

A Publication of
MONMOUTH MEDICAL CENTER
SOUTHERN CAMPUS

Spring 2021

healthy *together*

**FOODS THAT
BOOST YOUR
IMMUNE SYSTEM**

**CONQUERING
COVID-19:
ONE COUPLE'S STORY**

**WARNING SIGNS
OF A STROKE**

**SAVE LIVES
CHOOSE VACCINATION**

Let's Beat COVID-19

The development of COVID-19 vaccines is one of the greatest achievements in medical science. At RWJBarnabas Health, we're proud to be a key part of the effort to get the vaccine into the arms of all eligible people in New Jersey.

We also remain committed to fighting the spread of the disease. That's why we join with the Centers for Disease Control and Prevention in urging everyone, whether vaccinated or not, to continue with the simple precautions we know are effective in preventing the spread of the coronavirus:

- Wear a mask.
- Stay at least six feet apart from people who don't live with you and avoid crowds.
- Wash your hands thoroughly and often; use a hand sanitizer if soap and water aren't available.

The reason for this continued caution: In some cases, COVID-19 vaccines may protect against severe infection, but may not necessarily prevent mild or asymptomatic infection. If this is the case, an infected person could still spread the virus.

At Monmouth Medical Center Southern Campus, we recently marked the one-year anniversary of the first COVID-19 patient admitted to our hospital, as well as the sweeping restrictions and public health guidelines put in place to limit the spread of the virus. The vaccine is the next precaution that we can all take to help our community move forward. While the COVID-19 "caution fatigue" many are feeling is understandable, it's so important to continue to follow public health guidelines so we don't slow the progress that's been made through so much selflessness and sacrifice over the last year. With the rollout of the COVID-19 vaccine, the light at the end of the tunnel is growing brighter with each passing day.

It will take all of us working together as a community to minimize the ongoing effects of COVID-19. Together, we can protect friends, family and neighbors and end this pandemic.

Yours in good health,



BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH



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



HEALTH NEWS

A LEADER IN COVID-19 TREATMENT

Monmouth Medical Center Southern Campus (MMCSC) has joined its sister RWJBarnabas Health hospitals in providing monoclonal antibody treatment to COVID-19 patients who meet strict criteria. Patients receive the treatment as an infusion and are sent home to recover with a pulse oximeter to monitor their oxygen levels. They receive telehealth check-ins with their healthcare providers.

The therapy is a powerful weapon against COVID-19. As of mid-February, RWJBarnabas Health hospitals had treated thousands of patients with monoclonal antibody therapy, and 96 percent of those who were treated were spared hospitalization.



REHAB FOR COVID-19 PATIENTS

If you battled COVID-19 and are still struggling with symptoms, the Post-COVID Recovery





Program might be able to help. It offers physical and speech therapies and access to testing and prescriptions. "COVID-19 can cause heart and lung complications—especially in patients with chronic debilitating conditions," says Charles Markowitz, MD, Medical Director of the Department of Rehabilitation. "Also, some patients can experience weakness and trouble walking." To get started, call **732.886.4849** and ask about the Post-COVID Recovery Program or speak with your physician.

Monmouth Medical Center Southern Campus

RWJBarnabas HEALTH

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VACCINATING NEW JERSEY

AS AVAILABILITY INCREASES, EXPERTS HAVE ONE STRONG MESSAGE FOR THE PUBLIC: GET THE SHOT.

“At the outset, we knew we would be helping with the COVID-19 vaccination effort,” says John Bonamo, MD, MS, Executive Vice President and Chief Medical and Quality Officer at RWJBarnabas Health (RWJBH). “But we weren’t aware just how much the state would be relying on healthcare systems to make this happen.”

Just as they did when the pandemic first hit, the experts at RWJBH rose to the challenge. “We opened our first vaccine clinic the week the vaccine came out in December,” he recounts. “Then we opened clinics at each of our 11 acute care hospitals.”

RWJBH is also administering the vaccine at the Middlesex County megasite in Edison, which it runs; the former Sears in the Livingston Mall; RWJBarnabas Health Arena in Toms River; Brookdale Community College in Monmouth

County; and smaller clinics, including in Bayonne and in the Greenville section of Jersey City.

“We’re also assisting municipal efforts in four counties—Ocean, Somerset, Essex

and Monmouth—by providing some or all vaccinators for their clinics,” Dr. Bonamo says, “and we’re partnering with the state, the National Guard and others. In addition, we’ve applied for more vaccination sites for physician offices.”

As of mid-March, RWJBH had already vaccinated approximately 150,500 people and was vaccinating more at the rate of 2,000 a day at its hospitals and 4,000 a day at the Edison megasite. However, Dr. Bonamo says that number will increase significantly as vaccine availability does. “We’re ramping up,” he says. “We’re in this to get it done.”

By summer, Dr. Bonamo says, vaccine supplies will make it available to all who want it. The challenge will shift to making sure everyone who’s eligible chooses to be vaccinated.

DISPELLING FEARS

“Many people started out with ‘vaccine hesitancy’—they wanted to see how other people did with the vaccine first,” says Dr. Bonamo. “As they saw others feeling good about having had the vaccine, they became more open to it.” That led to the

clamor for vaccination appointments the state saw in the winter.

Vaccine hesitancy persists, however. “There’s understandable mistrust, especially in the black community, born of all the social inequity and healthcare injustice that has happened over the years,” he says. “We’re working hard to dispel that with all kinds of outreach and town halls being done by healthcare professionals of color.”

Older adults should prioritize getting the vaccine, Dr. Bonamo says. “The years they have are precious, and many seniors who got COVID-19 did not do well,” he says. “Often, that’s because they have at least one other comorbidity—diabetes, hypertension, heart disease, kidney disease, lung disease or obesity—that contributes to their risk.”


Dr. Bonamo emphasizes that his message isn’t just for certain groups, but for everybody who’s eligible for the vaccine. “Get vaccinated,” he says. “That’s it. It’s safe, it’s smart, it’s advanced science and it’s the right thing to do to protect yourself and your family.”



JOHN BONAMO, MD

To learn more or to make a vaccination appointment, visit www.rwjbh.org/covid19.



A full-page photograph of Joe Bruno, an elderly man with a friendly smile. He is wearing a black zip-up jacket with "1200 PAX" embroidered on the left chest and a black baseball cap with a circular "VETERAN" patch. He stands in front of a blurred background featuring a building and a flag.

Joe Bruno says he feels like he's "on top of the world" after two months of hyperbaric oxygen therapy.

GOODBYE, TOOTHACHE

HOW OXYGEN HELPED ONE
MAN RECOVER FROM A
SERIOUS DENTAL PROBLEM.

When Joe Bruno developed a terrible toothache in early 2020, his dentist removed the abscessed lower left molar. Unfortunately, one month later, he was still in pain. Turns out, the hole in his gum had become infected, leaving Joe with an aching, pea-size lump in his jaw and a numb bottom lip.

Over the next few months, Joe's dentist tried treating the problem with antibiotics. When that didn't help, Joe, 86, of Whiting consulted a dental surgeon who discovered an even bigger problem. X-rays revealed bone decay in Joe's jaw, a result of damage from the 45 radiation treatments he had undergone almost a decade earlier for throat cancer. The radiation had cut off blood flow to the bone, which caused the bone to disintegrate. Without further intervention, Joe was at risk for a broken jaw.

HELPING THE BODY HEAL

Thankfully, Joe was referred to Monmouth Medical Center Southern Campus (MMCSC) to undergo two months of what's known as hyperbaric oxygen therapy. The treatments—42 sessions spent inhaling 100 percent oxygen in a hyperbaric chamber—helped stimulate healthy blood flow to Joe's jaw and promote healing and stronger bone.

