

healthy together



*When a Heart
Can't Pump*

TEAMWORK
SAVES LIVES

NEXT-LEVEL CANCER CARE
CLOSE TO HOME

GLUTEN-FREE KIDS
TIPS FROM OUR
CELIAC CENTER

HEALTHY
PREGNANCY
THE IMPORTANCE OF
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healthy *together* contents

WINTER 2026



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RWJBarnabas Health provides free language services, including qualified interpreters, to people whose primary language is not English. The following Language Assistance Services information is provided in multiple languages.

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ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

Llame al **1.844.465.9474**

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주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

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Ligue para **1.844.465.9474**

ગુજરાતી

સુચના: જો તમે ગુજરાતી બોલના હો, તો નાન્યાલું ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે.

1.844.465.9474 પર કોંક કરો.

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NEIGHBORHOODS. New initiatives expand access to healthy food and improve community wellbeing.

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RWJBarnabas Health School of Nursing expands with a new location in Oceanport.

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A primary care doctor offers a simple checklist to help you stay healthier when influenza spreads.



CREDIT: RICHARD B FLORES PHOTOGRAPHY

A MIRACLE ARRIVAL

WHEN AN EXPECTANT MOTHER FELT CHANGES IN HER BABY'S MOVEMENTS, QUICK ACTION AND TEAMWORK HELPED SAVE THEIR LIVES.



ANTHONY MONTEIRO, DO



STEVEN CULBERT, MD



JAMES MCDERMOTT, DO



MARIE BONVICINO, MD

Kayla MacNeil awoke one morning last January ready to start a new routine. She had just entered her 36th week of pregnancy. The night before, she and her husband, Christian, had gone out to dinner to celebrate her last day of work before their baby's due date.

But early the next morning, she noticed that something didn't feel right. "My baby was always most active in the morning and at night," says Kayla, 29, of Manchester. "On this morning, she was still active, but her kicking was very faint. It was nothing like normal."

Concerned, Kayla phoned Christian, a firefighter who had just started a 24-hour shift. "I asked him to come home so we could get to the hospital," she says. That decision ultimately saved both her life and the life of their soon-to-be-born daughter, Emilee.

A LIFE-THREATENING SITUATION

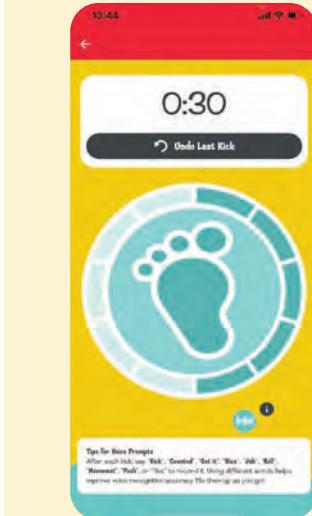
"Decreased fetal movement could indicate potentially fatal conditions, including separation of the placenta, umbilical cord accidents, or changes in maternal blood sugar or blood pressure," says Anthony Monteiro, DO, an OB-GYN at Robert Wood Johnson University Hospital Somerset and a member of RWJBarnabas Health Medical Group. "That's why it's important for moms to act quickly."

Kayla listened to the signs and headed to the Labor and Delivery unit at Community Medical Center (CMC). Nurses quickly connected her to fetal monitoring equipment, which revealed that her baby's heart rate was unusually flat.

"It was almost a straight line," says Kayla's OB-GYN, Marie Bonvicino, MD, who is on staff at CMC. "The baby was in grave danger."

A FAST RESPONSE

Kayla needed to undergo an emergency C-section. Thankfully, CMC is fully equipped to handle life-threatening obstetric crises, with a dedicated laborist in-house 24/7 and a team



IT'S EASY TO COUNT KICKS

Tracking your baby's kick count during pregnancy can help ensure their wellbeing. To help manage the process, download Count the Kicks' free app. By entering the average time it takes to record 10 movements each day during your third trimester, you'll be able to recognize healthy patterns. The app even sends reminders to enter your data. The Count the Kicks website also offers a web counter and downloadable paper charts. For more information, visit www.countthekicks.org.

of doctors, nurses, and other highly trained professionals ready at a moment's notice. "As soon as we knew the baby's heart rate was concerning, everything was prepared to deliver her as quickly as possible," says OB-GYN Steven Culbert, MD, a member of RWJBarnabas Health Medical Group, who assisted in the surgery.

James McDermott, DO, also a member of RWJBarnabas Health Medical Group, was the in-house laborist on duty that day. He prepared the operating room for Drs. Bonvicino and Culbert, who performed the C-section. "The teamwork of everybody involved—the anesthesiologists, nurses, doctors—was remarkable," Dr. McDermott says.

Amid the flurry of activity, Kayla focused on staying strong. "I felt a wave of calm come over me," she says. "I didn't let fear take over. I figured if this was the best way to get Emilee here, let's get her here safely."

A JUST-IN-TIME DELIVERY

During and after delivery, the reasons for Emilee's decreased fetal movement became clear. Kayla had suffered two rare but life-threatening complications. First was a placental abruption, in which the placenta separates from the uterus, limiting oxygen and nutrients to the baby. The abruption caused a fetomaternal hemorrhage, in which the baby loses significant amounts of

Placental abruption affects approximately 0.4% to 1% of pregnancies.

Source: National Library of Medicine

blood into the mother's circulation.

While Kayla recovered at CMC, Emilee needed blood transfusions and specialized care at The Bristol-Myers Squibb Children's Hospital at Robert Wood Johnson University Hospital in New Brunswick.

