CATCHING BREAST CANCER EARLY

60 YEARS OF SERVICE: CELEBRATE WITH US!

GETTING A HEART RATE UNDER CONTROL

CANCER CARE: A NEW VISION
**HEALTH NEWS**

**FIRST LONG COAT CEREMONY CELEBRATES MEDICAL RESIDENTS**

Community Medical Center (CMC) held an inaugural long coat ceremony for its first group of Graduate Medical Education residents. The transition from a medical student’s short white coat to the long coat of a physician is an important moment for new doctors. For many residents, the COVID-19 pandemic impacted their medical school white coat ceremony and graduation, so CMC’s event was particularly significant. As part of a teaching hospital, CMC’s new physicians will learn from the physicians, nurses and staff of the Toms River-based hospital.

**CMC EARNS RADIATION ONCOLOGY REACCREDITATION**

The Radiation Oncology department at Community Medical Center (CMC) successfully completed its reaccreditation survey with the American College of Radiology (ACR). The Radiation Oncology Practice Accreditation (ROPA) program provides a thorough peer review and evaluation of all aspects of patient care, including facility staff, equipment and treatment records, and also appraises patient safety policies and quality assessment activities. The accreditation demonstrates CMC’s commitment to safe and quality care.

**NEW DIRECTOR OF DIVERSITY AND INCLUSION JOINS COMMUNITY MEDICAL CENTER**

Ashley Riker, MS, is a wife, mother, advocate, facilitator and trainer. She has worked in the nonprofit and public service fields for the past 13 years, including the Department of Child Protection and Permanency, Garden State Equality and the New Jersey Division on Civil Rights. As the Director of Diversity and Inclusion at Community Medical Center, Ashley is committed to ensuring equitable access for patients and employees, delivering culturally competent care and services, and eliminating health disparities.
2. WELCOME LETTER. A community update from our CEOs.

4. 60 YEARS OF COMMUNITY CARE. CMC celebrates a history of service, growth and connection.

6. THE POWER OF SCREENING. Early detection was key for one breast cancer survivor.

8. HAPPY HAUNTING. Doctors’ tips on keeping Halloween fun and safe for kids and adults alike.

9. WHAT YOU MAY NOT KNOW ABOUT CHOLESTEROL. Manage it now for a big payoff later in life.

10. HELPING SENIORS STAY HEALTHY. How the annual wellness visit can lead to improved health all year long.

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22. ON THE ROAD AGAIN. Treatment for irregular heartbeat gets a grateful man back on his bike.
In 1961, Community Memorial Hospital (as it was then called) opened its doors with 50 beds. Six decades and 1 million patients later, Community Medical Center (CMC) has 596 beds and is the fifth largest hospital in New Jersey. It’s a 60th anniversary measured both in years and lives improved and saved.

“From the beginning, our mission has been to improve the health of the community,” says Patrick Ahearn, Chief Executive Officer, CMC. “As the Ocean County community has grown, we’ve grown with it. We add technology, space, services and programs not for their own sake but to reflect and address what the community needs and how we can make a difference in the lives of the people we serve.”

Examples include neuroscience, oncology, cardiac and orthopedic programs that Ahearn says are among the best in the state. “I smile when I see the impact we’ve had,” he says. “The person who accomplished their dream of hiking the Grand Canyon because of Mako Robotic-Assisted hip replacement at CMC; the little girl who can participate in normal activities like kindergarten and gymnastics thanks to epilepsy care at the Jay and Linda Grunin Neuroscience Institute; the growing cancer survivorship celebrations at the J. Phillip Citta Regional Cancer Center—these are all signs that the care we’re providing matters.”

The community has likewise embraced the hospital. Ahearn cites generous donors who have grown up in the area and provided vital financial support over the years, as well as families in which multiple generations have worked at the hospital, now the area’s largest employer. “People here are committed to their community, and our connection to our patients is deep,” Ahearn says. “Our legacy is the health and wellness of our community. I’m proud of what we’ve done to create it and what we’re doing to continue it.”

To learn more about Community Medical Center, visit www.rwjbh.org/community.
1960s
Shortly after opening with 15 physicians and 90 employees, the hospital achieves 100 percent occupancy, and the emergency room treats 1,352 patients in the first year. The hospital quickly grows from 50 to 116 beds and construction begins on a 110-bed addition. The community welcomes the hospital, with 300 volunteers donating 45,000 hours.

1970s
The West Wing opens, bringing the bed complement to 230. A new, expanded ER begins operating, along with a pediatrics wing, lab facilities and a 10-bed coronary unit equipped with sophisticated cardiac monitoring technology funded by the hospital’s Auxiliary. Pecora Auditorium opens, funded by proceeds from the Second Time Around Consignment Shop. By decade’s end, the hospital has 367 beds, 150 physicians and 800 employees.

1980s
Services and facilities expand dramatically across multiple dimensions and disciplines, such as radiation oncology and therapy services that include high-technology linear accelerators to treat cancer patients. Other services that launch include same-day surgery, mobile intensive care, home healthcare, family-centered birthing, hospice, laser surgery, noninvasive cardiology and emergency pediatric care. The hospital also establishes a foundation and changes its name to Community Medical Center.

1990s
Care options continue growing with the addition of facilities such as a Center for Sleep Disorders and a Cardiac Catheterization Lab, along with services such as radioactive seed implants for treating prostate cancer and other advanced radiology technologies. CMC also forges a number of partnerships that regionalize the hospital, including joining the Saint Barnabas Health Care System. CMC now has 596 beds and opens an 800-car parking garage for employees.

2000s
Technologies continue to expand or improve with services such as advanced imaging systems for performing diagnostic tests like MRIs and breast biopsies or guiding surgeons during delicate procedures involving the nervous system. A variety of programs and centers open, including the J. Phillip Citta Regional Cancer Center, the Congestive Heart Failure Program, the Women’s Imaging Center and the Joint and Spine Institute. Other new or expanded services include elective angioplasty, inpatient hospice, 24-hour neonatology, First Moments Maternity Services and a 17-bed transitional care unit.