"Hyperbaric oxygen therapy is twice the atmospheric pressure, which means a tremendous amount of oxygen is delivered to the tissues," says Johnny Larsen, DO, Medical Director for Hyperbaric Medicine at MMCSC, who oversaw Joe's care. "When you have a nonhealing wound or radiation injury, the tissue is deficient in oxygen. With this treatment, the oxygen helps stimulate the growth of new blood vessels and connective tissue and activates cells that fight infection. It induces healing."

Joe started the hyperbaric oxygen treatments in November 2020 and happily got relief within a month. "The treatments made me feel so much better," he says. "I don't have any pain at all now. I have a little numbness around my front teeth, but it doesn't



JOHNNY LARSEN, DO



From left: Cheryl Munroe, RN, BSN, CCM, Program Director; Joe Bruno and Frantz DeLouis, RN. "Frantz really knows what he's doing and always makes sure everything is okay," says Joe.

bother me at all. The bump is gone." In December, while partway through his hyperbaric oxygen treatments, Joe had an additional dental surgery to scrape the bone and clean up the area where the tooth had been pulled.

A WELL-TOLERATED TREATMENT

Patients typically have five hyperbaric oxygen treatments per week for about two hours at a time, says Cheryl Munroe, RN, BSN, CCM, Area Director for the Center for Wound Healing and Hyperbaric Medicine at MMCSC, who treated Joe. After changing into a cotton gown, patients step inside an acrylic chamber. They're given blankets and a pillow, and they can choose to watch a show or movie on a flat-screen TV during the treatment. The treatment lasts for 90 minutes.

Most patients tolerate the treatment well, says Larsen. Temporary side effects include blurry vision and bruising to the ear drums. In addition, patients' ears may feel full during the treatment. "We tell them to plan for the same kind of sensations we get when we fly in a plane," says Munroe. Patients can hold their nose and blow to relieve the pressure. Reassuringly, they can also talk

COULD YOU BENEFIT FROM HYPERBARIC OXYGEN?

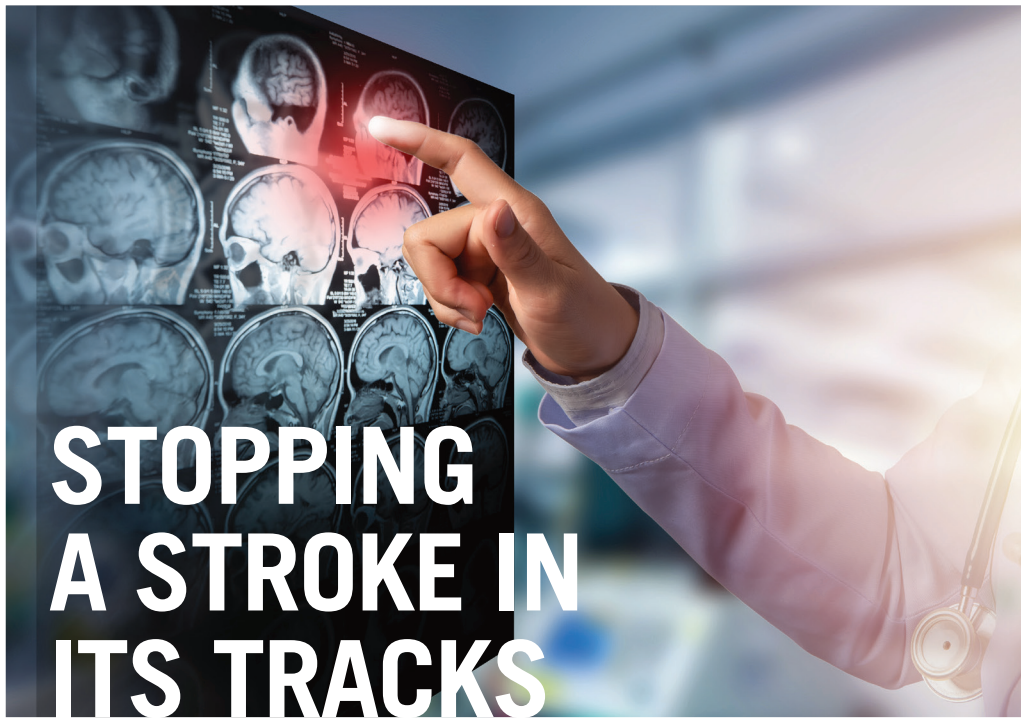
Hyperbaric oxygen treatments are frequently used at Monmouth Medical Center Southern Campus (MMCSC) to help repair nonhealing wounds, such as diabetic foot ulcers. Patients with nonhealing wounds may need 30 or more treatment sessions to see results, says Johnny Larsen, DO, Medical Director for Hyperbaric Medicine at MMCSC.

The treatment is also used to repair radiation injuries in various areas of the body—most commonly the head, neck, bladder, bowel and skin, says Dr. Larsen. Some patients with radiation injuries experience blood in the urine and stool, and the treatments can help resolve those problems, too. Radiation injuries may require upwards of 60 treatments. "It's a commitment, but it's well worth the positive outcomes we see," says Dr. Larsen.

to their doctor or nurse via phone at any time while in the chamber.

Joe didn't experience any side effects and is grateful that his mouth has finally healed. "This was bothering me for a whole year," he says. "Right now, I feel like I'm on top of the world. I feel great."

For more information about the Wound Care Center at Monmouth Medical Center Southern Campus, call **732.886.4100**.



STOPPING A STROKE IN ITS TRACKS

A PRIMARY STROKE CENTER CAN SAVE YOUR LIFE.

Every 40 seconds, someone in the U.S. has a stroke. Every four minutes, someone dies from a stroke, according to the Centers for Disease Control and Prevention. A stroke occurs when blood supply to the brain is cut off by a clot or burst vessel. When the brain is deprived of blood and oxygen, cells die.

The most common type of stroke is an ischemic stroke, in which a clot blocks blood flow to the brain. This accounts for about 87 percent of strokes. The other type of stroke, called a hemorrhagic stroke, occurs when a blood vessel ruptures. Left untreated, a stroke can lead to paralysis on one side of the body, speech and language problems, vision problems and memory loss.



TEJAS P. DELIWALA, MD

A SIMPLE TREATMENT

The good news is that quick treatment can help you avoid long-term health

problems and death. A drug called tissue plasminogen activator, or tPA, works by breaking up a clot and improving blood flow. To be effective, it must be administered within four-and-a-half hours. If tPA is not sufficient to break apart a large clot, a patient may need a mechanical thrombectomy, in which the clot is removed from the brain. If a patient needs this procedure, he or she is transferred to Robert Wood Johnson University Hospital, an RWJBarnabas Health “sister” hospital, which is a Comprehensive Stroke Center.

Monmouth Medical Center Southern Campus (MMCSC) has been designated as a Primary Stroke Center by the New Jersey Department of Health. That means doctors can quickly evaluate and treat patients with signs of a stroke. “Patients should not delay treatment due to fears about COVID-19,” says Tejas P. Deliwala, MD, a neurologist and Chair of the Stroke Committee at MMCSC. “The hospital has taken every precaution and is safe. We provide a comprehensive approach to stroke care, including rehabilitation.”

WHAT MAKES MMCSC A PRIMARY STROKE CENTER?

To be certified as a Primary Stroke Center, a hospital must meet the following criteria, according to the New Jersey Department of Health:

- Has a stroke team, which includes board-certified neurologists and radiologists
- Has neurology and Emergency Department personnel trained in diagnosing and treating stroke
- Neuroimaging services are available 24 hours a day, seven days a week
- Offers rehabilitation services
- Has transfer arrangements with a Comprehensive Stroke Center in New Jersey (Robert Wood Johnson University Hospital in New Brunswick)
- Has a database or registry for tracking outcomes of stroke patients
- Educates the public about stroke

SIGNS OF A STROKE

If you have any of the following symptoms—which are represented in the “BE-FAST” acronym—seek medical treatment immediately:

- B** is for balance (loss of balance, sudden headache, dizziness)
- E** is for eyes (blurred vision)
- F** is for face (one side of the face is drooping)
- A** is for arms (weakness or numbness)
- S** is for slurred speech or trouble talking
- T** time to call **911**

If you are experiencing the symptoms of a stroke or are with someone who is, call 911. For more information about neuroscience at RWJBarnabas Health, visit www.rwjbh.org/neuroscience. To connect with a specialist, call 888.724.7123.