The facility has a Level IV neonatal intensive care unit (NICU) staffed by physicians who are part of RWJBarnabas Health Medical Group and Rutgers Robert Wood Johnson Medical School. Kayla spent two nights at CMC while Emilee spent a week in the NICU.

"Emilee's care was phenomenal," Kayla says. "The doctors and nurses were absolutely amazing. Being at a teaching hospital made the experience even greater, to have so many people at her bedside and supporting us as well."

EXCEEDING EXPECTATIONS

Almost a year later, Emilee is thriving. "To think we once feared she wouldn't make it, and now to see how far we've come, is nothing short of a miracle," Kayla says.

Inspired by her daughter and the quick-acting care team that saved her, Kayla now shares her powerful story with

HOW TO PERFORM KICK COUNTS

Doctors recommend that women start monitoring their babies' fetal movement patterns in the 28th week of pregnancy.

"Kick counts are a sign of fetal wellbeing," says Anthony Monteiro, DO, an OB-GYN at Robert Wood Johnson University Hospital Somerset and a member of RWJBarnabas Health Medical Group. "It's a way for a pregnant person to reassure themselves that their baby is doing well inside their uterus."

To monitor fetal movement, he recommends these tips:

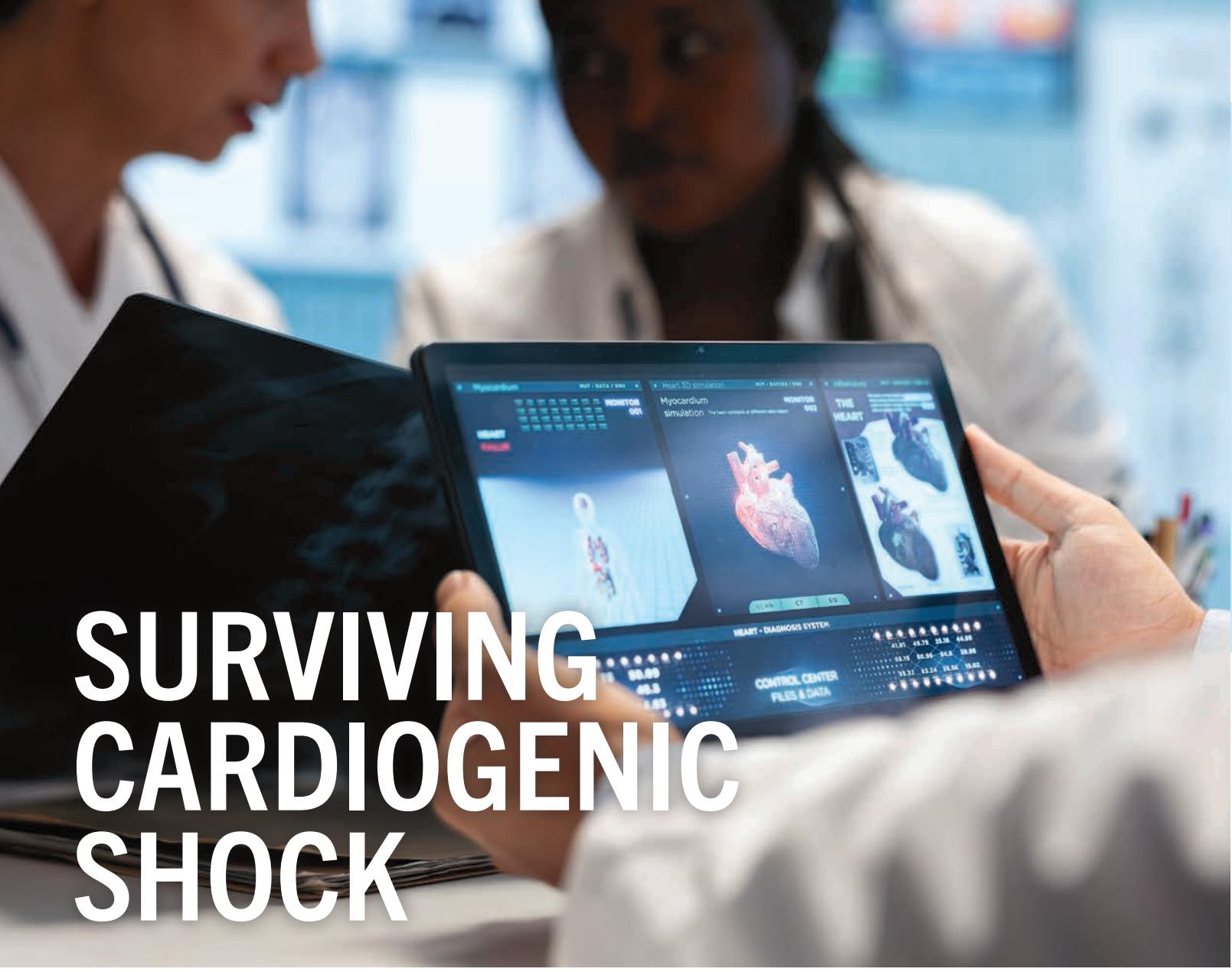
- **Get comfortable.** Lie on your side or sit comfortably in a quiet space.
- **Give it two hours.** This accounts for fetal sleep cycles (40 to 75 minutes).
- **Count your baby's movements.** Aim for at least 10 kicks.
- **Choose active times.** Babies are typically active after meals or in the evening.
- **Track your results.** Use a chart or a kick-counting app.

"If you don't feel 10 movements in two hours, you should call your doctor's office or head to Labor and Delivery," Dr. Monteiro says. "We can place the baby on a fetal heart monitor or perform a special ultrasound to assess their wellbeing."

other expectant mothers, emphasizing the importance of monitoring fetal movements in the third trimester. Her message to others is a simple one: "Always trust your intuition," she says. "It's always better to get checked out, even if it's just for peace of mind."