2010s
TO PRESENT—AND FUTURE
CMC becomes part of RWJBarnabas Health, making a wider range of highly specialized care and leading-edge research available to the community through New Jersey’s largest healthcare system. The hospital has served the community through disruptive crises including Hurricane Sandy and the COVID-19 pandemic. At the same time, CMC continues to build strength in services such as neuroscience and robotic surgery and in a variety of programs and initiatives. Among them are a new residency program that makes CMC an academic medical center; projects to upgrade facilities with amenities such as private rooms and a renovated, COVID-resistant Emergency Department; and taking services outside of hospital walls and into the community through strategically placed healthcare locations.
Getting a regular screening mammogram helped Lynne Kennedy catch her breast cancer at an early stage when it had the best chance of successful treatment.
EARLY DETECTION WAS KEY FOR ONE BREAST CANCER SURVIVOR.

Lynne Kennedy, 60, of Beachwood, was three weeks past the one-year mark of her last annual mammogram when she got a new test at the Community Medical Center (CMC) Women’s Imaging Center in March 2021. But there was never any question that she would get the screening. “I’ve been going for a yearly mammogram forever,” she says.

When the center called to say she needed additional imaging tests, Lynne wasn’t too concerned. She’d had other callbacks over the years. But this time after the extra tests, Lynne was asked to come in for a biopsy. “That set off anxiety in me because I had never gone that far,” she says. “I’d never been called back for a biopsy.”

Lynne returned to the Women’s Imaging Center for the procedure. Unfortunately, the biopsy showed that she had breast cancer. “It came pretty much as a complete shock,” Lynne says. “Breast cancer doesn’t run in the family.”

Still, Lynne had ample reason for hope. “My doctor explained that if there can be a ‘good’ cancer, this was it,” she says. She, her husband and their two adult daughters were able to face the diagnosis head-on and stay positive throughout the ordeal.

A SILVER LINING

Lynne’s experience attests to the power of regular mammograms and early detection. Her diagnosis was stage 1 invasive ductal carcinoma—a cancer that was small and unlikely to have spread to the rest of her body. Lynne learned her cancer was also one of the easiest to treat. It was estrogen receptor (ER) positive, meaning that its growth was fueled by estrogen. There are a number of effective treatment options for this type of cancer.

As a result of the early diagnosis, Sumy Chang, MD, a fellowship-trained breast cancer surgeon at CMC and a member of the RWJBarnabas Health Medical Group, was able to perform a less invasive surgery. “When a cancer is small and we can find it on imaging, we are able to save the breast,” Dr. Chang says. Losing a breast through a mastectomy—even when women facing breast cancer surgery choose to have their breast removed—can have profound consequences. “It has a big emotional impact,” Dr. Chang says. “Sometimes it’s less about the loss of breast tissue than the loss of sensation.”

Sparing the breast also translates into a faster and less painful recovery.

Dr. Chang removed one suspicious-looking lymph node, but it was cancer-free. This indicated that cancer cells were unlikely to have migrated to other parts of Lynne’s body. Lynne was also a candidate for less aggressive post-surgery treatment. After the tumor was removed, she received radiation therapy for 21 days to kill any remaining cancer cells. Despite some fatigue, she fared well during this period.

Lynne did not need chemotherapy and was able to avoid its side effects because the cancer was caught early, says Horace Tang, MD, a hematologist/oncologist at CMC and a member of the RWJBarnabas Health Medical Group. Since her cancer was ER positive, she started taking an aromatase inhibitor, which stops production of estrogen in postmenopausal women. She will take the medication every day for five years to prevent other cancers from developing.

MAMMOGRAMS MATTER

If Lynne had skipped her mammogram, she might be telling a different story. “Mammograms have their biggest impact when cancer is caught from one year to the next,” says Dr. Chang. That’s why you need them every year, she says.

“It was very good that my cancer was caught early,” Lynne says. “When I met with Dr. Chang and we were looking back at the films from last year, it was not there. I probably would have never felt it.”

“A lot of people think if they have cancer, it’s a death sentence,” says Dr. Tang. “But when cancer is stage 1, you have a very good prognosis. With the appropriate treatment, I expect Lynne to have a life expectancy comparable to women who don’t have breast cancer.”

Lynne may experience menopausal symptoms on the aromatase inhibitor, including mood changes, Dr. Tang says. She may also develop joint pain or bone-thinning osteoporosis. But most patients have no side effects, and Dr. Tang will monitor her to address any serious health issues that crop up.

But Lynne knows she could have been looking at a far less certain future. And she’s worried that many women don’t take mammograms seriously. “Some of my friends don’t go for screenings,” she says. “I hear women say, ‘I hate mammograms because they are so uncomfortable.’ But I can’t stress enough how important it is to catch breast cancer early. If I didn’t go for the screenings, they would not have found mine when they did and I wouldn’t be in the position that I’m in now.”

To make an appointment for a screening mammogram at the CMC Women’s Imaging Center, call 732.557.3363 or visit www.rwjbh.org/mammo.
It’s dark and the air has a whiff of mischief. That’s cause enough for parents to heed safety pointers about Halloween. Add the lurking presence of a monster virus, and there’s even more reason to be mindful of safety for trick-or-treating or party-going children.

“I have five kids ranging in age from 5 to 25 and understand the challenge of finding that balance between enjoying Halloween and doing it safely for small kids, teens and young adults,” says fellowship-trained pediatric emergency medicine physician Lisa Armstrong, MD, FACEP, Director, Pediatric Emergency Department, and Medical Student Clerkship Director, Emergency Medicine Residency Program, Community Medical Center (CMC). “That’s especially true during a period of pandemic, when people want to see their friends and make up for a lost year.”