Dietitians at MMCSC oversee diets for all patients. They create immune-boosting meal plans for cancer patients who are receiving infusion treatments because it's important to keep their immune systems strong. Members of MMCSC's team of Registered Dietitians include, from left to right, Heather Kapral and Kristin Lindner. The other members of the team, who are not pictured, are: Lorine Lightbody, Leah Liebes, Chana Goldberg, Rachel Rovner and Director Catherine Heintz.

EAT FOR BETTER HEALTH

BOOST YOUR IMMUNE SYSTEM BY FILLING UP ON NUTRIENT-RICH FOODS.

Although a growing number of people are eligible to receive the COVID-19 vaccine, it's critical to keep your immune system as strong as possible. Your diet can play an important role in averting infection. The advice is simple: Boost your intake of antioxidants, which help protect the body from free radicals, which form when our bodies convert food into energy. These substances are thought to play a role in cancer, heart disease and other health problems. Consuming them appears to fight inflammation and help the body fend off infection.

"Eating healthfully will help you become the strongest version of yourself," says Heather Kapral, MS, RDN, a dietitian at Monmouth Medical Center Southern Campus (MMCSC). "It's your

best defense against disease." Fortunately, it's not difficult to find foods rich in antioxidants and other nutrients. Consider stocking up on the following:

- Sweet potatoes, broccoli, carrots, cantaloupe and squash, which are rich in vitamin A
- Citrus fruits (oranges and grapefruit), strawberries, red and green peppers, kiwi fruit, baked potatoes and tomatoes, which contain vitamin C
- Nuts (peanuts, hazelnuts and almonds), sunflower seeds and green vegetables like spinach and broccoli, which are rich in vitamin E. In addition, some manufacturers add vitamin E to breakfast cereals, fruit juices, margarines and spreads. Check food labels.
- Oysters, red meat, poultry, seafood (like crab and lobster), beans, nuts, whole



MIXED BERRY SMOOTHIE

- 1 cup frozen mixed berries
- Splash of almond milk
- 1 tbsp peanut butter
- ½ banana (optional)
- ½ cup nonfat Greek yogurt
- Ice (optional)

Quantities can be adjusted for desired taste and texture. Blend until smooth.

grains and dairy products, which contain zinc. Fortified cereals also contain zinc.

• Seafood like tuna and codfish, meat, poultry, eggs and dairy products, which are rich in selenium. Breads and cereals also contain selenium.

• Ketchup, tomato sauce, watermelon, apricots and guava, which contain lycopene.

It's easy to create delicious meals with these foods. Consider making a casserole, veggie stir fry, salad (fruit or veggie), soup or even a smoothie (see the "Mixed Berry Smoothie" recipe).

For more information about services provided at Monmouth Medical Center Southern Campus, visit www.rwjbh.org/monmouthsouth.



THE HEALING POWER OF HOSPITALISTS

PATIENTS BENEFIT FROM PHYSICIANS WHO COLLABORATE WITH SPECIALISTS TO TREAT SERIOUS MEDICAL PROBLEMS.

During a hospital stay, patients hope for a full recovery. To help patients achieve the best outcomes, healthcare providers called hospitalists collaborate with specialists, primary care physicians and others to treat serious medical problems, such as congestive heart failure, pneumonia, heart attack, stroke, uncontrolled diabetes, COVID-19 and cellulitis. They order tests, track the results, clear patients for surgery and care for them afterward.

At Monmouth Medical Center Southern Campus (MMCSC), there are six hospitalists—two nurse practitioners, three internists and Yosef Glassman, MD, the new director of the hospitalist



YOSEF GLASSMAN, MD

program. These healthcare providers coordinate patient care, working directly with the patient's primary care physician, specialists, nurses, social workers

and case managers. They discuss each patient's condition and test results with his or her family members and primary care physician. "We're in constant communication with primary care physicians," says Dr. Glassman.

Since hospitalists care for hospitalized patients, they interact with a variety of specialists and are aware of the latest treatments, says Dr. Glassman. "We also stay on top of Centers for Disease Control and Prevention guidelines," he adds. Primary care physicians, on the other hand, focus on outpatient care. They typically visit hospitalized patients for about an hour each day, says Dr. Glassman.

AN INTEGRATED APPROACH TO CARE

Dr. Glassman became the director of the hospitalist program at MMCSC in December 2020. He's board-certified in internal medicine and geriatrics and taught clinical geriatrics at Harvard and Tufts Medical Schools in Boston. Dr. Glassman brings unique expertise to patient care. In 2016, he became a rabbi after studying

part-time in Israel and completing a program in Toronto. His training helps patients cope with their illnesses in a spiritual way. "I always wanted to integrate mind, body and soul in my medical practice," says Dr. Glassman.

When patients are hospitalized, they have time to think about their illness, says Dr. Glassman. "I encourage introspection," he says. "I ask open-ended questions, such as: 'How are you feeling about your illness? Have you given any thought to what might change in your life after you go home?'"

While in the hospital, patients might ponder the meaning of life. "I stress that we're all in this together," says Dr. Glassman. "I believe the main job of a doctor is to make patients laugh. It opens patients' hearts and allows them to talk about their illness."

Studies show that patients heal better if they have hope, says Dr. Glassman. "I want to take away their anxiety and give them hope," he continues. "I always give people a blessing and wish them good health."

To find a physician at Monmouth Medical Center Southern Campus, call **888.724.7123** or visit www.rwjbh.org/doctors.





HEART RACING? IT COULD BE YOUR MEDICATION

BRIEF PERIODS OF INCREASED HEART RATE ARE COMMON AND HAVE A VARIETY OF CAUSES.

Everyone experiences an increased heart rate at some point. You exercise, and your heart rate increases. You become frightened or stressed, and your heart beats faster. You might experience the increased heart rate as a skipped beat, a flutter or a pounding in your chest.

“A temporary increase in heart rate has many causes,” says David Dobesh, MD, Chief of Cardiac Electrophysiology at Jersey City Medical Center and a member of RWJBarnabas Health Medical Group with offices in Jersey City and West Orange. “Emotional stress, physical stress, psychological stress, even things like caffeine, nicotine, too much alcohol or fever. Your body is performing a complex balancing act with your pulse.”



DAVID DOBESH, MD

A lesser-known but common source of increased heart rate is medication, including some kinds of over-the-counter medicines and certain prescriptions. “People should be aware that some medicines do


briefly increase your heart rate,” says Dr. Dobesh, “and usually those episodes are not something you should be concerned about.”

POSSIBLE CAUSES

Common medications that may increase heart rate for a short period of time include:

- Decongestants, specifically those that contain pseudoephedrine, a stimulant. “If the decongestant has a capital ‘D’ at the end of its name, it contains this ingredient,” says Dr. Dobesh.
 - Some inhalers for asthma, emphysema or COPD (chronic obstructive pulmonary disease).
 - Theophylline, an oral asthma medication.
 - Medications for ADHD (attention deficit hyperactivity disorder).
 - Diuretic medications (used to help prevent fluid retention) could result in dehydration, says Dr. Dobesh.
 - Some blood pressure medications may inadvertently lower blood pressure too much.
- “If your pressure is very low from either dehydration or overmedication, the body will respond by increasing the heart rate to compensate,” he explains.

WHAT IS TACHYCARDIA?



For most people, a heart rate between 60 and 100 beats per minute (bpm) is normal. When your heart beats more than 100 bpm for reasons unrelated to physiological stress, that’s known as tachycardia, from the Greek words for “swift” and “heart.”

