THE COUNTY’S CUTIES

MEET THE BABIES WHO WON OUR CONTEST

» MEATY DINNERS DAD WILL LOVE
» DREAM GUEST ROOM
» DESTINATION ICELAND

TAKE OUR QUIZ ON MEN’S HEALTH
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A GREAT PLACE TO GIVE BIRTH

IN THE FEBRUARY/MARCH ISSUE OF MONMOUTH Health & Life, Monmouth County parents were invited to submit a favorite photo to the annual “Cutest Baby in the County” contest, and the winner and finalists are announced in this issue.

Odds are, at least a few of these babies were born here at Monmouth Medical Center, where more than 5,000 babies are delivered each year. There are many reasons why we’re the trusted choice among parents throughout the region. Monmouth Medical Center has been a Level III High-Risk Maternity Center since the designation was initiated more than 40 years ago. We have built one of the safest obstetrical and gynecologic services in the nation, and we continue to expand and upgrade our facility to match our commitment to quality care and patient safety.

Choosing a hospital for the birth of your baby is an important decision. At Monmouth Medical Center, The Eisenberg Family Center is focused on the individual needs of mothers and babies, as well as on the entire family as a whole. The heart and soul of The Eisenberg Family Center is the personalized attention and care provided to the whole family, from pregnancy through birth and beyond.

And at Monmouth, we also understand that adjusting to the birth of a baby can be challenging. Postpartum depression and anxiety (PPD/A) affects one in seven women, with symptoms that range from mild to severe. It is the most common complication of childbirth, but it is temporary and treatable.

At Monmouth Medical Center we care about your mental health as well as your physical health during your pregnancy and after the delivery of your baby. We have introduced a Perinatal Mood and Anxiety Disorders Program to address many different topics and to help women understand that they are not alone. We offer free group support as well as evidence-based psychotherapy. Patients are supported by a multidisciplinary team of experts from psychiatry, nursing and social work, and all of our clinicians are certified by Postpartum Support International.

The birth of a child is truly one of life’s most wonderful and remarkable experiences, and at Monmouth Medical Center we are proud to be the hospital chosen by more expectant families than any other in the region.

Sincerely,

FRANK J. VOZOS, M.D., FACS
PRESIDENT AND CHIEF EXECUTIVE OFFICER,
MONMOUTH MEDICAL CENTER AND
THE UNTERBERG CHILDREN’S HOSPITAL
SEAN GERTNER IS A MAN “ON THE go.” And there’s no slowing down on weekends as the active 49-year-old plays pickup basketball with the guys every Sunday morning. During a recent game, however, the Jackson resident suddenly felt a stabbing pain in the back of his leg. At first he thought someone had kicked him, but then he heard what he calls “the proverbial snap.” He hobbled off the court with the help of his teammates but insisted on driving himself home. “I knew something serious was going on, but I was in denial,” says Sean, an attorney with offices on the Lakewood-Jackson border and a member of the Board of Trustees of Monmouth Medical Center/Monmouth Medical Center, Southern Campus. “Every armchair athlete is fearful of injury—especially the Achilles.”

“With an injury like this, I knew time was of the essence,” says Sean. “From the initial diagnostic test to pre-op testing and scheduling the surgery, I was impressed with the smooth coordination between the surgeon’s office and Monmouth Medical Center, Southern Campus. They made everything so easy.”

Robert Floros, D.P.M., FACFAS, a podiatric surgeon with Ocean County Foot and Ankle Surgical Associates in Toms River who is on staff at Monmouth Medical Center, Southern Campus, performed Sean’s Achilles tendon reconstruction surgery. “Sean completely tore his Achilles tendon and sustained an 8-cm. destruction of tendon and muscle tissue,” says Dr. Floros, who also serves as a guest clinical instructor for the Department of Surgery at the Temple College of Podiatric Medicine. Board-certified in foot and ankle reconstructive surgery since 1991, Dr. Floros performed a human allograft reconstruction of the Achilles tendon in which a cadaver-donated Achilles tendon was attached to the remaining viable muscle and tendon tissue with a suture done with a synthetic fiber similar to Kevlar.

“This innovative technique is designed to eliminate the use of metal anchors or screws in the heel bone,” says Dr. Floros. “By placing the wire through the heel bone and running it up the sides of the graft on both sides all the way to the mid aspect of the calf, we can create a strong tether for the new tendon and muscle pull in one long, connected mechanism to the heel bone. This is very low-profile and rarely needs to be modified or removed.”