As the virus that causes COVID-19 continues to evolve, precautions related to disease transmission need to be flexible, says Nicole Maguire, DO, FACEP, Program Director, Emergency Medicine Residency Program, CMC. “We’re still in uncharted territory,” she says. The two CMC emergency medicine specialists advise taking steps like these.

**Forgo costume masks.** Traditional Halloween costume masks limit visibility, especially for younger children who may be wandering streets amid traffic. “It’s better to use face paint or head decorations,” Dr. Armstrong says.

**Wear face masks when appropriate.** Unvaccinated children should wear disease-preventing face masks when indoors around people who don’t live in their household, such as at parties.

There’s relatively little risk of spreading COVID-19 in outdoor settings such as walking house to house while trick-or-treating, Dr. Maguire says. “But when they get closer to people whose vaccine status is unknown, such as when approaching a house, children should wear a mask for their own protection and that of others.”

**Feel sick? Stay home.** If you’re not feeling well, keep yourself and others safe by remaining home. When your immune system is fighting any illness, you’re at a higher risk of contracting something else. Under-the-weather people should also avoid handing out goodies to trick-or-treaters.

**Boost visibility.** Avoid dark clothing when out on streets at night. If a costume choice makes light colors unsuitable, put strips of reflective tape on the costume, bag or shoes. Travel in groups to make yourself more noticeable to motorists.

**Have a communication plan.** “On Halloween, parents are typically more lenient about kids traveling by themselves in small groups at night, so it’s important to check in and have a way to communicate in case of emergency,” Dr. Maguire says. Make sure kids have phones, and consider installing an app that allows parents to track their children’s whereabouts. Kids without phones should pocket a paper with parents’ or trusted adults’ names, addresses and phone numbers.

**Wear layers.** Weather in late October can swing dramatically. “Most costume material is very thin, so it’s important for children to wear layers that keep them warm enough,” Dr. Armstrong says.

**Consider at-home activities.** Try a family indoor scavenger hunt, pumpkin carving or movie marathon if a household member is at a higher risk of contracting COVID-19, isn’t vaccinated or has other reasons to be uncomfortable with children going door to door.

“Whatever your plans, remember that conditions can change rapidly,” Dr. Maguire says. “Be willing to change plans based on what’s going on at that time.”

To learn more about Community Medical Center, visit [www.rwjbh.org/community](http://www.rwjbh.org/community).
You probably know that cholesterol is a fat-like substance in the blood that can cling to the walls of arteries, leading to cardiovascular disease or stroke. And you know that controlling cholesterol involves eating right, exercising and taking medication as prescribed.

But because it takes years before a person really feels the effects of high cholesterol, you may not realize just how big an impact it will have on your future.

“Managing cholesterol is a way of investing in your health decades from now,” says David Feldman, MD, Section Chief of Advanced Heart Failure and Transplantation at Newark Beth Israel Medical Center. “In my field, we take care of patients who have had acute heart attacks, or are in cardiogenic shock, or who need a heart transplant. But many serious heart problems can be prevented through decades of maintaining healthy cholesterol levels.”

Here, Dr. Feldman clears up some common misunderstandings:

- **We need cholesterol.** “It’s the basic building block for all the male and female hormones in the body and helps enhance brain function,” he says. “That’s why the cholesterol levels in pregnant women shoot up; they need it to help create another life.”

- **It’s not all about the numbers.** We’re used to hearing that an overall cholesterol level above 200 is outside the healthy range, but Dr. Feldman says the thinking on that has evolved. “There are many variables—how much medication you can tolerate, what your genetic predisposition is, what level you’re starting from,” says Dr. Feldman. “In some cases, reducing cholesterol too far can be dangerous.” Your doctor can customize a target to best suit your individual situation.

- **Some foods are more equal than others when it comes to combating cholesterol.** “A niacin, or vitamin B3, supplement is especially helpful in lowering ‘bad’ LDL [low-density lipoprotein] levels, as are fish, flaxseed oil and foods with lots of fiber,” says Dr. Feldman. Consult your physician before adding any supplements to your diet.

- **A moderate amount of alcohol may help keep cholesterol low.** “Moderate’ means one drink a day for women, two for men. That’s defined as one beer, 1.5 ounces of liquor or 4 ounces of wine,” Dr. Feldman explains. “Also, you can’t skip Wednesday and Thursday and then have triple the amount on Friday—that’s not a healthy approach.”

- **Any amount of activity helps reduce cholesterol.** “It may not be realistic for you to run a few miles every day and lift weights every other day,” says Dr. Feldman. “You just have to work on yourself. If you’ve been sedentary and you get off the couch and go for a walk for 30 minutes every day, or even a few times per week, you’ll improve your life, keep your cholesterol and blood sugar down, feel better and have the potential to live longer.”

**WHAT YOU MAY NOT KNOW ABOUT CHOLESTEROL**

**MANAGE THESE MOLECULES NOW FOR A BIG PAYOFF LATER IN LIFE.**

*David Feldman, MD*

PUMPKIN POWER

What does pumpkin have to do with reducing your risk of cardiovascular disease? More than you may think. “Pumpkin’s high in vitamins A, C and E, and as a consequence is related to decreasing inflammation in the body’s immune system. That means decreasing risk for heart disease and cancer,” says cardiologist David Feldman, MD. “Pumpkin has twice as much fiber, which helps lower cholesterol, as kale. And unlike many canned foods, canned pumpkin retains its nutritional value.”

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If you or a loved one has Medicare, one of its most important benefits is the annual wellness visit. This no-copay visit is not the same as an annual physical. Instead, it’s a chance for you and your provider to create a personalized preventative plan to help you stay well and get any help you may need.