To learn more about maternity care at RWJBarnabas Health, visit www.rwjbh.org/treatment-care/maternity.

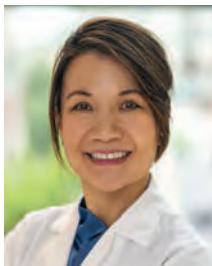




SURVIVING CARDIOGENIC SHOCK

RAPID RESPONSE, COLLABORATION, AND ADVANCED THERAPIES HELP DELIVER EXPERT CARE TO PATIENTS ACROSS THE STATE.

Cardiogenic shock is a life-threatening emergency. It can strike within minutes, most often after a heart attack or a sudden worsening of heart failure. No two cases are alike, making it tricky to diagnose and stage. And despite advanced therapies, mortality rates remain as high as 50 percent.



CHONYANG ALBERT, MD

Quickly identifying and treating cardiogenic shock can be the difference between life and death. That's why care teams at RWJBarnabas Health (RWJBH) have formed a Cardiogenic Shock Team, bringing rapid response, clinical expertise, and heart-saving treatments to patients throughout New Jersey.

"The newest data suggest a golden hour of cardiogenic shock management—so time is ticking," says Chonyang Albert, MD, Medical Director, Left Ventricular Assist Device & Mechanical Circulatory Support at Robert Wood

Johnson University Hospital, and Advanced Heart Failure and Transplant Cardiologist and Assistant Professor of Medicine at Rutgers Robert Wood Johnson Medical School. "Our team-based approach brings experts together quickly to determine the best path of treatment for each patient."

HOW IT WORKS

The Cardiogenic Shock Team is activated whenever a patient with suspected cardiogenic shock is identified. Clinicians from multiple specialties—including

ADVANCED TREATMENTS

RWJBarnabas Health (RWJBH) offers multiple innovative treatments for heart attack and heart failure, providing hope and healing to patients with conditions like cardiogenic shock. Advanced therapies include:

- **Impella**—A temporary heart pump for use when a patient's heart is too weak to pump on its own
- **Extracorporeal membrane oxygenation**—A life-support machine that circulates blood outside the body and adds oxygen, giving weak hearts and lungs time to recover
- **Ventricular assist device**—A circulatory support device that supports heart function and blood flow in people with weakened hearts and is often considered a bridge to transplant for uncontrolled heart failure
- **Heart transplant**—The only heart transplant and mechanical circulatory support program in New Jersey, available at Robert Wood Johnson University Hospital and Newark Beth Israel Medical Center

For patients who need procedures such as angioplasty or coronary artery bypass graft surgery after a heart attack, RWJBH offers the largest adult cardiac surgery program in the state and performs more angioplasties than any other health system in New Jersey.

doctors and advanced practice providers in interventional cardiology, cardiothoracic surgery, heart failure, and intensive care—gather together to discuss each patient's symptoms and create a personalized care plan.

"As a group, we make a decision on the next best step for each patient, such as going to the cardiac catheterization lab for emergency treatment or receiving a temporary heart pump to improve circulation," Dr. Albert says.

To help guide those decisions, the team grades the severity of each patient's cardiogenic shock from A (at risk) to E (extreme). The grades are based on a framework provided by the Society for Cardiovascular Angiography and Interventions.

WHY IT'S SIGNIFICANT

Research shows that a team approach to cardiogenic shock accelerates time-to-treatment and improves in-hospital survival rates. RWJBH's Cardiogenic



No one plans on heart disease, but everyone should have a plan for it. Connect with an RWJBarnabas Health heart and vascular specialist at 888.724.7123 or visit www.rwjbh.org/heart.

Shock Team has treated nearly 100 patients since its inception in September 2024, achieving impressive results.

"Some patients walk out of the hospital, follow up with their cardiologists, and don't need any advanced therapies," Dr. Albert says. "Others receive life-saving therapies and completely recover. They are true miracle stories."

WHERE IT'S AVAILABLE

Originally designed to care for patients inside RWJBH, the Cardiogenic Shock Team has quickly expanded into a trusted statewide resource. Today, providers caring for cardiogenic shock patients at any hospital in New Jersey can access the team's expertise.

"We're here to act as a resource for other hospitals," Dr. Albert says. "We partner with them to identify which stage of shock their patient is in and determine the best place to receive treatment, whether that's in their hometown hospital or through a



WHAT TO WATCH FOR

Symptoms of cardiogenic shock can include:

Signs of a heart attack:

- Chest pain
- Radiating pain down shoulders, neck, arm, or jaw

Signs of a heart attack or worsening heart failure:

- Shortness of breath
- Cool, clammy skin
- Weak pulse
- Low blood pressure
- Lightheadedness or dizziness

If you experience any of these symptoms, call **911**.

transfer to one of our hospitals."

For patients needing advanced therapies available only at RWJBH, the team determines the fastest and safest transfer method (air or ground transport) and the appropriate plan of action.