Dr. Floros also used Biovance, an amniotic membrane portion that helps in healing and in the reduction of deep scar formation. “Achilles tendon injuries are very disabling if not repaired, but thanks to young tissue donors and new technology, the surgeon can help return the injured patient to a reasonable functional level,” the doctor adds.

The surgery was a huge success. Sean’s biggest challenge during recovery is adjusting from his active lifestyle to a sedentary—non-weight-bearing—lifestyle. He especially appreciates the support of his wife, Marla, and his parents, who all rallied around him through this ordeal. Sean is gearing up for physical therapy sessions in the near future. Knowing Sean, there’s no doubt he’ll be back on the court soon!
NEW JOINTS FOR NEW VIGOR

FOR SOME, KNEE OR HIP REPLACEMENT CAN MEAN AN END TO PAIN AND A RETURN TO ACTIVITY. HERE ARE TWO SUCCESS STORIES.

AT MONMOUTH MEDICAL CENTER’S Joint Replacement Center, patients get more than new knees, new hips and new shoulders. They get another chance at being active and doing the things they love—thanks to expert care from a highly specialized team that delivers excellence at every stage, from pre-surgical education and preoperative testing through surgery, recovery and rehabilitation.

Besides board-certified, fellowship-trained orthopedic surgeons with specialized joint replacement training, Monmouth’s team includes nurses, therapists and others specifically trained to care for people with orthopedic injuries or conditions. Says David Chalnick, M.D., medical director of the Joint Replacement Program: “Our protocols for hip, knee and shoulder replacement can, in many cases, help reduce length of stay, prevent complications and lead to improved outcomes.”

Joint replacement surgery should never be undertaken lightly. But if you have joint pain that limits your mobility, this treatment may be your best option for a dramatically enhanced quality of life. That’s what it was for these two:

GOOD-BYE TO DECADES OF KNEE PAIN!

As an office manager at a Holmdel-based engineering consulting firm, 60-year-old Cheryl Ahrens of Belford faced two daunting sets of steps leading to her office each day—a challenge for someone who had struggled with chronic knee pain since her 40s.

“Both of my knees hurt—one crunched—when I went down the steps, and at times my kneecap felt like it was going to explode,” says Cheryl.

Previously, she had opted out of a tendon release procedure that could have helped with the pain. But after watching a colleague with knee pain wait so long that minimally invasive surgery was no longer an option, Cheryl knew she had to act before it was too late. She made an appointment with board-certified orthopedic surgeon Mark W. Gesell, M.D., FACS, who specializes in hip and knee joint replacement surgery at Monmouth Medical Center.

Dr. Gesell told Cheryl that, while her knees were now too far gone for a tendon release procedure, she was a good candidate for MAKOplasty surgery—a robotic arm-assisted procedure designed to relieve the pain caused by joint degeneration. By selectively targeting the damaged part of the knee, Dr. Gesell could use this minimally invasive procedure to help relieve Cheryl’s pain while sparing the healthy bone and ligaments surrounding the damaged portion of her knees.

“Dr. Gesell is kind and has a good bedside manner—he explained all my options and guided me toward MAKOplasty,” says Cheryl. “I’m glad I was able to get this done before I had to undergo a full knee replacement, because this procedure was much less invasive.”

Before surgery, Cheryl went to Monmouth Medical Center for an information session, which she found very helpful. There she learned what to expect before, during and after surgery. “The instructor answered all of my questions and told me, ‘You will get up the day of your surgery,’” says Cheryl, who underwent bilateral partial knee replacements with MAKOplasty in January.

Just as the instructor had predicted, she got out of bed within 24 hours of surgery, albeit with some help.

“At one point, I was having trouble getting out of a chair, and the team rallied around me and lifted me to a stand,” says Cheryl. “They wouldn’t let me fail—I was impressed by that.” She adds that the nurses’ attentiveness and encouragement were especially helpful during her recovery. “They knew exactly what to do to get me up. What a great hospital—everyone pushed me to succeed.”