“The annual visit is my favorite visit to have with patients because I really get a chance to talk to them and to hear about how they live every single day,” says Jessica Israel, MD, Senior Vice President, Geriatrics and Palliative Care, for RWJBarnabas Health (RWJBH) and a member of RWJBarnabas Health Medical Group. “We touch on areas of the patient’s life that might not come up otherwise.”

The range of subjects covered is broad. “I ask about whether they have access to healthy foods and whether their teeth hurt when they chew,” Dr. Israel says. “I ask about throw rugs in their home that might be a tripping hazard, and whether they need safety bars in the shower. I ask if they have someone to call if they need help.”

Patients shouldn’t feel intimidated by these questions, but should welcome and even demand them. “You can never put too much value on what comes out of an honest conversation,” Dr. Israel says.

THE RIGHT QUESTIONS
Dr. Israel’s philosophy is shared by providers of geriatric care throughout the RWJBH system and RWJBarnabas Health Medical Group. RWJBH is a member of the Age-Friendly Health
System action community, an initiative spearheaded by the John A. Hartford Foundation, the American Hospital Association and the Catholic Health Association of the United States.

Being an Age-Friendly Health System means applying four evidence-based elements of high-quality care, known as the 4M Framework, to all older adults. “We apply the 4Ms—medications, mobility, mentation and what matters—to elder healthcare in all our hospitals as well as outpatient settings, including in the annual wellness visit,” Dr. Israel says.

“For example, elderly people are often taking multiple medications because they have more than one health condition. We’ll ask about all of them to be sure there are no negative interactions or side effects,” she explains. “We’ll ask about mobility—how much and how well they’re moving around and whether physical therapy or equipment is needed. We’ll talk about areas related to mentation, or the mind—are there any issues with anxiety or depression, or perhaps forgetfulness?”

Equally important, she says, is the “what matters” aspect of the conversation, which covers patients’ goals for their healthcare and what they don’t want, as well as the importance of having an advance directive. “The ‘what matters’ talk will vary from patient to patient,” Dr. Israel says. “We have a saying in geriatrics: ‘If you’ve seen one 80-year-old, you’ve seen one 80-year-old.’ Each patient is different, and the art of medicine is getting to know your patients.”

Annual wellness visits are inevitably revealing, says Dr. Israel. “Each time, something comes up that I didn’t know about the patient,” she says. “Then, we can have the next discussion: ‘How can we make this better?’”

“A MEDICARE ADVANTAGE PLAN FOR NEW JERSEY

Braven Health, a new Medicare Advantage offering, was created with New Jersey senior citizens in mind. A partnership between three New Jersey healthcare leaders—RWJBarnabas Health, Hackensack Meridian Health and Horizon Blue Cross Blue Shield of New Jersey—Braven Health offers access to 51,000 in-network healthcare professionals and 82 in-network hospitals and healthcare facilities.

“Having a partnership between our medical system and Horizon together means that patients have a lot of choices in their network,” explains Jessica Israel, MD, a Braven Health Provider Council Member and Senior Vice President, Geriatrics and Palliative Care, for RWJBarnabas Health. “In addition, procedures and prescriptions get approved more quickly because we’re all working together with the goal of eliminating the hassle that can come with healthcare plans.”

Braven Health also helps patients focus on wellness by offering flexible benefits for a range of wellness activities, such as joining a gym, getting a mammogram, taking a fitness class and getting bars installed in the shower for safety.

Launched in January 2021, the plan is available for residents of Bergen, Essex, Hudson, Middlesex, Monmouth, Ocean, Passaic and Union counties. (The program is not available in Somerset and Mercer counties.) As of May 31 this year, Braven had a higher enrollment than any other Medicare Advantage plan in the eight counties it serves.

To learn about Medicare and Medicare Advantage programs, including Braven Health, visit www.rwjbh.org/braven.

To learn more about senior healthcare and geriatric medicine at RWJBarnabas Health, visit www.rwjbh.org/seniorhealth.
Soccer is the most popular sport in the world—but for many kids in urban communities, there’s no good local place to play it.

Now there is for kids in Newark, New Brunswick and Hamilton. During the height of the COVID-19 pandemic, the Somerset-based Players Development Academy (PDA) created its Urban Initiative to bring soccer facilities and coaching to underserved communities across the nation. Thanks to strong partnerships with RWJBarnabas Health (RWJBH) and local communities, the initiative is up and running in New Jersey.

In May, Robert Wood Johnson University Hospital Community Field opened at Kossuth Park in New Brunswick. In July, Newark Beth Israel Medical Center Community Field opened at the Marquis “Bo” Porter Sports Complex in Newark. Also in July, the RWJUH Hamilton Community Field opened at the Bromley Sports Complex in Hamilton Township. More fields will open across the state in the RWJBH service area this year and in 2022.

The fields are part of RWJBH’s commitment to enhance well-being in the communities it serves. “Our mission, improving the health and lives of the people in our communities, is an audacious goal,” says Barry Ostrowsky, President and CEO of RWJBH. “In order to do that effectively, you have to have a team of people dedicated to big ideas, and you have to have similarly minded partners.”

In addition to providing funding to build the fields, RWJBH will provide off-the-field education in nutrition, wellness and sports performance. The PDA will run soccer clinics and other training sessions, and local recreation departments will manage the fields. Often, the fields serve as
an anchor for further revitalization of a neighborhood or expansion of community sports facilities.

**A SOCCER OASIS**

Each field is approximately 40’ by 70’, allowing for a scaled-down version of the game known as futsal. These relatively small areas make the most sense for urban settings and allow players to have more time on the ball. The fields are made of artificial turf, allowing for nearly year-round play.

“PDA has been an incredible partner as we create a home for soccer programs as well as community-member pickup games in underserved urban areas,” says Justin Edelman, Senior Vice President, Corporate Partnerships, at RWJBH. “The reaction has been overwhelmingly positive. You see such a wide range of people—friends, family, all ages—using the facilities.”