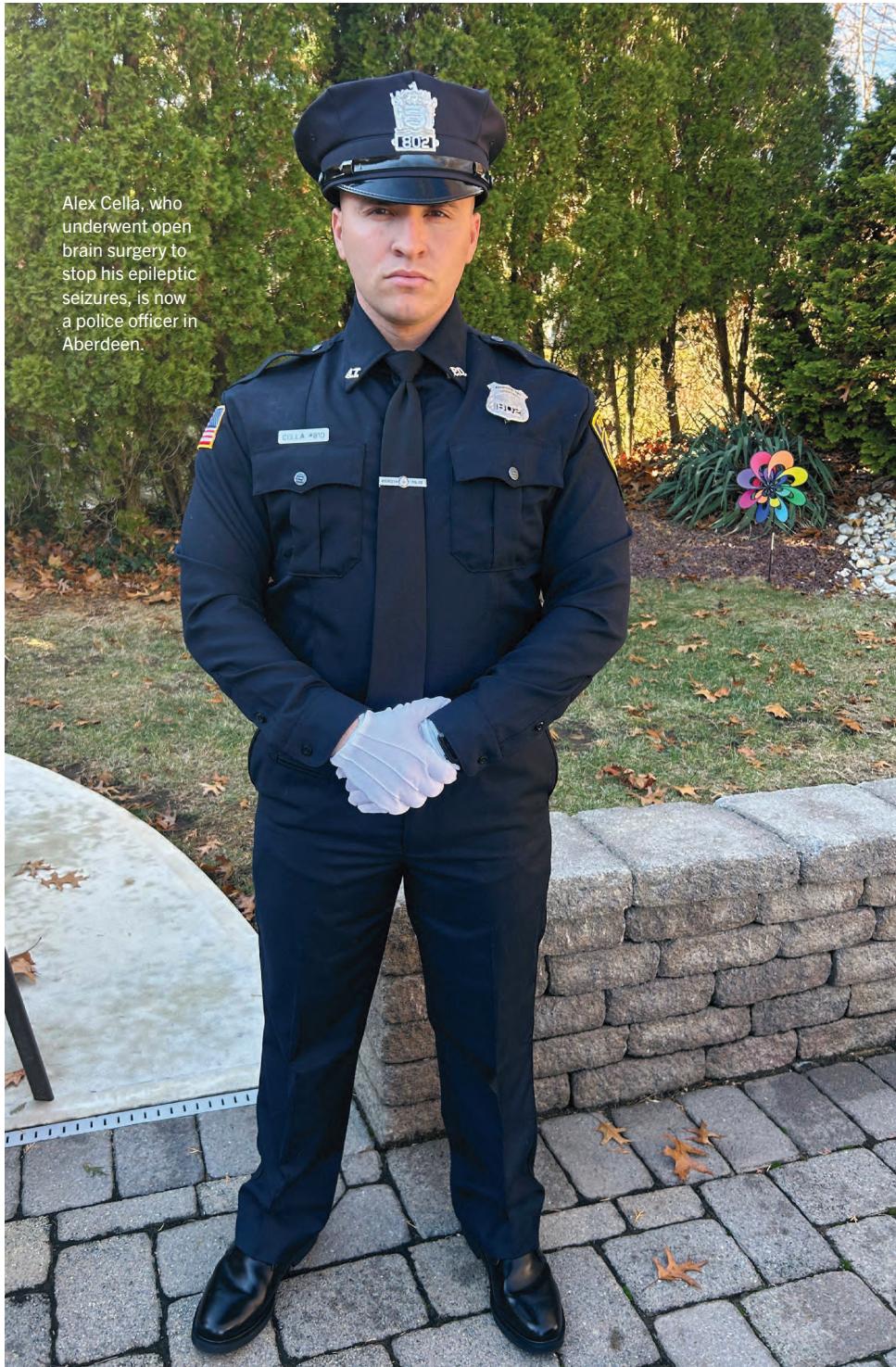
"Together, we decide where the patient should be transferred, whether it's directly to the cardiac catheterization lab, the cardiovascular intensive care unit, or the operating room," Dr. Albert says. "Once the patient arrives, we reassess and pivot to a new game plan based on the patient's condition if needed."

IMPROVING OUTCOMES

Because awareness is an essential part of rapid response, the Cardiogenic Shock Team has developed educational resources to aid providers in recognizing the signs of cardiogenic shock. The team also is sharing lessons learned with medical students and other health-care professionals to help save more lives.

"We are fortunate to have such high levels of resources and talent across our hospitals," Dr. Albert says. "By working together, we can give every person with cardiogenic shock in New Jersey a better chance at survival."

TO PROTECT AND SERVE



Alex Cella, who underwent open brain surgery to stop his epileptic seizures, is now a police officer in Aberdeen.

ADVANCED EPILEPSY CARE HELPS A MAN ACHIEVE HIS DREAM OF BECOMING A POLICE OFFICER.

For as long as Alex Cella can remember, he's been compelled to help people. As a collegiate soccer player, this desire led him to coaching and mentoring others. He was also a teacher's assistant for students with special needs. Later, Alex began to explore becoming a police officer so he could serve his community. However, a series of seizures suddenly threatened his dreams.

Alex experienced several brief and small nonconvulsive seizures followed by three more-significant nonconvulsive and convulsive seizures, preventing him from completing his police academy training. He embarked on a journey of multiple daily antiseizure medications for years, then ultimately underwent open brain surgery at the Level 4 Epilepsy Center at Robert Wood Johnson University Hospital (RWJUH) in New Brunswick. Now seizure-free following the surgery, Alex was able to return to his dreams.

ADDRESSING THE SEIZURES

"In 2019, I started having *déjà vu*, where I felt that I was experiencing the exact same thing at the exact same time," Alex



HAI SUN, MD, PhD



RAM MANI, MD, MSCE

recalls. "I would sit down and gather myself and be fine. But I would lose two to three seconds each time." A neurologist diagnosed him with epilepsy and managed it with medications, but Alex began to experience more-severe seizures.