At six weeks post-surgery, Cheryl had made tremendous progress. “I no longer hear crunching, and my knees are feeling good,” she says. She’s looking forward to resuming old customs—rollerblading and walking four miles daily, for example—and she’s enjoying her pain-free mobility, stairs and all.
A LONGTIME ATHLETE GETS HIP

After playing offensive tackle for the University of Rhode Island—followed by 30 years of recreational basketball—Mike Jensen had severe hip pain from all the wear and tear. But thanks to minimally invasive hip replacement surgery at Monmouth Medical Center, the 50-year-old Brielle resident is now pain-free and back to an active lifestyle.

“Before the surgery, it got to the point where I couldn’t walk long distances,” recalls Mike. “Every day, walking was an issue.”

He made appointments with several surgeons, and each said the same thing: Mike needed a hip replacement. The cartilage in his left hip had worn away, causing severe arthritis.

“It was just bone on bone,” recalls the 6’3” athlete, who owns a medical equipment business and sells commercial real estate.

After limping around for another year, Mike saw Dr. Chalnick. Mike’s condition had become so bad that he was definitely ready for surgery. Dr. Chalnick performed the procedure on a Monday morning, and by late that afternoon Mike was walking down the hall with a walker. About a week later he returned to work. Two weeks after leaving the hospital, he was walking without assistance.

“The care was exceptional,” says Mike. “I had minimal pain. Everyone, from pre-admission to the nursing staff, was very professional.”

“Mike has had a wonderful result from surgery,” says Dr. Chalnick, a fellowship-trained, board-certified orthopedic surgeon who is one of the few in New Jersey who perform robot-assisted joint replacement surgery. “He played a key part in the surgery’s success, too, as he’s in excellent shape and is very motivated.”

Mike prepared for surgery by exercising on a stationary bike and elliptical trainer. He stayed at Monmouth Medical Center just three days. “I was taken care of very well and did as much physical therapy as possible during my stay,” he recalls.

Since the operation, he’s continued to work out diligently. And though he gave up basketball, he remains very active with golf and stand-up paddling.

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DO YOU HAVE HIP OR KNEE PAIN?
If you believe a joint replacement procedure could be the answer for you, you can find out about the latest minimally invasive options—including robotic-assisted partial knee and total hip replacement—by attending an information session at Monmouth Medical Center. Led by a board-certified orthopedic surgeon, sessions are given monthly on Wednesday afternoons at 5 p.m., and except where indicated below they take place in the Unterberg Learning Center. Light refreshments are served. Upcoming dates:
—June 17 (in Stanley 206), July 8, Sept. 30, Nov. 18: Speaker: Mark W. Gesell, M.D.
—Aug. 5 and Oct. 21: Speaker: David Chalnick, M.D.
—Dec. 2 (location to be determined): Speaker: Arthur Mark, M.D.
To learn more, call The Joint Replacement Center at Monmouth Medical Center at 732.923.7666 or visit barnabashealth.org/mmcjoint.
It pays to be screened for lung cancer

For eligible ex-smokers, low-dose CT scanning can bring peace of mind.

Mark Retacco, 52, of Toms River, and his sister, Monique, 46, a Neptune City resident, are different in many ways. They even spell their surname differently. (For her it’s Ritacco.) But they do have two things in common: Their mom was a heavy smoker who died of lung cancer last fall at 76. And they’re both former smokers themselves. When it comes to the risk of lung cancer, they have reason to be concerned. That’s why lung cancer screening was a good idea for each of them, and having undergone it they’re both breathing more easily about their health today.

When the Leon Hess Cancer Center at Monmouth Medical Center launched the Lung Cancer Screening Center program, Mark and Monique jumped at the opportunity to be screened. The program offers two lung cancer screening research studies. Individuals who meet specific criteria may be eligible to participate and receive a low-dose CT [computed tomography] lung scan at no cost.

» Lung Cancer Screening Designation First in Region

Monmouth Medical Center is the first hospital in Monmouth and Ocean counties to be designated by the American College of Radiology (ACR) as a Lung Cancer Screening Center.

The ACR launched the Lung Cancer Screening Designation program last May to recognize facilities committed to providing quality screening care for patients at the highest risk for lung cancer. Facilities applying for this designation must have an active screening program and meet specific equipment, personnel and imaging protocol requirements.