If increased heart rate is a concern, basic testing, such as an electrocardiogram or blood work, can be done to determine whether you should be referred to an electrophysiologist—a cardiologist who specializes in heart rhythms. The electrophysiologist will look for possible types of tachycardia that are caused by an abnormality of the heart itself and can affect how well the heart pumps blood.

Examples include atrial fibrillation (AFib), atrial flutter and supraventricular tachycardia (SVT). A wide range of treatments may be considered, including lifestyle changes, medications and medical and surgical procedures.

“Some medications carry warning labels about increased heart rate but in practice this side effect is unusual,” Dr. Dobesh says. “These include certain antidepressants and also thyroid medications, which will not usually increase heart rate if they’re taken at the recommended dose.”

Similarly, herbal supplements such as ginseng, valerian root and orange bitters should not increase heart rate when taken in normal doses, he says.

While a short-term increase in heart rate from medication or emotional or physical stress is normal, increased heart rate that lasts for a long time is not. “If you’re repeatedly feeling symptoms of a racing heartbeat that make you uncomfortable, tell your doctor,” advises Dr. Dobesh. “Further testing may be appropriate.”

Whoever your heart beats for, our hearts beat for you. To connect with one of NJ’s top cardiovascular specialists, call **888.724.7123** or visit **www.rwjbh.org/heart**.



EXPECT OUTSTANDING CANCER CARE

THE NCI COMPREHENSIVE CANCER CENTER DESIGNATION CARRIES
A WORLD OF MEANING FOR PATIENTS AND FAMILIES.

The National Cancer Institute (NCI) Comprehensive Cancer Center designation is the highest credential a U.S. cancer center can attain. But what does it mean for a patient?

“For a cancer patient, the question of where to be treated can be terribly confusing. The NCI designation tells a layperson that the institution is among the top centers in the country for delivering cancer care and performing research,” says Steven K. Libutti, MD, Senior Vice President, Oncology Services, for RWJBarnabas Health (RWJBH) and Director, Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated Comprehensive Cancer Center.



STEVEN K. LIBUTTI, MD

Though Rutgers Cancer Institute is located in New Brunswick, the beneficial effects of its research, clinical trials and advanced treatments are felt throughout New Jersey thanks to its

unique partnership with RWJBH.

“The beauty of our partnership is that Rutgers Cancer Institute is fully integrated with each of the healthcare system’s 11 hospitals,” Dr. Libutti explains. “When a patient is being treated at any RWJBarnabas facility, he or she has an entryway to an NCI-Designated Comprehensive Cancer Center and will get the same level of care and access to advanced treatments and clinical trials.”

PERSONALIZED CARE

For all their mastery of technology and treatments, the healthcare providers at RWJBH and Rutgers Cancer Institute never lose sight of the human element. “Our whole goal is to provide personalized care not only for the type of cancer you have, but for you as a

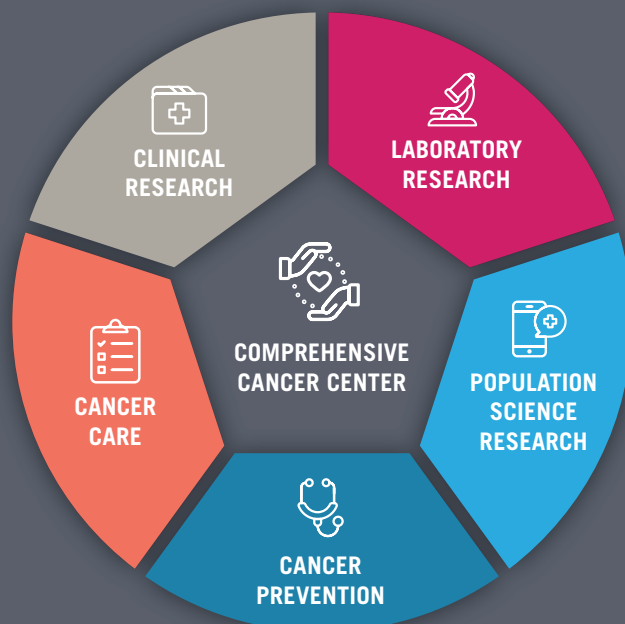
patient,” says Dr. Libutti.

Nurse navigators “reduce the burden of diagnosis,” he explains, by working with the patient throughout treatment, coordinating appointments and ensuring that specialists involved have the information they need. “We wrap the patient in a plan of care created just for him or her,” Dr. Libutti says.

Patients who want to know more about their treatment options through RWJBH and Rutgers Cancer Institute can call the Oncology Access Center at 844.CANCERNJ (844.226.2376), where oncology specialists stand ready to help determine the next steps. “That number is our ‘Easy Button,’ our way to put you on the first step to a successful outcome,” says Dr. Libutti. “We’re only a phone call away.”

ELEMENTS OF A COMPREHENSIVE CANCER CENTER

The designation requires the highest level of achievement in five areas:



BADGE OF HONOR

A Comprehensive Cancer Center designation from the National Cancer Institute places an organization among the top tier of cancer institutions in the country. Rutgers Cancer Institute, together with RWJBarnabas Health, is the only Comprehensive Cancer Center in the state of New Jersey.

THE DESIGNATION MADE A DIFFERENCE

These survivors are among many who have had the benefit of cutting-edge research, clinical trials and care through the RWJBarnabas Health and Rutgers Cancer Institute partnership.



A RARE T-CELL LYMPHOMA

Ling Jin needed treatment for a rare and aggressive form of T-cell lymphoma, requiring high-dose chemotherapy and radiation treatments in preparation for an allogeneic stem cell transplantation, sometimes referred to as a bone marrow transplant. As she underwent chemotherapy, a lymphoma was discovered behind her eye, which was resolved through brief and highly targeted proton beam therapy.

After an extensive database search, an appropriate donor for bone marrow cells was found, and last June, Ling had a successful stem cell transplant at Rutgers Cancer Institute.



BREAST CANCER WHILE PREGNANT

Breast cancer survivor Liz Tague found out she was pregnant—and soon after, learned that her breast cancer had recurred. After consulting with an oncologist in New York, Liz opted to have her treatment closer to home, guided by Rutgers Cancer Institute and RWJBarnabas Health.

Following a lumpectomy and chemotherapy, Liz gave birth to a healthy son. Now it was time to consider radiation therapy to prevent further recurrence. Her doctors proposed proton beam therapy, which can be precisely targeted to spare previously irradiated tissues. Three years later, Liz is back to work as a teacher and enjoying family time with her toddler.



STAGE 4 KIDNEY CANCER

Jim Gritschke was fit and active, but weight loss and sharp pains in his right leg led him to an orthopedic surgeon. The diagnosis: a large tumor on his kidney from metastatic renal cell carcinoma, which had spread to his pelvis.

Jim required major robotic surgery to remove the kidney and tumor, followed by radiation and systemic therapy. He had the benefit of the latest technology and a multi-specialty team at a high-volume center, as well as the opportunity to participate in a clinical trial for immunotherapy. Jim has now returned to his favorite activities.

“THE BEAUTY OF OUR PARTNERSHIP IS THAT RUTGERS CANCER INSTITUTE IS FULLY INTEGRATED WITH EACH OF THE HEALTHCARE SYSTEM’S 11 HOSPITALS.” *—Steven K. Libutti, MD*

THE PATH TO A PRESTIGIOUS DESIGNATION

This year marks the 50th anniversary of the National Cancer Act, which established the NCI Cancer Centers program. Out of the thousands of U.S. facilities that have cancer programs, just 51 are NCI-Designated Comprehensive Cancer Centers. The NCI designation is a grant that brings significant dollars to the Rutgers Cancer Institute and has a positive economic impact on the state of New Jersey.



Submission of a written application between 1,200 and 1,500 pages long

1



A site visit from a variety of national cancer experts, who examine infrastructure, basic research, clinical care, clinical trials and more

2



Scoring to determine rankings

3



After five years, institutions must reapply for the designation.