In July 2021, Alex was coaching a high school baseball game when he fell to the ground unconscious. He was taken by ambulance to a local hospital but was released. "The doctors thought I'd passed out due to dehydration, but the mother of a player on my team who was a nurse said, 'I hate to tell you, but you had a seizure.' She knew exactly what it was," he says.

After Alex experienced his third severe seizure, his neurologist recommended an evaluation to determine whether surgery could improve the episodes. He referred Alex to Ram Mani, MD, MSCE, Chief, Epilepsy and Medical Director of the Clinical Neurophysiology Lab at RWJUH, Associate Professor of Neurology at Rutgers Robert Wood Johnson Medical School (RWJMS), and a member of RWJBarnabas Health Medical Group.

Dr. Mani consulted with fellow RWJBarnabas Health Medical Group member Hai Sun, MD, PhD, Chief of Neurosurgery at RWJUH and Associate Professor of Neurosurgery and Director of Epilepsy Surgery at Rutgers RWJMS. Alex's best treatment options included a minimally invasive procedure that uses heat to ablate scar tissue, tumors, or other abnormal areas of the brain causing the seizures, or open brain surgery to remove or disconnect those areas. Given the severity of his seizures and the potential to more precisely remove the diseased brain tissue responsible for them, Alex chose open brain surgery.

"Alex's previous doctor had tried four different medications—two of them are our 'big guns' that are highly effective—but he still kept seizing," Dr. Mani says.

Epilepsy is not a rare disorder—1 in 26 people will develop it during their lifetime. It can occur on its own or alongside other health conditions of the brain.

Source: © 2024 Epilepsy Foundation

SURGERY IS THE SOLUTION

In May 2023, to better understand what was going on, surgeons implanted seven thin wire electrodes in Alex's brain. For this procedure, Alex was taken off all medications and remained in the hospital for observation for eight days while the epilepsy team recorded the details of his brain activity. "We were able to watch him seize and record the brain waves, which gave us high confidence of where the seizures were coming from," Dr. Sun says.

Drs. Mani and Sun note that Alex benefited from having the procedure performed at a Level 4-accredited NAEC (National Association of Epilepsy Centers) Epilepsy Treatment Center like RWJUH. Level 4 Centers (the highest level of accreditation) have highly skilled and experienced multidisciplinary teams that can address complex cases like Alex's. The RWJUH and Rutgers RWJMS team includes epileptologists, subspecialty neurosurgeons, neuropsychologists, neuroradiologists, neuropathologists, electroencephalogram technicians, nurses, and more.

As a result of the procedure, the doctors identified a malformation of the outermost layer of Alex's brain as the cause of his seizures. In July 2023, Dr. Sun performed open brain surgery to remove this abnormal tissue. Alex has remained seizure-free since.

A DREAM REVIVED

Alex graduated from the police academy in December 2024 and began his new job as a police officer in Aberdeen, where he is excited to serve the community. He hopes to continue teaching in

RWJBarnabas Health Epilepsy Centers

For quality care, visit one of RWJBarnabas Health's highly rated epilepsy centers:

Level 4 Adult NAEC (National Association of Epilepsy Centers) Epilepsy Centers:

Cooperman Barnabas Medical Center, Livingston

Robert Wood Johnson University Hospital, New Brunswick

Level 3 Epilepsy Centers:

The Bristol-Myers Squibb Children's Hospital (Pediatric), New Brunswick

Community Medical Center (Adult), Toms River

McMullen Children's Center at Cooperman Barnabas Medical Center (Pediatric), Livingston

his new position, this time as a Law Enforcement Against Drugs officer for the school district.

"I couldn't be happier—there isn't a single day that goes by when I don't think about how grateful I am for the doctors and how everything worked out," Alex says. "I'm also beyond thankful for the support I have received from my mom, dad, brother, and extended family. I wouldn't be where I am today without them."

By sharing his story, Alex hopes to encourage others to keep pursuing their dreams no matter what obstacles they may face. "My advice is to not give up on anything," he says. "I admit I was down when the medications weren't stopping all the seizures and I had to leave the police academy. But I want young kids and even adults to know that if you have a dream—whatever it is—you need to have faith in yourself, your doctors, and God."

To learn more about neurosurgery at RWJBarnabas Health, visit rwjbh.org/epilepsy.





NEXT-LEVEL CANCER CARE

PATIENTS NOW HAVE THE MOST ADVANCED RADIATION THERAPY OPTIONS CLOSE TO HOME.

Receiving a cancer diagnosis can be overwhelming enough without having to worry about where to find the best treatment—or how to get there. Fortunately for patients in New Jersey, optimal cancer care, including a number of advanced radiation therapy options, is available close to home.



BRUCE HAFTY, MD

RWJBarnabas Health (RWJBH), together with Rutgers Cancer Institute, New Jersey's only National Cancer Institute-designated Comprehensive

Cancer Center, offers patients access to the latest, most advanced radiation therapy treatments, as well as a team of internationally recognized, board-certified radiation oncologists. A fully integrated network means that all patients receive the same high level of care at every location in the system.

"We have about 30 radiation oncologists throughout the system, and we all use the same quality metrics, the same dose constraints, and the same database," says Bruce Haffty, MD, System Director of Radiation Oncology at RWJBH and Rutgers Cancer Institute. "This allows us to share information and discuss any case at any time, including a patient's condition and treatment plan."

INNOVATIVE THERAPIES

Dr. Haffty says that nearly every radiation therapy technology that's currently available is offered through RWJBH and Rutgers Cancer Institute, including many cutting-edge technologies. Among these options are:

- **Proton beam therapy (PBT)**, which works by directing proton particles toward the tumor with pinpoint accuracy. Protons release their energy only at a certain depth, directly inside the tumor, so radiation is targeted directly to the cancer cells, minimizing damage to surrounding healthy tissues.

