDEMIC

“D uring the height of the COVID-19 pandemic, our 10-year-old son, Justin, was struck by a car while riding his bicycle,” says Kelly DeLeon of Manchester. “As parents, we were scared not only by the extent of our son’s injuries, but by the prospect of taking him into an emergency room in the midst of an unprecedented health crisis.”

Knowing the excellent reputation of MMCSC, the DeLeons insisted that the EMS driver take Justin there. “Our Emergency Department offers a child-friendly pediatric-designated treatment area for children,” explains Jen Lees, MSN, RN, NE-BC, Director, Emergency Care Services.

At the hospital, Justin’s parents saw that every precaution had been taken. “We have a triage tent outside, where patients are quickly screened, and if suspected for COVID-19, led to a designated treatment area,” says Lees. “From the moment we arrived, each professional treated Justin as if he were their only patient,” Kelly recalls. “The registrars, Veronica and Johan, took the time to turn on Cartoon Network for him. The ED tech, Lucy, calmly spoke with us, with a soothing smile under her mask. Shannon, a nurse practitioner, gently cleaned Justin’s wounds. One of the registered nurses, Victoria, and Dr. Sree Raja kept us updated. Another nurse, Sara, checked in on Justin often and brought him graham crackers and orange juice.”

Justin was promptly taken for X-rays, and it was determined that he had a fractured tibia. Surgeon Christos Plakas, MD, the consulting pediatric orthopedist on call, came to treat Justin and cast his fractured tibia.

“We are still in awe that this team of heroes provided care without ever letting on that, elsewhere in the ED, they were fighting COVID-19,” Kelly says. “Our hearts are grateful.”
RIGOROUS PROCEDURES ENSURE THE SAFETY OF EMERGENCY DEPARTMENT PATIENTS AND STAFF.

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

“At Monmouth Medical Center Southern Campus, we’ve seen our ED volume decline by 50 percent overall, and by up to 85 percent for pediatric EDs,” says Sreedar Raja, MD, Medical Director, Emergency Department, at Monmouth Medical Center Southern Campus (MMCSC).

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

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

“The main message we want people to hear is, ‘It’s safe to come to the ED, so do not delay seeking care for a potential emergency,’” he continues. “We’ve put many layers of protection in place for our patients and for our staff.”
SAFETY MEASURES
Safety steps taken by Emergency Departments throughout the RWJBarnabas Health system include:

- Separation of COVID-19 and non-COVID-19 patients upon entry
- Setting aside special areas that are completely separate from COVID-19 patients and caregivers
- Creation of “negative pressure” isolation rooms that prevent airborne contaminants from drifting to other areas in the hospital
- Provision of masks for all staff and patients
- Frequent disinfectant wiping of surfaces and equipment.

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

CARDIAC CONCERNS
Doctors have long pounded the drum for patients to call 911 if they experience symptoms of a heart attack. “Time is heart muscle,” says cardiologist Rajesh Mohan, MD, Chief Medical Officer at MMCSC. “The sooner we can treat you after the onset of symptoms—ideally, within 90 minutes—the less damage to your heart.”

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

Adding complexity to the situation is the fact that the novel coronavirus seems to exacerbate a range of other cardiovascular problems. “COVID-19 is a vascular disease as well as a respiratory disease,” says Dr. Mohan. “It can lead to clotting in the arteries. It’s possible that a patient may have heart disease that has not been recognized, and with the stress of COVID-19 illness a cardiac event occurs. The event can be any of the known cardiac syndromes, including heart attack or heart failure. We just don’t have the answers yet.”

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

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

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

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

“Pay attention to the suddenness of the symptoms, which could include confusion and severe headache, and call 911 so you can be taken to the hospital right away,” advises Tejas Deliwala, MD, a neurologist at MMCSC. “Remember with stroke, time lost is brain lost. Any delay in seeking acute medical care can significantly affect outcome and recovery.”

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

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

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

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

Safety is an all-encompassing effort. “Every little thing we do is a building block aimed at making our facilities COVID-free,” says Dr. Bonamo.
For your safety, we’ve made some changes in the way we’re delivering care.

• For the majority of our services, appointments are required for all outpatient testing, therapy and blood work. Patient appointments are being spaced to achieve minimal wait time and interaction between patients. Please call 1.844.RWJBH4U (1.844.795.2448) to schedule your appointment today.

• Breast Center 732.923.7700
• Heart & Vascular Center 732.886.4363
• Rehabilitation Services 732.942.5921
• Cardiac Rehabilitation 732.886.4428

We maintain an active screening process for all team members, patients and visitors, including temperature checks at all hospital entrances.

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

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

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

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

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

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

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

NEW PROCESSES AT MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS

NO EFFORT SPARED
Preventing the spread of COVID-19

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

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

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