4



A PARTNERSHIP FOR PATIENTS

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



BRAIN ANEURYSMS: WHAT TO KNOW

**BEING AWARE OF
THE SYMPTOMS
CAN KEEP YOU OR A
LOVED ONE SAFE.**

About one in 50 people in the U.S. has a brain aneurysm—a “balloon” of blood protruding from an artery. The majority of these will never burst or even require treatment.

For those whose aneurysms do burst, however—approximately 30,000 people each year—the consequences can be devastating, leading to brain damage, stroke or death.



ANIL NANDA, MD

“We want to raise awareness about aneurysms because some studies have shown that almost a quarter of people who have a ruptured aneurysm die because

of misdiagnosis,” says neurosurgeon Anil Nanda, MD, MPH, Senior Vice President of Neurological Services for RWJBarnabas Health and Chairman, Department of Neurosurgery, for Rutgers-New Jersey Medical School and Robert Wood Johnson Medical School.

“We have seen an increase in ruptured aneurysms during the COVID-19 pandemic. This may be because people have been less active during this period, perhaps gaining weight or not controlling high blood pressure,” he says.

People who may have warning signs of an aneurysm often neglect them, assuming they’ll simply go away, he says. In addition, many people have avoided seeking care because of fear of going to a hospital during the pandemic.

“The classic symptom is a severe

headache—one that feels like the worst headache of your life,” Dr. Nanda explains. “Not every headache is an aneurysm, of course, and most of the time it’s not anything serious. But if you have this terrible headache along with neck stiffness, and bright light bothers you, you should go to the Emergency Department to have it investigated.”

ADVANCED TREATMENTS

Aneurysms can be diagnosed by a CT (computed tomography) scan, which uses X-rays to determine whether blood has leaked into the brain. Doctors may also order an MRI (magnetic resonance imaging), which uses computer-generated radio waves to create detailed images of the brain.

Other diagnostic tests include

a cerebral angiography, which is performed by passing a catheter (a long, flexible tube) from the groin artery to inject a small amount of contrast dye into the neck and brain arteries, and a cerebrospinal fluid analysis, which measures chemicals that indicate bleeding in the brain.

"If we do determine there is an aneurysm, whether it's ruptured or in danger of bursting, we look at the risk factors and determine the appropriate course of action. If surgery is indicated, we'll get our team together and perform it within 12 to 24 hours," says Dr. Nanda.

"For years, a procedure called clipping was the only way to fix an aneurysm," he explains. In this procedure, a craniotomy is performed to create an opening in the skull and then a small metal clip is placed on the aneurysm to stop the blood flow.

"Clipping is still the best solution for some cases," Dr. Nanda says. "Today, however, the mainstay of treatment is coiling. We can thread the catheter through a groin artery to place a coil on the aneurysm, and there is no need to open the skull."



WHAT IS A BRAIN ANEURYSM?

A cerebral (brain) aneurysm is a weak spot on a brain artery that balloons or bulges out and fills with blood. If it bursts, it spills blood into the surrounding tissue, an event that's called a hemorrhage. Brain cells, deprived of oxygen, begin to die, and the patient may have a stroke.

TEAM OF EXPERTS

Decisions about treatment are made on a case-by-case basis. "We have a multidisciplinary team at RWJBarnabas Health and Rutgers," says Dr. Nanda. "We have neurologists, neurosurgeons, a neuropsychologist, a neuroradiology team and endovascular specialists, all providing input about what will be most effective for the patient. We're like a special forces team, able to come together quickly. The patient gets 10 experts for a problem immediately, which is a huge advantage." Nurse

practitioners, neurology nurses and neurophysiology technologists round out the care team.

"Another benefit of being part of a large system is that we have the advantage of research, clinical trials and education," Dr. Nanda says. "We can do what we call translational research, meaning we take basic research that's being done on stroke and translate it into the clinical realm. It's a bench-to-bedside approach where we can really improve the condition of patients."



RISK FACTORS

- Uncontrolled blood pressure.
- Smoking.
- Family history of aneurysms.
- Older age.
- Head injury.
- Substance abuse, particularly cocaine.
- Heavy alcohol consumption.
- Conditions present at birth, including polycystic kidney disease and cerebral arteriovenous malformation, an abnormal connection between arteries and vessels in the brain.



POSSIBLE SIGNS OF A RUPTURED ANEURYSM

If you experience these symptoms, call 911:

- Sudden, severe headache.
- Double vision.
- Nausea and vomiting.
- Stiff neck.
- Sensitivity to light.
- Seizures.
- Loss of consciousness, even if brief.
- Cardiac arrest.



POSSIBLE SIGNS OF AN UNRUPTURED ANEURYSM

If you experience any of the following, consult your doctor right away:

- Drooping eyelid.
- Dilated pupil in one eye.
- Pain above and behind the eye.
- Changes in vision or double vision.
- Confusion.
- Weakness and/or numbness on one side of the body.

For more information about neurosurgical services available at RWJBarnabas Health, visit www.rwjbh.org/neurosurgery.





WHY CHILDHOOD VACCINATIONS CAN'T WAIT

DON'T DELAY ROUTINE VACCINATIONS THAT WILL KEEP YOUR CHILD SAFE FROM PREVENTABLE DISEASES.

The rate of routine childhood vaccinations—for diseases like measles, mumps, pertussis and more—has declined significantly during the COVID-19 pandemic, and pediatricians are worried.

“This decrease in vaccinations is a huge concern to us,” says Uzma Hasan, MD, Division Chief of Pediatric Infectious Diseases at Saint Barnabas Medical Center and a member of RWJBarnabas Health Medical Group.



UZMA HASAN, MD



PATRICIA WHITLEY-WILLIAMS, MD

“We don’t want to experience a resurgence of vaccine-preventable illnesses that we have previously had very good control over. We don’t want to see our patients develop life-threatening issues like encephalitis from measles or meningitis from *Haemophilus influenzae* type B, which are prevented by safe, routine childhood vaccinations.”

“Parents have been hesitant to bring their children to doctors’ offices or clinics for fear of exposing them to COVID-19,” explains Patricia Whitley-Williams, MD, a pediatric infectious disease specialist at the Bristol-Myers Squibb Children’s Hospital at Robert Wood Johnson University Hospital and Division Chief of Allergy, Immunology and Infectious Diseases at Rutgers-Robert Wood Johnson Medical School.

“However, these offices are following all the recommended guidelines from

the Centers for Disease Control and Prevention,” Dr. Whitley-Williams says. “Offices are sanitized in between patient appointments, plastic barriers are up, patients and visitors are checked for fever and masks are worn.” (For children, wearing a mask is recommended over the age of two years.)

“Pediatricians’ offices have protocols in place to keep well children and sick children apart,” adds Dr. Hasan. “Some set aside special time periods just for vaccinations. Many places require that people check in over the phone and wait outside in their cars. Patients and families then are brought straight into the office, so there’s no exposure to other people in a waiting room.”

Parents who have safety concerns should contact their pediatrician’s office to ensure that proper safety measures are in place, the doctors advise.

FOLLOW THE SCHEDULE

Timing is important when it comes to childhood vaccinations, Dr. Hasan says. “Please don’t put off having your child vaccinated because you think it’s better to space the shots out,” she says. “The schedule of vaccines has been carefully determined to minimize risk and get the best response for each age.” The recommended schedule for routine childhood vaccinations can be found at www.cdc.gov/vaccines.

Expectant mothers should get the Tdap vaccine to protect the baby against pertussis, sometime between the 27th and 36th weeks of pregnancy, the CDC recommends. “That vaccine has been a game changer for protecting vulnerable newborns,” Dr. Hasan says.

One vaccine many parents are eager to explore for their children is the one for COVID-19, Dr. Hasan says. “I can’t tell you how many calls we get about that,” she says. “We’re eagerly awaiting the results of trials so we have safety data for the younger age groups, particularly for vulnerable populations such as those with kidney, heart or lung disease.”