- **Stereotactic radiosurgery (SRS)**, which uses a high-dose, focused radiation beam. It targets both benign and malignant tumors of the brain.

- **Radionuclide therapy (RNT)**, also known as **unsealed source radiotherapy or molecular radiotherapy**, which relies

WHAT IS RADIATION THERAPY?

Radiation therapy is a cancer treatment that uses radiation to destroy cancer cells, shrink tumors, and keep them from recurring. In some cases, it can be used to treat benign conditions as well.

on radioactive substances called radiopharmaceuticals to treat cancer. Radiopharmaceuticals are approved for a number of cancers, and indications continue to expand. They are available to treat patients at several RWJBH facilities across the state.

- **Stereotactic body radiation therapy (SBRT)**, which delivers high-dose, precisely targeted radiation to small, well-defined tumors of the lung, liver, spine, and other sites. It uses advanced linear accelerator (linac) technology with image-guided treatment capabilities.

- **Gamma Knife radiosurgery**, which uses 192 tiny beams of precisely focused gamma radiation. It treats brain tumors and other brain abnormalities.

- **Intensity-modulated radiation therapy (IMRT) and image-guided radiation therapy (IGRT)**, which use advanced imaging and computer technology. The high-resolution, 3D imaging pinpoints tumor sites while protecting surrounding healthy tissue.

- **CyberKnife**, which uses robotic delivery and real-time image guidance to direct high-dose, focused radiation to tumors with extreme precision. It also minimizes exposure to surrounding healthy tissue. (See sidebar for additional information.)

- **Brachytherapy**, which is an internal radiation therapy. The radiation source is inserted directly into or next to a tumor to deliver radiation to a precise target.

- **Radioembolization/selective internal radiation therapy (SIRT)**, which is used primarily to treat inoperable liver tumors and metastatic colon cancer that has spread to the liver. It delivers radiation

According to the American Cancer Society, about 60% of people with cancer in the United States will have radiation therapy.

using tiny radioactive beads injected directly into the tumor.

- **Magnetic resonance-guided linear accelerator (MR-Linac)**, which is a highly advanced technology that combines a magnetic resonance imaging (MRI) scanner with a linac in one system. This allows doctors to more clearly see the size, shape, and location of the tumor, as well as surrounding organs and tissue, in real time. This helps them deliver higher, more effective doses of radiation with pinpoint precision and adjust the dose as needed during the treatment. RWJBH has one of only 100 MR-Linacs in operation worldwide, and one of just two in New Jersey, available at the Jack & Sheryl Morris Cancer Center in New Brunswick. Another MR-Linac will

Joseph Contessa, MD, an internationally recognized physician-scientist whose career spans over two decades of excellence in clinical radiation oncology, translational cancer research, and academic leadership, has been appointed as Chair of Radiation Oncology for Rutgers Cancer Institute, Rutgers Robert Wood Johnson Medical School, and Rutgers New Jersey Medical School. Dr. Contessa will also serve as Associate Director for Translational Research at Rutgers Cancer Institute, New Jersey's only National Cancer Institute-designated Comprehensive Cancer Center, together with RWJBarnabas Health (RWJBH).



JOSEPH CONTESSA, MD

only National Cancer Institute-designated Comprehensive Cancer Center, together with RWJBarnabas Health (RWJBH).

Dr. Contessa takes over for Bruce Haffty, MD, who recently chose to step down from the position after 20 years. Dr. Haffty will continue to serve as System Director of Radiation Oncology for RWJBH and Rutgers Cancer Institute and see patients at the Jack & Sheryl Morris Cancer Center, the state's only freestanding comprehensive cancer hospital.

"I'm honored to join the exceptional team of physicians and scientists at Rutgers Cancer Institute, RWJBarnabas Health, and Rutgers University and look forward to continuing our leadership in advancing radiation therapy research and care," Dr. Contessa says. "I'm also grateful for the opportunity to return to my home state and contribute to the department and center's mission of delivering innovative treatments and expanding access to clinical trials for patients in New Jersey and beyond."

be available at the Melchiorre Cancer Center at Coopersman Barnabas Medical Center when it opens in early 2026.

"Because radiosurgery uses high doses of radiation, patients can often be treated in fewer sessions," Dr. Haffty says. "For example, patients with certain types of prostate cancer can be treated with stereotactic radiosurgery, which allows them to be treated with five radiation treatments, as opposed to six to eight weeks of radiation."

While radiation therapy is used primarily to treat cancer, it can also treat benign conditions. Less than 10 percent of the radiation therapy treatments performed by RWJBH and Rutgers Cancer Institute are for nonmalignant tumors and conditions, such as arterial venous malformations and some forms of osteoarthritis.

To learn more about our advanced cancer treatments, visit www.rwjbh.org/beatcancer.





THE RISE OF ROBOTIC SURGERY

CUTTING-EDGE TECHNOLOGY GIVES PATIENTS A NEW OPTION FOR KNEE AND HIP REPLACEMENTS.

Robert Wood Johnson University Hospital (RWJUH) Somerset recently expanded its joint replacement surgery options with the introduction of robotic surgery. The Mako 4 SmartRobotics Technology offers an alternate way to perform some knee and hip replacements. RWJUH Hamilton has utilized the technology since 2020 and recently celebrated the milestone of completing more than 2,500 robotic hip

and knee replacement surgeries. Offering surgical precision, personalized treatment, and accelerated patient recovery, the robotic arm system further enhances RWJBarnabas Health's already nationally recognized orthopedic services.