“This type of field is important for the community because it’s an oasis for the game,” says Gerry McKeown, Boys Coaching Director, PDA. “The benefit of putting fields in these locations is that children can walk to them right in their neighborhood, and play or compete or just have fun, and fall in love with the game any way they would like. We’re bringing the best of the beautiful game to boys and girls that need our support. We hope this initiative sparks greater interest in the game, leading to more opportunities for kids from diverse backgrounds.”

To learn more about the Urban Initiative, visit [www.urbaninitiativepda.org](http://www.urbaninitiativepda.org). To learn more about RWJBarnabas Health social impact initiatives, visit [www.rwjbh.org/socialimpact](http://www.rwjbh.org/socialimpact).
It will soar 12 stories and cover 510,000 square feet. It will cost an estimated $750 million and will be completed in 2024. Most important, the Jack & Sheryl Morris Cancer Center, which broke ground in June, will transform cancer research and care throughout New Jersey and beyond. The state’s first and only freestanding cancer hospital is a joint venture of RWJ Barnabas Health (RWJBH) and Rutgers Cancer Institute of New Jersey, in partnership with the New Brunswick Development Corporation.

“The Jack & Sheryl Morris Cancer Center will be a model for cancer care delivery, bringing together the three mission areas of academic medicine—
research, education and patient care—under one roof,” says Barry Ostrowsky, President and Chief Executive Officer, RWJBH.

COMPREHENSIVE SERVICES
“The new cancer center brings together all the facets of research, prevention and clinical care that we drive and deliver into one location,” says Rutgers Cancer Institute of New Jersey Director Steven K. Libutti, MD, who is also the Senior Vice President of Oncology Services at RWJBH.

The facility will have 10 state-of-the-art laboratories where teams of scientists will study cancer as a disease and develop new treatments. Many of the discoveries from these laboratories will be translated directly to the clinical setting at Rutgers Cancer Institute and across the RWJBH system.

“We will be bringing science from the bench to the patient’s bedside and back again,” says Dr. Libutti. “That means we’ll be able to further tailor patient treatments and collect important research data more rapidly and directly.”

Patients will be able to receive a wide range of both inpatient and outpatient cancer care in the new cancer center, including advanced imaging services as well as radiation and chemotherapy treatments.

The facility will have 96 inpatient beds, including an entire floor dedicated to surgical services.

Exam rooms have been designed so that a multidisciplinary team of specialists can see a patient in one location, rather than having the patient travel from doctor office to doctor office. Specially trained oncology nurse navigators will guide patients on their journey from diagnosis through survivorship.

Wellness, prevention and education resources, including a wellness garden, will be available for the community, patients, caregivers and families.

A POWERFUL PARTNERSHIP
RWJBH and Rutgers Cancer Institute, the state’s only National Cancer Institute-Designated Comprehensive Cancer Center, have partnered to provide close-to-home access to the most advanced cancer care.

Cancer specialists throughout RWJBH collaborate with experts at Rutgers Cancer Institute to devise the best treatment plan for each patient, including clinical trials, immunotherapy and precision medicine. That means that a patient being treated for cancer at any RWJBH hospital will have access to the treatment options and clinical expertise anywhere in the hospital system, as well as at Rutgers Cancer Institute.

“The new cancer center will be integrated into our multidisciplinary care paradigm, which is across the entire RWJBarnabas Health system,” says Dr. Libutti.

“We believe it is critically important that we have sites and facilities all across the state to bring cancer care as close to home as possible,” he says. “We also believe that we need one hub that allows us to bring the highest level of extremely specialized, multidisciplinary cancer care in the setting of groundbreaking research.”

The center is named in recognition of the philanthropic leadership of Jack Morris, who has been a longtime supporter and pillar in New Brunswick development, and his wife, Sheryl.

“People shouldn’t have to go all over the country to get great care,” says Jack Morris. “We’re doing it right here. It has been our vision, our hope and our dream to have the top cancer center in the nation here in New Brunswick. Sheryl and I are so proud that we can play a role in helping to make this dream a reality.”

To learn more about the Jack & Sheryl Morris Cancer Center, visit www.cinj.org/jackandsherylmorriscancercenter.
CHRONIC DISEASE: A TEEN TAKES CONTROL

A TEAM OF EXPERTS PROVIDES THE TOOLS NEEDED TO MANAGE TYPE 2 DIABETES.

“I was so nervous when I first stepped into the hospital,” says Ariely Garcia. “I was so far away from home.”

Ariely was just 16 when she got a diagnosis of Type 2 diabetes, a chronic condition marked by high blood glucose levels that can result in major health complications. Often referred to as adult-onset diabetes, Type 2 can also develop during childhood as a result of improper nutrition and lack of exercise.

Although Type 2 diabetes can’t be cured, it can be managed with healthy eating, medication and lifestyle changes. On her doctor’s recommendation, Ariely had come to the Chronic Illness Management Program (CIMP) at Children’s Specialized Hospital in New Brunswick to learn how to do just that.

SKILLS AND STRATEGIES

Ariely worked with a variety of CIMP specialists in areas including recreational therapy, physical therapy, occupational therapy, nutrition education and psychology.

After four weeks in the program, Ariely felt confident that she could manage her diabetes. Her greatest fear: that she would “fall off the wagon” when she got back to her familiar home and school environment. And in fact, by the fall of that year, Ariely had stopped taking the medication she needed to help manage diabetes.

Recognizing that she needed help, she asked if she could go back to Children’s Specialized Hospital. “I knew the program had everything I needed to take control of my diabetes again, and I knew that this time, I was ready,” she says.

At the beginning of 2021, Ariely re-entered CIMP. “This time, I was less nervous and was ready to get back on track,” she says. “I was on board with the hard work I needed to do.”