In the meantime, routine childhood vaccinations should proceed as advised by your pediatrician. “Parents and guardians should be assured that these vaccines have been proven to be safe and effective,” says Dr. Whitley-Williams, “and they save lives.”

To find a pediatrician at RWJBarnabas Health, call **888.724.7123** or visit www.rwjbh.org/doctors.





Hard work at the Inpatient Chronic Pain Management Program enabled Olivia to compete in triathlons again.

A RACE AGAINST PAIN

**A COMPETITIVE ATHLETE
ACHIEVES HER DREAMS THANKS
TO AN INNOVATIVE PAIN
MANAGEMENT PROGRAM.**

Olivia Christmann, 19, had been in pain for months when she came to Children's Specialized Hospital (CSH) in New Brunswick.

A competitive athlete, Olivia had been training for the Age Group Triathlon World Championships in August 2015 when she crashed her bike while riding at 27 miles per hour. The impact of the crash left Olivia suffering from a broken nose, a torn gluteus maximus and several strains in her legs.

Though her injuries healed with time, her pain continued and got progressively worse. Finally, Olivia was diagnosed with Complex Regional Pain Syndrome (CRPS), a form of chronic pain that develops after an injury but gets worse over time. While CRPS is not well understood, it's thought that high levels of nerve impulses are sent to the affected site.

Olivia tried several outpatient therapies, but her pain persisted, leaving



her unable to do most social or physical activities. Even walking to the car after a therapy session was an ordeal.

After researching other avenues for treatment, Olivia learned about the four-week Inpatient Chronic Pain Management Program at CSH.

"I was searching for a way to get my life back to normal," says Olivia. "During the initial evaluation, they asked me what my goals for the program were, and the first thing that I said was that I wanted to race again." She entered the program in January 2016.

WILL TO WIN

During her time at CSH, Olivia learned techniques for moving in a way that would help her manage the pain. Her natural competitiveness came out during timed activities like learning how to step in and out of a tub, or going for a walk

outside. "I always strived to beat my time from the day before," she recalls. Swimming, aquatic therapy and group and individual psychotherapy helped her learn to desensitize herself to pain and function normally.

After four weeks, Olivia was feeling more in control of her CRPS—and ready to get back to her senior year of high school. By the end of that year, she had been accepted into a prestigious university and was back to competitive sports.

In 2019, nearly four years after her accident, Olivia competed in the Age Group Triathlon World Championships, the same competition she'd been training for when she crashed her bike.

Olivia recalls the moments before the competition began: "I remember thinking, 'I can't believe I'm actually here!' And that's when it all hit me: There's no way I would have been able to do it if it weren't for my time at Children's Specialized Hospital. The treatment I got there gave me the chance to live out my dreams."

For more information about Children's Specialized Hospital, call **888.244.5373** or visit www.rwjbh.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 and Warren.



THERE'S NOTHING MINOR ABOUT THE PARTNERSHIP BETWEEN RWJBARNABAS HEALTH AND THE SOMERSET PATRIOTS.

When two powerhouse organizations combine forces, the result is a big win for the community. Fans and friends of the Somerset Patriots not only get to see great baseball—the team was recently selected as a Double-A affiliate for the 27-time world champion New York Yankees—they also learn new ways to stay healthy.

“Baseball players work at their craft every day to be the best that they can be. Their exercise routines and nutritional habits are rooted in the principles of living healthy. Like our community, they rely on experts to help guide them along the way. That’s why our partnership with RWJBarnabas Health is so important and works so well,” says Steve Kalafer, Somerset Patriots Chairman Emeritus and RWJBarnabas Health (RWJBH) trustee.

Over the 22-year history of the partnership, RWJBH has hosted regular health fairs, blood drives and food drives, and has provided information on how

community members can get access to key health services and screenings. Somerset Patriots players have benefited, too: RWJBH provides sports medicine services to keep players on the field of play.

For kids, the Somerset Patriots, in partnership with the health system, created the Hit a Home Run Program. Featuring former pitcher Nate Roe, the education program for schools (delivered virtually this school year) is designed to teach young children how to eat healthier, make smarter lifestyle choices, be a good teammate and friend and understand the importance of exercise.

FRIENDS IN NEED

The Somerset Patriots team has been a stalwart supporter of RWJBH. Last summer, the organization raised more than \$16,000 for the RWJBarnabas Health Emergency Response Fund to help support healthcare professionals as they served communities during the COVID-19 pandemic. The money was



At left, the Somerset Patriots and RWJBarnabas Health have recently enhanced their longtime partnership. Above, former pitcher Nate Roe delivers health information for area students (photo taken pre-pandemic).

raised in a variety of ways, including online auctions, merchandise sales of T-shirts and face masks, a pop-up shopping event and drive-in movies at TD Bank Ballpark.

“We are so grateful to the Somerset Patriots for their continued support of our hospital and our community throughout the COVID-19 pandemic, from donations of food for our staff to hosting blood drives and holding events to benefit our Emergency Response Fund,” says Tony Cava, President and CEO of Robert Wood Johnson University Hospital Somerset, a pillar of healthcare throughout Central New Jersey. “Their ongoing support helps ensure that our community has access to the comprehensive healthcare services they need.”

A SOURCE OF PRIDE

RWJBH employees, many of whom live locally, take great pride in the partnership, attending games and participating in group events. Players feel that spirit as well.

“We pride ourselves on being active in our community to help make a difference,” says Somerset Patriots President and General Manager Patrick McVerry. “Our fans are always there for us at the ballpark and for all of our efforts. We know that through our partnership with RWJBarnabas Health, we are able to make sure our fans and community are always in good hands where their health is concerned.”

To learn more about the Somerset Patriots and the RWJBH partnership, visit www.milb.com/somerset and www.rwjbh.org/partnerships. To donate to the RWJBH Emergency Response Fund, visit www.rwjbh.org/giving.

TOP-NOTCH CANCER CARE CLOSE TO HOME

A SURGEON EXPLAINS HOW HE TREATS PANCREATIC AND LIVER TUMORS.

Pancreatic and liver cancers aren't common (there's a less than 2 percent risk of developing them over the course of a lifetime), but they can be deadly. Pancreatic cancer is the third deadliest cancer (after lung and colon cancers) and liver cancer is the fifth deadliest, according to the National Cancer Institute. Fortunately, surgery can be an effective treatment.

In the past, patients with these cancers often traveled to New York or Philadelphia for care. Now, treatment is available at Monmouth Medical Center Southern Campus (MMCSC). William P. Boyan Jr., MD, a board-certified general surgeon at MMCSC

and RWJBarnabas Health Medical Group, explains how he treats liver and pancreatic cancers.

Can surgery effectively treat liver and pancreatic cancers?

Absolutely. About 44 percent of liver cancers and 15 to 20 percent of pancreatic cancers are found early enough to be removed via surgery. Fewer than half of liver cancers start in that organ. Most occur when a tumor affecting another organ—usually the colon—spreads to the liver. Fortunately,

cancer that's spread from the colon to the liver is often curable if it's caught early.

How has surgery for liver and pancreatic cancers improved in recent years?

Today, we can remove early liver and pancreatic cancers by using minimally invasive surgery. Patients benefit because they experience less pain, a shorter hospital stay and a lower risk of infection. They also experience fewer complications, such as blood loss, compared with open surgery. Of course, there are some instances in which tumors need to be removed using open surgery.

What minimally invasive procedures do you perform?

I perform two different types of minimally invasive procedures for liver and pancreatic cancers: laparoscopy and robotic surgery. With laparoscopy, I make several small incisions and insert a laparoscope—a thin, lighted tube with a video camera at the tip—into one of them. I place surgical instruments inside the remaining incisions and remove the tumor. In robotic surgery, I use three-dimensional, high-definition imaging and robotic arms to perform very precise procedures.