David Abrutyn, MD, an orthopedic surgeon at RWJUH Somerset, uses the robotic platform to perform total and partial knee replacements. At RWJUH Hamilton, orthopedic surgeon Michael Duch, MD, a member of RWJBarnabas Health Medical Group, uses it for total hip replacements. Here, the doctors share their thoughts on what robotic technology means for orthopedic patients.

Why are patients and surgeons choosing robotic surgery?

DR. ABRUTYN: RWJBarnabas Health has always been a destination for joint

replacement surgery. As new technology evolves, we try to provide our patients with the best tools and treatment options that are out there. I think people sometimes think they have to go to New York or Philadelphia to get the latest and greatest technology, but you don't. Our well-trained surgeons are doing it right in your backyard.

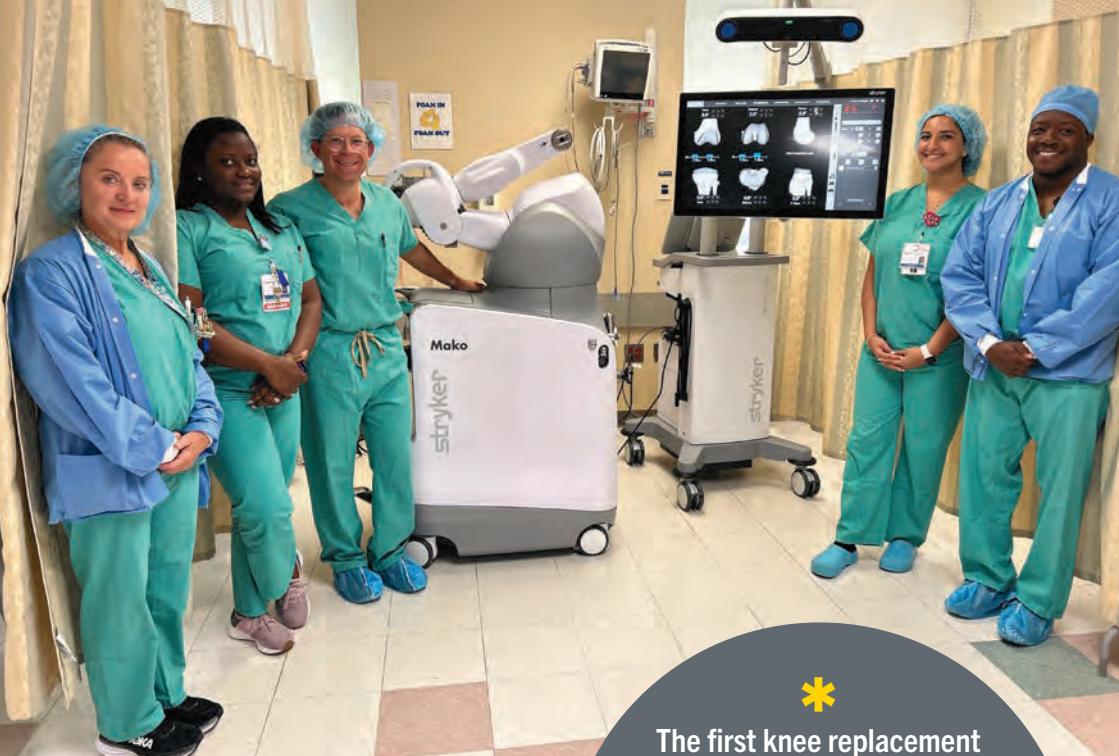
Patients often ask about robotic surgery. Using a robotic surgical system, we are able to get a detailed 3D CT scan, which allows us to personalize the surgical plan specific to the patient's anatomy before surgery. Then, intraoperatively, we get dynamic, real-time measurements and data points to assess the patient's range of motion and stability. We combine the data from the CT scan with the intraoperative data, make any necessary tweaks, and then are able to make a final plan.



DAVID ABRUTYN, MD



MICHAEL DUCH, MD



Opposite page: The orthopedics team at Robert Wood Johnson University Hospital Hamilton celebrates the milestone of performing 2,500 Mako procedures.

Above: The operating room team at Robert Wood Johnson University Hospital Somerset welcomes the arrival of Mako 4 SmartRobotics Technology.

DR. DUCH: We've always used mapping, using X-rays or CT scans. The difference here is in the live adjustments. We make sure that we have a balanced knee before we make any incisions, and a balanced knee is very important in getting the best outcome.

Tell us how robotic surgery works.

DR. ABRUTYN: It's not like a robot in the way you think of it. It's really a tool that the surgeon controls, but it also controls the surgeon. It only allows us to target the precise locations that we have mapped out in our surgical plan; if we move our hand somewhere else, it stops. It provides great precision during surgery. There's also more bone preservation because we're only removing the diseased bone, which allows us to get better implant alignment and soft-tissue balancing. This can lead to less pain, faster recovery, early range of motion, and improved long-term outcomes.

How are the results?

DR. DUCH: Using a robotic arm system helps ensure joint replacements are in

*
The first knee replacement was performed in 1890 and used ivory and plaster. Rubber, ivory, and glass were used in hip replacements before stainless steel was introduced in 1938. Today, hip and knee joint prostheses are made with metals, ceramics, and plastics.

Source: National Library of Medicine

anatomical alignment. That's different than how surgeons were historically taught to do them, but with the ligaments balanced perfectly, we seem to be getting good results.

Who is an ideal candidate for Mako surgery?

DR. ABRUTYN: Everyone who is a candidate for a knee replacement is a candidate for robotic surgery. However, robotic surgery can be advantageous for people who have complex knees, including post-traumatic arthritis or significant deformities, like being knock-kneed or bowlegged.