Her team was prepared with a plan that was customized to provide resources for her home environment. During her stay, Ariely strategized with the physical therapist on ways to stay active while at home, including the use of free smartphone apps and exercises that don’t require equipment. She learned to grill chicken, make a kale salad and prepare a breakfast smoothie.

She met with the psychology team to talk about stressors and learn to better communicate and cope with challenges. A certified diabetes educator talked with Ariely about the condition, with lessons culminating in “Jeopardy”-style games at the end of each week.

Ariely went home the day after her 18th birthday. “Now I really understand the effects diabetes has on me,” she says, “and I don’t need to rely on anyone to do what I need to do to control it.”

For more information about Children’s Specialized Hospital, call 888.244.5373 or visit www.rwjh.org/childrensspecialized.

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 a full scope of developmental, behavioral and mental health concerns.

We have convenient locations throughout the state: Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Somerset, Toms River, Warren and West Orange.

Healthy Together | Fall 2021
The value of a stable, safe home became even clearer during the COVID-19 pandemic as families spent more time indoors. Yet public health protocols restricted Northern Ocean Habitat for Humanity—local affiliate of the international organization that builds and improves residences for low- to medium-income people—from assembling volunteer crews to execute its projects.

Now with some pandemic restrictions eased, crews including a faithful contingent from Community Medical Center (CMC) are ramping up efforts. “Our mission is to bring communities together, providing hope and empowering people through shelter,” says Kristine Novakowski, Northern Ocean Habitat for Humanity’s executive director. “Once people are not worrying about where they’ll live next month or living in moldy, dilapidated or unsafe apartments, they’re better able to focus on family health and improving healthy lives.”

PERSONAL IMPACT

CMC management and staff have supported Habitat as hands-on volunteers for much of the past decade. “In the last five years, over 100 of our employees have been involved in one or more events,” Bryant says. Working on Northern Ocean Habitat’s new home builds—typically one per year—is a key focus. For the first time, Habitat plans to build two new homes this year, catching up post-lockdown. CMC volunteers also tackle many of the organization’s smaller repair projects, which assist 50 to 60 families, seniors and veterans a year.

CMC has assisted Habitat by providing funds, offering meeting space, supporting the organization’s Night of Hope fundraising gala, participating in its Walk to Build event and hosting its Women in Leadership Breakfast—part of

To learn more about Community Medical Center, visit www.rwjbh.org/community.

CMC has provided numerous forms of support to Habitat, including volunteer labor for home improvement and construction projects, leadership and space for Habitat events.

Women Build Week, an annual female-focused event. (Some of these contributions were disrupted during the pandemic.)

The most recent Women Build project cleaned up deteriorated flower beds and the backyard of a home for adults with intellectual and developmental disabilities run by the organization 21 Plus. Volunteers tore out an old fence and erected a new one. “We know that social and environmental situations really affect health, and this work brings us back to basics and lets us connect to the community we serve,” says Donna Bonacorso, RN, MSN, NEA-BC, Chief Nursing Officer and Vice President for Patient Care Services, CMC, who has provided leadership for Women Build initiatives. “Many of the individuals in homes become our patients at the hospital, and it’s nice to help them outside of our professional roles.”

Habitat has partnered with CMC and Georgian Court University to conduct a study of how Habitat’s initiatives affect families. “Preliminary findings identified consistent themes such as improved well-being, beneficial effects on physical and mental health and furthering education,” Novakowski says. “CMC has made huge contributions to our efforts. Whenever we reach out for help, they always say yes.”

CMC WORKS WITH HABITAT FOR HUMANITY TO HELP IMPROVE LOCAL HEALTH ONE FAMILY AT A TIME.

BUILDING COMMUNITY
The arrival of residents launches CMC’s academic medicine program.

Community Medical Center (CMC) has marked another milestone in its 60-year history. In July, the hospital completed a process of becoming an academic medical center by welcoming its first residents—12 in Internal Medicine, 12 in Emergency Medicine and three in Podiatry. Residents are physicians who have graduated from medical school with an education in all types of medicine and are now developing more specialized knowledge and experience in specific disciplines.

“We’ve always been a community hospital, and we’re now making a transition to also being an academic institution that is contributing to the future of healthcare,” says Meika Neblett, MD, MS, Chief Medical Officer and Chief Academic Officer at CMC.

“It adds a lot of energy and excitement to the culture of a facility—the ways we communicate, think, study, act and deal with patients—when we know that all our actions are leading toward making great doctors for the next generation.”

Next summer, CMC will introduce its Surgery residency program, bringing more trainees to the hospital. Residents spend three to five years completing their rotations, depending on specialty. “When we have a full complement in all of our programs, we’ll be training a total of 117 residents,” Dr. Neblett says.
A PART OF THE TEAM
One of those residents is Nileena Johnkutty, DO, who was accepted into CMC's Emergency Medicine program after attending New York Institute of Technology College of Osteopathic Medicine. Prior to her acceptance at CMC, she spent four weeks in a sub-internship at the hospital to explore its program following a remote video meeting with Nicole Maguire, DO, Program Director of CMC’s Emergency Medicine Residency Program. “Her passion stood out to me just from a virtual interview,” Dr. Johnkutty says.

Initially, Dr. Johnkutty wondered if she would fit in. “From the first day, I instantly felt part of the team at CMC,” she says. “I knew I wouldn’t have second-year residents to mentor me, but it was attractive to me that I would be a trailblazer and automatically be in a leadership position where I would have input into advancing the program.”

She quickly felt inspired both by experiences and academic challenges. In one instance, she treated a woman who had fallen on ice and needed stitches. “She was nervous about getting the sutures, and I talked her through the process and made her feel comfortable,” Dr. Johnkutty recalls. The woman appreciated her care so much that she emailed praises to Dr. Maguire, who passed the message to others on the team. “This is what I love to do, and it’s great to be appreciated and help inspire others,” Dr. Johnkutty says.