WILLIAM P. BOYAN JR., MD

RWJBarnabas Health and Monmouth Medical Center Southern Campus, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

To find a cancer surgeon at MMCSC, call 844.CANCERNJ.



A TRYING TIME

HOW TO KEEP YOUR SPIRITS UP DURING THE PANDEMIC.

Not surprisingly, the pandemic has taken a toll on people's mental health. Forty percent of adults in the U.S. have reported at least



ARNOLD A. WILLIAMS, MD

one pandemic-related mental or behavioral health condition, such as anxiety, depression or substance use, according to a 2020 survey published in the Centers for

Disease Control and Prevention's *Morbidity and Mortality Weekly Report*. In 2020, the prevalence of anxiety disorders was three times greater than that reported in 2019, and the prevalence of depressive disorder symptoms was four times greater than that reported in 2019.

Arnold A. Williams, MD, a psychiatrist and chair of the medical staff at RWJBarnabas Health Behavioral Health Center who is affiliated with Monmouth Medical Center Southern Campus (MMCSC), sees patients with a variety of mental illnesses. The

pandemic has had a significant effect on these patients, who suffer from depression, anxiety, schizophrenia, bipolar disorder and substance use problems. "The changes in their daily routine led to an exacerbation in their symptoms," he says. "Many were working from home and feeling isolated or struggling with childcare issues."

Others lost their jobs, harming their self-esteem, says Dr. Williams. "The pandemic created an identity crisis," he explains. Making matters worse, "people didn't have access to outlets that



MAKE AN EFFORT TO CONNECT WITH FRIENDS AND FAMILY MEMBERS ON A REGULAR BASIS.

combination of these situations can lead to anxiety, depression and/or a loss of self-worth,” says Dr. Williams. People’s eating patterns were disrupted, and they gained weight. Many turned to drinking. There was an uptick in the number of people who experienced substance use problems—and relapses in those who had struggled with this in the past, says Dr. Williams.

Prior to the pandemic, some patients had been receiving services at an intensive outpatient clinic, which would see patients three to five days per week. Other patients had had home visits from mental health professionals. When the pandemic began, many of the agencies the Behavioral Health Center relies on for outpatient care could no longer provide care for patients or had to limit the number of patients they could see. “More patients were in danger of falling through the cracks,” says Dr. Williams. Fortunately, many people have benefited from therapy sessions through videoconferencing, also known as telepsychiatry.

COPING STRATEGIES

If you’re experiencing pandemic-related stress, consider Dr. Williams’ strategies for keeping your spirits up during turbulent times:

- **Find new ways to de-stress.**

If your gym isn’t open—or you don’t feel comfortable going—find new ways to stay active. Take up hiking or go for a walk in your neighborhood or local park.

- **Reach out to loved ones.**

Make an effort to connect with friends and family members on a regular basis.

- **Carve out time for yourself.**

Now that you’re spending more time at home, it’s imperative to carve out

time for activities you enjoy. Consider binge-watching a Netflix series, going mountain biking, creating photo books or writing in a journal.

- **Create a routine.**

Wake up and go to sleep at the same time every day. “People don’t deal well with the unknown,” says Dr. Williams. “The more you can trick your brain into thinking you have a schedule, the better you can prevent chaos. Having a structure in place allows us to go about our lives.”

- **Establish boundaries.**

When you’re working from home, it’s easy for your work and home lives to blend together. Set aside time for lunch and coffee breaks now that you don’t commute. Also, if possible, create separate locations for working, exercising, meditating and eating. “This will guard against chaos,” says Dr. Williams.

- **Consider meditating.**

It can be brief—just a few minutes at a time, says Dr. Williams, who recommends downloading an app, such as Headspace, Calm or Aura.

- **Limit the amount of time you spend watching the news.**

Don’t spend more than 30 minutes reading or watching the news, advises Dr. Williams. It can intensify anxiety. Also, avoid watching the news just before bed.

- **Find joy every day.**

“The most common way many of us deal with stress is to focus on things that are familiar to us,” says Dr. Williams. So, re-read your favorite book or watch your favorite movie or comedy show.

could normally help them cope with these stresses,” says Dr. Williams. “They couldn’t go to the gym, get massages or attend yoga classes. They also couldn’t take vacations.”

MENTAL HEALTH FALLOUT

The impact of these changes was devastating for many people. “Any

To learn more, contact the RWJBarnabas Health Behavioral Health Access Center by calling 800.300.0628 or visiting www.rwjbh.org/behavioralhealth.





Annie Benbrook, MS, CCC-SLP,
Senior Speech Pathologist,
administers a modified barium
swallow test to a patient.

REDISCOVERING THE JOY OF EATING

**AT MMCSC, SPEECH-LANGUAGE PATHOLOGISTS HELP PATIENTS
OVERCOME SWALLOWING PROBLEMS.**

Imagine eating your favorite food but not being able to swallow it—or having trouble breathing afterward. About 20 percent of people over age 50 have a swallowing disorder, also known as dysphagia, according to the National Foundation of Swallowing Disorders. Symptoms include coughing while you eat or afterward; food or liquid leaking from your mouth or getting stuck; difficulty breathing after eating; and weight loss. Causes include stroke, brain or spinal cord injury, Parkinson's disease, multiple sclerosis, head and neck cancer, cerebral palsy and Alzheimer's disease.

Treatment is critical because swallowing disorders can lead to serious

complications, including choking, pneumonia and malnutrition. A speech-language pathologist (SLP) can provide therapy to help improve your ability to swallow. The first step is to have a modified barium swallow test, in which you eat a food or drink a liquid coated with barium, a chalky, white substance. The barium appears on an X-ray, enabling the SLP to watch where the food goes when you swallow.

At Monmouth Medical Center Southern Campus (MMCSC), the modified barium swallow test is given to both inpatients and outpatients. It's the only hospital in the area that performs this test on children (typically those with traumatic brain

injury). People who have recovered from COVID-19 may also benefit from the test, says Annie Benbrook, MS, CCC-SLP, Senior Speech Pathologist. "They may be short of breath and coughing frequently," says Benbrook. "If a person is having trouble breathing, the brain doesn't want to close the airway. As a result, the person may aspirate his or her food."

AN X-RAY ASSESSMENT

During a modified barium swallow test, Benbrook gives patients items to eat and drink and observes the timing and pattern of their swallow. Patients are given foods with various textures, such as honey, pudding, crackers, cookies and meat. Then, a type of imaging called fluoroscopy is performed. A continuous X-ray beam passes through the body, creating a so-called X-ray "movie." If a person is having trouble swallowing a food with a certain texture, Benbrook will ask them to try a different position.

MMCSC provides therapy for adults with swallowing disorders. Oftentimes, this involves learning ways to compensate for swallowing trouble. For instance, a patient might try a position known as the chin tuck. There are also exercises that help patients improve their swallowing. They can exercise the muscles in the throat, the back of the tongue and the mouth.

Benbrook works with patients who had COVID-19 and teaches them how to better coordinate their breathing and swallowing. In some cases, patients need to change their diet to avoid aspirating food. "Our goal is to identify and define the physiology of a person's swallowing problem and determine the best therapy," says Benbrook. "If a patient is diligent in performing the exercises, we see a definite improvement after a month or two."

For more information on swallowing disorders and treatment, go to www.rwjbh.org/monmouthsouth/rehab or call 732.886.4531.





KEEPING PATIENTS SAFE

THANKS TO A GENEROUS DONATION, ULTRAVIOLET LIGHT TECHNOLOGY IS BEING USED TO SANITIZE THE HOSPITAL.

Keeping operating rooms and patient rooms clean is especially important during the pandemic, but it can also provide protection from other potentially deadly infections. One example is *C. difficile*, a bacterium that causes severe diarrhea and inflammation of the colon. An alarmingly large number of

people over age 65—one in 11—who are diagnosed with *C. difficile* die within one month, according to the Centers for Disease Control and Prevention (CDC). Another infection called MRSA, which stands for methicillin-resistant *Staphylococcus aureus*—a bacterium that's resistant to several antibiotics—can cause serious skin

Ultraviolet light disinfection units are placed in patient rooms to safely and effectively clean surfaces.

infections and pneumonia. About 5 percent of patients in U.S. hospitals have MRSA in their noses or on their skin, according to the CDC.