Lung cancer screening with the use of low-dose CT, along with appropriate follow-up care, significantly reduces lung cancer deaths and is cost-effective compared with other major cancer screening programs, says Ella Kazerooni, M.D., chair of the ACR Committee on Lung Cancer Screening: “Lung cancer screening in patients at high risk of acquiring the disease is the most effective way to identify tumors and reduce lung cancer deaths.”
True, Mark, an artist, initially felt uneasy getting screened because of his personal and family history. (He recalls having asked his mom to stop smoking ever since he was a teenager. And he and Monique also had an aunt who died of lung cancer a year ago.) But while the possibilities were anxiety-provoking, the screening process was easy, comfortable—and ultimately reassuring.

“Monmouth Medical Center’s staff was kind and caring throughout the screening,” says Mark. Fortunately, results showed his lungs were clear, though they identified a cyst on his liver, which he promptly had checked out. “I felt fantastic knowing my lungs are healthy—especially since a cyst on his liver, which he promptly had checked out."

Monique’s scan was mostly clear as well—although a very small spot on her lung was identified, requiring a follow-up with her doctor next year as a precaution. “I highly recommend getting screened,” she says, “because if there’s something serious going on, you’ll have the opportunity to catch it and do something about it. Now, thanks to this screening, I’m aware of the spot on my lung and can make sure it’s monitored.”

For nearly 50 years, Monmouth Medical Center has broadened its leadership role in oncology services through the ongoing expansion of state-of-the-art programs and technologies offered in many areas of cancer prevention, detection, treatment and ongoing aftercare. Today, its Leon Hess Cancer Center is part of The Penn Cancer Network—a select group of community hospitals in New Jersey, Pennsylvania and Delaware—collaborating with the Abramson Cancer Center at the University of Pennsylvania to provide excellence in patient care throughout the region. Penn’s Cancer Network hospitals are recognized for their excellence in patient care and commitment to improving the health and well-being of their community.

**SPEEDCARE CARE COMES TO THE E.R.**

Monmouth Medical Center recently installed a 64-slice CT scanner—which gives physicians the ability to see more anatomical detail in only a fraction of the time—in its Emergency Department to provide quicker, more convenient imaging for emergency patients. “Multi-slice scanners, including the latest generation of 64-slice scanners, provide for a rapid and comprehensive assessment of patients and are a valuable tool in the evaluation of stroke patients,” says Richard Ruchman, M.D., chairman of Radiology at Monmouth. Monmouth Medical Center offers a Stroke Center that provides the highest level of patient care through a multidisciplinary approach that encompasses acute stroke management and long-term rehabilitation. The center is committed to providing an integrative plan of care for stroke patients and a seamless delivery of the best possible care. “Once a stroke occurs, time matters,” says Victor Almeida, D.O., chairman of Emergency Medicine at Monmouth. “The faster a patient can be evaluated and we can begin treatment, the better the outcome may be. This 64-slice CT offers us, right here in the ED, the speed and image resolution required for rapid examination of the blood vessels in the brain, enabling physicians to make a quick diagnosis of stroke and determine the extent of the damage.”

Monmouth Medical Center originally introduced the technology of 64-slice CT imaging in 2008 and has added the additional 64-slice CT to its Emergency Department to ensure that the most expansive diagnostic technology is immediately available to its ER patients.

The unit was purchased with funding from Monmouth Medical Center Foundation, the hospital’s fund-raising arm. Requiring little more than an injection of X-ray contrast through an IV placed in the arm, the speed and resolution of 64-slice CT angiography allow physicians to view even the smallest of arteries in the brain, heart and peripheral vascular system. At Monmouth Medical Center, patients undergoing CT exams have the added confidence of knowing that they are getting the best possible image with the smallest possible radiation dose. In 2012, Monmouth Medical Center received CT accreditation from the American College of Radiology (ACR) with zero deficiencies. “The ACR added new stipulations in 2011 to lower radiation doses,” says Thomas Piccoli, DABR, chief imaging physicist/RSO, Monmouth Medical Center. “Its goal in implementing these new standards is to award accreditation only to those facilities that can capture the best clinical images possible with the smallest radiation dose.”

Monmouth’s Cline/D’onofrio Emergency Services Pavilion is led by a team of board-certified emergency medicine physicians and consistently is ranked among the top 10 ERs in the state and among the top 10 percent in the nation for patient satisfaction. Monmouth’s Emergency Department offers comprehensive care to the acutely and chronically ill and handles more than 46,000 annual visits.

To learn more about Radiology or Emergency Medicine services at Monmouth Medical Center, visit barnabashealth.org/Monmouth.