In another instance, she recalls conversing with emergency medicine physician Eric Stander, MD, about care for a patient. “He continually challenged me on what I knew and also what I didn’t know,” Dr. Johnkutty says. “I could tell he was passionate about advancing my knowledge and pushing me to be curious and engaged. I thought, ‘This CMC family really cares about my medical education and providing the best patient care.’”

CULTURE OF IMPROVEMENT
Faculty development to foster such challenging and inspirational moments has been a key element of preparations to become a teaching hospital, with current CMC physicians learning how to teach and train through a program conducted by Rutgers Robert Wood Johnson Medical School faculty. “We guide doctors who are teaching residents on a variety of instruction methods, whether didactic, classroom or bedside,” Dr. Neblett says.

Other preparations have included renovations that provide facilities such as an auditorium, study rooms, conference and learning spaces, offices and resident lounges. The hospital has also created a new clinic designed to foster continuity of care for patients—many of whom may be underinsured—who receive services in a variety of settings such as initial consultations in doctors’ offices, hospital treatments and follow-up or routine appointments. Residents in the Internal Medicine Residency Program will play a key role in providing consistent primary care monitored by attending physicians.

Residents continually strive to improve the quality of care they provide, and having a strong learner’s perspective rippling through the entire institution is one benefit of being an academic medical center, Dr. Neblett says. “Every hospital reviews and analyzes best practices, but residents enhance that process,” she says. “Not only do they have to do this, but they want to get involved with reviewing patient care, comparing outcomes here vs. elsewhere and having discussions.”

Opportunities for doing so abound as part of RWJBarnabas Health. “We have hundreds of other residents and essentially a large classroom across the entire system with many other learners with whom residents can interact and converse,” Dr. Neblett says. “Through our partnership with Rutgers University, RWJBarnabas Health serves as New Jersey’s largest academic healthcare system featuring world-class medical education for the physicians of tomorrow. Residency and fellowship programs training at CMC will benefit from the resources and interprofessional opportunities available through the Rutgers Health institutional sponsorship.”

“Knowing CMC is part of RWJBarnabas Health, I knew we were in good hands,” says Dr. Johnkutty, who, after her four-week rotation, applied to CMC through the National Resident Matching Program, which links residents and hospitals that have mutual interest in each other. “I really wanted to come here,” she says. “When I opened that acceptance email, I had tears of joy to find out that I matched with CMC.”

To learn more about residency programs at Community Medical Center, visit www.rwjbh.org/cmcmedicalstudents.
LONG-LASTING LEGACY

HOW ONE FAMILY HAS HELPED BUILD AND SUPPORT CMC FROM ITS EARLIEST DAYS.
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f all the values Mark Kotzas learned from his parents, few have had a longer-lasting impact than the importance of building and supporting the local community. “I remember my mother out volunteering with different organizations four or five days a week,” says Mark, owner and broker at Crossroads Realty, an 11-office residential and commercial brokerage development and property management firm based in Toms River. “My parents had an incredible sense of duty and community.”

The family’s story is linked to that of Community Medical Center (CMC) going back even before the hospital’s founding in 1961, now being celebrated with 60th anniversary salutes.

When Byron and Mary Kotzas moved to the Toms River area after Byron’s service as a pilot in World War II, the area was largely undeveloped and rural. “They were newlyweds in their 20s with no money and a small seaside restaurant/hotel business,” Mark says. “My father used to joke that back then there were 5,000 people and 50 million chickens in Toms River.”

But Byron and Mary also were visionaries, Mark says. “My father saw the future of Ocean County as a destination for vacationers and retirees,” he says. “They were prescient enough to know that a hospital was one of the things that a community really needed to be self-sustaining and thrive over many generations.”

BOOMING AREA

Mark’s father went on to parlay his vision into success as a real estate developer and major hospital supporter, eventually starting Crossroads Realty in 1966. Mark’s mother took a hands-on role in community enterprises and took a particular interest in establishing, building and supporting the hospital.

As early as the late 1950s, Mary was active with a hospital auxiliary that began providing volunteers and raising funds before the hospital was built. She remained engaged with auxiliary organizations such as the Laurel Twig chapter for decades, taking leadership roles and serving multiple terms as president. She led a variety of fundraising activities such as raffles, balls and fashion shows, and served 13 years on the hospital’s Board of Trustees.

But one of Mary’s most meaningful achievements was as founding president of the CMC Auxiliary’s Second Time Around Consignment Shop (STACS), a store that opened on her birthday in June 1975 using space Byron made available in one of the hospital’s ancillary buildings. The shop eventually grew and moved to a 10,000-square-foot site a mile west of the hospital. Over the years, STACS has raised over $3 million for CMC and continues to provide significant funds. “Her hope was that it would last beyond her, and it certainly has,” Mark says.

As the couple anticipated, Ocean County’s population boomed, becoming one of the fastest-growing areas in New Jersey during the 1970s. That fostered business success, “but my parents always gave back,” Mark says. “They always lived in the same house they built in 1962 and were more interested in building the community than other things.”

The couple also felt strongly that education was important to the community and were instrumental in establishing and supporting Ocean County College, which eventually grew from a two-year to a four-year institution. “My parents set up nursing scholarships at the college that we continue to fund, and a lot of those nurses do their training at Community Medical Center,” Mark says.

“The Kotzases’ belief in the critical importance of both healthcare and education aligns well with the fact that CMC is now an academic medical center, with the arrival of its first 27 new physician residents in July,” says Jennifer Shufran, Vice President, Community Medical Center Foundation. “Mary and Byron were very generous supporters of the hospital, and the CMC family is fortunate that they helped build and grow this institution from the beginning. We’re grateful the family stays connected with us.”