Cleaning operating rooms and patient rooms used to be a lengthy and imperfect process. Housekeeping staff members had to use wipes and sprays to properly sanitize every surface. Now, thanks to a generous donation from the Grunin Foundation, Monmouth Medical Center Southern Campus (MMCSC) is using ultraviolet light technology. Wherever the light shines, it disinfects surfaces.

SAFE AND EFFECTIVE SANITATION

Several different types of units have been installed throughout MMCSC, including seven operating rooms. Ceiling-mounted units, which are used to sanitize operating tables and stations, are able to reach areas that are notoriously difficult to clean.

In addition, the hospital has purchased ultraviolet light disinfection chambers for N95 masks, tablets, laptops, stethoscopes and blood pressure cuffs. A staff member simply places an object inside the unit, closes the door and presses a button. Within 30 seconds, the item has been disinfected. This allows the hospital staff members to reuse N95 masks. Several other types of ultraviolet disinfection units have been placed in patient rooms and bathrooms. They are activated after a patient has been discharged.

"We are forever grateful for the impact this technology has made on the medical center," says Denice Gaffney, Vice President of the Foundation at MMCSC. "I'd like to thank the Grunin Foundation for their generous donation."

To support the Monmouth Medical Center Southern Campus Foundation, visit www.rwjbh.org/monmouthsouth/giving.org.



Joan and John Boyle are feeling like themselves again after battling COVID-19.



CONQUERING COVID-19

EXPERT CARE HELPED ONE COUPLE RECOVER QUICKLY.

When Joan Boyle of Lakewood turned 66 in November 2020, her daughter, Jackie, was eager to celebrate. So, Joan and her husband, John, 69, masked up and met Jackie and their granddaughter Juliet, 15, for lunch at a local diner. It was a happy gathering—one that, unbeknownst to them, would ultimately endanger Joan's and John's lives.

The next day, Juliet spiked a fever. Testing revealed she had COVID-19. Jackie began to show symptoms next, followed by Joan and John, who has only one lung and a weakened immune system. The worried couple quickly got tested at a nearby urgent care facility. John's test results never came back, but Joan learned she had COVID-19. By

then, she says, "We were very fatigued, short of breath, coughing and running a fever."

John's pulmonologist, Awani Kumar, MD, Director of the Critical Care Unit at Monmouth Medical Center Southern Campus (MMCSC), advised that John come to the hospital. After the couple arrived at MMCSC, they were both evaluated and admitted.

Joan and John were treated with convalescent plasma, [the antiviral medication] remdesivir, vitamins, and intravenous antibiotics. "Respiratory therapists gave us breathing treatments four times a day," says Joan.

GRATEFUL PATIENTS

Both John and Joan were diagnosed

with pneumonia. "I was scared," John confesses. "I knew it was a life-threatening situation." But Dr. Kumar boosted his spirits. "He said, 'You got the right drugs. Just hang in there.'"

Joan rapidly improved. Although she needed supplemental oxygen at times, her fever was gone after two days. John, too, turned the corner quickly. When the couple was discharged five days later, they were given the celebratory "clap-out" parade with balloons and music, says Joan, who is back to her job at the New Jersey Commission for the Blind.

John and Joan are founding members of the hospital's Patient Family Advisory Council, which suggests ways to improve the patient experience. The couple can now report that MMCSC is better than ever.

"I wrote a letter to the chairman of the board," says John. "The care was outstanding. The hospital is a gem."

For more information about COVID-19 and vaccine resources, visit www.rwjbh.org/monmouthsouth.





PATIENTS ARE HELPING THE HOSPITAL PROVIDE THE HIGHEST QUALITY CARE.

To deliver safe, comprehensive and compassionate care, Monmouth Medical Center Southern Campus (MMCSC) needs the community's input. So, in 2018, MMCSC formed the Patient and Family Advisory Council (PFAC). "We wanted to get different perspectives on opportunities for change at the hospital," says Donna Salin, Director of Patient Satisfaction at MMCSC.

The group of five community members consists of a retired nurse, a former board member, the parents of a patient, and a former teacher and Geriatrics Institute patient. All have been patients or have family members who have been patients in the past two years. "They're so invested in the process, they feel like family to us," says Salin.

The group, which meets monthly, has discussed a variety of issues, such as whether signs were helpful in directing patients to the correct parking lots. PFAC members suggested changes, including flagpoles that list the locations of services. In addition, staff committee members have "challenged" members to locate areas in the hospital without direction in order to make wayfinding recommendations.

Last summer, the hospital was welcoming patients back during the COVID-19 pandemic. PFAC members were asked whether the hospital was clearly communicating messages not to delay emergency care or put off surgery. "We asked PFAC members, 'What would make you feel safe at the hospital?'" recalls Salin. The group made recommendations about how the hospital could inform the community about visitation restrictions.

Members recently reviewed the hospital's website to determine whether it's easy to find doctors and services. The group has also discussed what steps the hospital can take to receive the best feedback in patient surveys. The next task is to determine how the patient registration process can be improved, says Salin.

SERVING ON COMMITTEES

In 2018, all RWJBarnabas Health hospitals instituted their own PFACs. Across the system, members are involved in patient education; participate in patient rounds, in which they visit hospitalized patients; and serve on a variety of hospital committees, including Bioethics, Quality,

Community members recommended changes to hospital parking lot signs to help patients find their destinations.



MEETING THE NEEDS OF PATIENTS

Patient and Family Advisory Council (PFAC) members across RWJBarnabas Health have achieved the following:

- reduced discharge times by 30 minutes
- helped develop ICU, NICU, inpatient and pediatric brochures
- helped test the central scheduling app
- developed and presented workshops for families
- provided feedback on patient fall signs
- revised communication boards in patient rooms
- provided insights into visitation hours
- developed informational and safety videos

Infection Control, Patient Falls, Safety, Pediatric and Palliative Care. Some members have also joined the LGBTQ Business Group and Hand Hygiene Task Force. Last year, PFAC members started to participate in biweekly calls with Epic, the system's new Electronic Health Record vendor.

Looking ahead, specialty PFAC boards may form to serve Spanish-speaking patients, Rutgers Cancer Institute of New Jersey and NICUs.

PFAC members appreciate that their voices are being heard. Says one member: "Prior to this, I would send back the patient survey and never know if my comments were addressed. Now I know the hospital administration and PFAC members are listening."

If you've been a patient or are a family member of a patient and would like to join the Patient and Family Advisory Council, email donna.salin@rwjbh.org or call 732.886.4650.



**Monmouth
Medical Center
Southern Campus**

**RWJBarnabas
HEALTH**

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Your family has no history of breast cancer. You still need a mammogram.

It's curious how healthy habits can become go-to excuses. But don't excuse yourself from getting a mammogram. At Monmouth Medical Center Southern Campus, we offer the latest in comprehensive breast health services including screening and diagnostic mammography, genetic testing, breast biopsy, breast surgery and more — like peace of mind. And with breast health centers conveniently located in Monmouth and Ocean Counties, finding us is simple, too.

Making excuses is easy. Making an appointment is easier. Schedule your visit to the Jacqueline M. Wilentz Breast Center at rwjbh.org/mammo

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RUTGERS HEALTH

Let's beat cancer together.



Rutgers Cancer Institute of New Jersey is the state's only NCI-designated Comprehensive Cancer Center. Together RWJBarnabas Health and Rutgers Cancer Institute offer the most advanced cancer treatment options close to home.



**We've taken every precaution to keep you safe.
So if you've put off cancer care due to COVID-19, please don't delay it any longer.**