CONTINUED SUPPORT

The Kotzases’ lasting legacy was recognized well before Byron’s death in 2012 and Mary’s in 2017. In 1991, Mary was formally recognized for her long-term contributions when the courtyard garden near the hospital’s entrance was named in her honor. But many of their financial contributions remain anonymous. “They were from an era where you just didn’t talk about these things,” Mark says.

It’s another lesson Mark absorbed from his parents, but he also sees value in inspiring others to support the critical role of a local hospital. “There’s nobody in the community who doesn’t need it,” he says. “Thank God Community Medical Center is here. I encourage others to join in giving.”

Most recently, Mark has made a commitment from the Kotzas Family Foundation to support CMC’s growth and development through a planned initiative called the Campaign to Transform CMC. The plan includes future measures and some already under way, including a transformed wing for medical education, a redesigned women’s health center, service hubs throughout the area that bring care closer to where people live and a variety of expanded services such as emergency care.

“A strong hospital is important, especially in an area where a large number of residents are older and have a need for robust medical care,” Mark says. “Thanks in part to my parents, CMC is now a major medical center, and I’m proud to continue their legacy of support.”

To learn more about supporting the transformation of Community Medical Center, call 732.557.8131 or visit www.cmcgiving.org.
Treatment at Community Medical Center helped triathlete Jim Welshman bounce back from a heart problem that caused him to crash his bike.
As a competitive athlete in peak condition who was training for an Ironman triathlon, Jim Welshman never expected to be sidelined with heart trouble. But during a bike ride on August 9, 2020, he blacked out and crashed along the side of the road in Manchester. Fortunately, he was biking with other riders who called an ambulance that rushed him to Community Medical Center (CMC).

It turned out that Jim, 62, of Bayville, had an irregular heartbeat, or arrhythmia, that needed to be stabilized immediately. He spent four days at CMC as doctors performed tests and monitored his condition to determine the best course of treatment. His path to recovery included several more months of monitoring and procedures, including the eventual implantation of a pacemaker in April.

Once Jim was feeling better, he wanted to show his gratitude to the healthcare team at CMC for the top-notch medical attention he received, especially at a time when the COVID-19 pandemic was taking a heavy toll.

“I wanted to say ‘thank you,’ not just for my care but for all the patients who went through there during COVID,” Jim says. “You could see that the medical providers were tired, yet the care they were giving to other people was unbelievable.”

Jim decided to show his appreciation in a unique and personal way. “I knew local restaurants brought food to caregivers at the hospital, and I was like, ‘I don’t own a restaurant where I can deliver 50 pizzas for a unit,’” Jim says. “But I do build flags out of pine wood for the military, so I built a flag for the hospital. It’s about 19½ inches by 36 inches, and it has the medical insignia engraved inside.”

**CORPS FITNESS**

Jim’s fitness directly connects with his appreciation for the military. He began his fitness journey when his son went to Marine Corps boot camp in 2008. Jim was overweight and decided it was time to get in shape. “So I did my son’s boot camp at home,” he says. “I did anything physical that he had to do.”

Within three months, Jim lost 50 pounds—and hasn’t stopped exercising since. He’s completed multiple competitive events, including eight Marine Corps Marathons and two Marine Corps 10ks.

He also started making wooden flags when his son joined the Marines. Since then, Jim has made more than 300 flags that he sells to friends, at craft fairs and on Facebook to raise money for injured Marines. Proceeds go to the Semper Fi & America’s Fund.

Jim was feeling healthier than ever until a couple of years prior to the August 2020 accident. He first began noticing occasional breathing problems while running but chalked them up to poor diet before a run. Yet the problems persisted over time. Concerned, Jim consulted a doctor who detected an irregular heartbeat and put Jim on medication to help regulate the heart’s rhythm. At that point, Jim thought his irregular heartbeat was under control.

**MANAGING ARRHYTHMIA**

Then came his blackout and crash. Doctors told him his heart rate had dropped far too low, causing him to lose consciousness. He landed headfirst on the side of the road. Fortunately, Jim’s helmet protected his head, but he sustained a black eye and an injured shoulder.

While receiving care at CMC, Jim began working with cardiologist John Merlino, III, DO, a member of RWJBarnabas Health Medical Group, and over the next several months, Jim underwent various tests and wore heart monitors to track his heartbeat around the clock. It soon became evident that he needed two procedures. First he went to Robert Wood Johnson University Hospital (RWJUH) in New Brunswick for a cardiac ablation, which scarred tissue in his heart to help block electrical signals that were contributing to the irregular heartbeats. Then at CMC he received a pacemaker that he says was the final step in getting his condition under optimal control.

Jim is feeling so well now that he is back training seven days a week to prepare for another Ironman in September in Atlantic City. While swimming, biking and running, he wears a heart rate monitor so he can track his pulse and make sure his heart rate does not get too high, which might strain his heart and trigger an arrhythmia. His upper target is 130 to 135 beats per minute, a range that can prove challenging to stay within, especially on runs. “Running is where you really see your heart rate spike,” says Jim. “But my doctor says I have a strong heart and that I just need to not over-stress myself.”

Happy to still be running, Jim now views his races less competitively than before. “I’ve taken my running down a notch,” Jim says. “Instead of trying to be No. 1, No. 2, No. 3 in my age group, I have backed off and said, ‘Hey, I’m doing this now because I love it.’”

Whoever your heart beats for, our hearts beat for you. To connect with a top cardiovascular specialist at Community Medical Center, call 888.724.7123 or visit www.rwjbh.org/heart.
Doctors. Nurses. Educators.

Community Medical Center is now a teaching hospital.

As we look back on 60 years of caring for the people of Ocean County, we’re also looking forward to training the next generation of doctors through a relationship with Rutgers Robert Wood Johnson Medical School. Our residents will gain hands-on experience. Our leadership will have access to the latest in research. And our patients will continue to receive the high-quality, compassionate care we’re known for. We’re proud to invest in the future of medicine and the future of Ocean County. Learn more at rwjbh.org/community