DR. DUCH: Surgeries on some of the most disfigured knees I worked on would never

have been possible if I didn't have the robotic arm to get the right anatomical understanding.

How does robotic surgery affect the patient experience?

DR. ABRUTYN: As these technologies advance, patients are staying in the hospital for less time. Our average length of stay is now about one day, but many people go home the same day. We're going to keep focusing on improving our use of technology and taking a multimodal approach to pain.

DR. DUCH: With people going home the same day, we've had to change how we approach pain management. We're doing a lot of different things than we used to. Spinal blocks (with sedation) help a lot with pain control right after the surgery and long-term. We also can inject certain things into the knee to help with pain.

To learn more about orthopedic services at RWJBarnabas Health, visit www.rwjbh.org/ortho.



RECOGNIZED FOR EXCELLENCE

Robert Wood Johnson University Hospital and Robert Wood Johnson University Hospital Somerset were recognized by *U.S. News & World Report* with a High Performing Specialty rating for Orthopedics. High Performing Specialty ratings are given to hospital programs whose overall score by the media outlet is in the top 10 percent in the nation for outcomes, patient experience, advanced capabilities, and expert opinion scores.





GROWING UP GLUTEN-FREE

FROM KNOWING WHAT FOODS ARE SAFE TO BECOMING SELF-ADVOCATES, KIDS WITH CELIAC DISEASE NEED TO LEARN HOW TO MANAGE THEIR CONDITION.

Celiac disease is an autoimmune disease that can occur any time in life. About 1 to 2 percent of children have it. Although awareness is growing, many with celiac disease don't realize they have it because they have no symptoms, the symptoms are minor, or they've had symptoms for so long that they think what they're experiencing is normal.



ASHWIN AGRAWAL, DO, MA, MBA

Celiac disease causes

an autoimmune response to gluten, a protein found in some grains, including wheat, barley, and rye. When gluten is consumed, villi—the small, finger-like projections lining the small intestine that help break down and absorb nutrients—become damaged. This can cause a variety of symptoms, from abdominal pain, bloating, nausea, vomiting, and diarrhea to hair issues, dental enamel problems, rashes, and migraines. In children, it can lead to poor growth, failure to gain appropriate weight or height, and delayed puberty. Untreated, it can lead to more-serious consequences such as increased risk of

certain cancers, infertility, and liver abnormalities, among others.

A CENTER OF SUPPORT

The Pediatric Celiac Disease Center, part of the Children's Health network at RWJBarnabas Health, is the only multidisciplinary pediatric celiac disease program of its kind in New Jersey. The center offers comprehensive care throughout the state for kids with celiac disease, including a team of gastroenterologists, dietitians, social workers, and mental health professionals.

The center has been honored by the Society for the Study of Celiac Disease as part of its Celiac Disease Unit Recognition Program, affirming that the center has demonstrated a significant commitment to delivering quality celiac disease diagnosis and treatment. It is one of only 10 such centers in the nation to have received this elite recognition.

"Having this designation means that when your child comes to us for concerns of celiac disease, they will get the most expert-level, cutting-edge, and evidence-based care available," says Ashwin Agrawal, DO, MA, MBA, a pediatric gastroenterologist, Medical Director for the Pediatric Celiac Disease Center, and a member of RWJBarnabas Health Medical Group.

The center also engages with families and children by offering programs throughout the year that often include gluten-free cooking demonstrations. "We try to help educate and bring a sense of community to people with celiac disease," Dr. Agrawal says.

TIPS FOR PARENTS

The only treatment for celiac disease is to be on a strict gluten-free diet. While this isn't easy for anyone, it can be especially challenging for kids, particularly when they're away from home. Fortunately, there are some simple ways to help kids adjust. Dr. Agrawal has these recommendations for parents:

- Seek a 504 plan at school to get special accommodations. Public schools and private schools that receive federal funding are required to provide gluten-free meal alternatives.
- Communicate with teachers about upcoming celebrations so that you can



FOR PLAY DATES AND SLEEPOVERS, GIVE YOUR CHILD GLUTEN-FREE SNACKS TO TAKE ALONG IN CASE GLUTEN-FREE OPTIONS ARE NOT AVAILABLE.

send in something similar but gluten-free for your child to enjoy.

- To help with impromptu food sharing, provide a few nonperishable gluten-free treats that can be kept in your child's classroom.
- For play dates and sleepovers, give your child gluten-free snacks to take along in case gluten-free options are not available.

Additionally, there needs to be a plan at home. "When one child in the household has celiac disease, families have to decide if everything is going to be gluten-free in the house for everyone, or if they are going to offer gluten-free things only to the person who has celiac disease," Dr. Agrawal says.

At a restaurant or friend's house, kids should self-advocate and politely inform waitstaff or caregivers that they can't eat gluten. They should also learn how to read labels, as there are different levels of "gluten-free"—from items that simply contain no wheat to certified gluten-free products. "When things are certified gluten-free, they've been tested by a lab to say they have less than 20 parts per million of gluten, which is the definition of being gluten-free," Dr. Agrawal says.

HOLIDAY HAZARDS

The holidays can be especially challenging for kids with celiac disease. "The majority of our holidays are food-based," Dr. Agrawal says. "Relatives often make their favorite dishes, and a lot of those can have gluten.

If you're going to a party, let others know your child has celiac disease and what that means. A lot of family members want to be supportive."

Parents also can create their own gluten-free fare. Cooking together is a great way to teach kids about diet-friendly dishes and potential hazards, and encourages them to be more adventurous with their food choices.

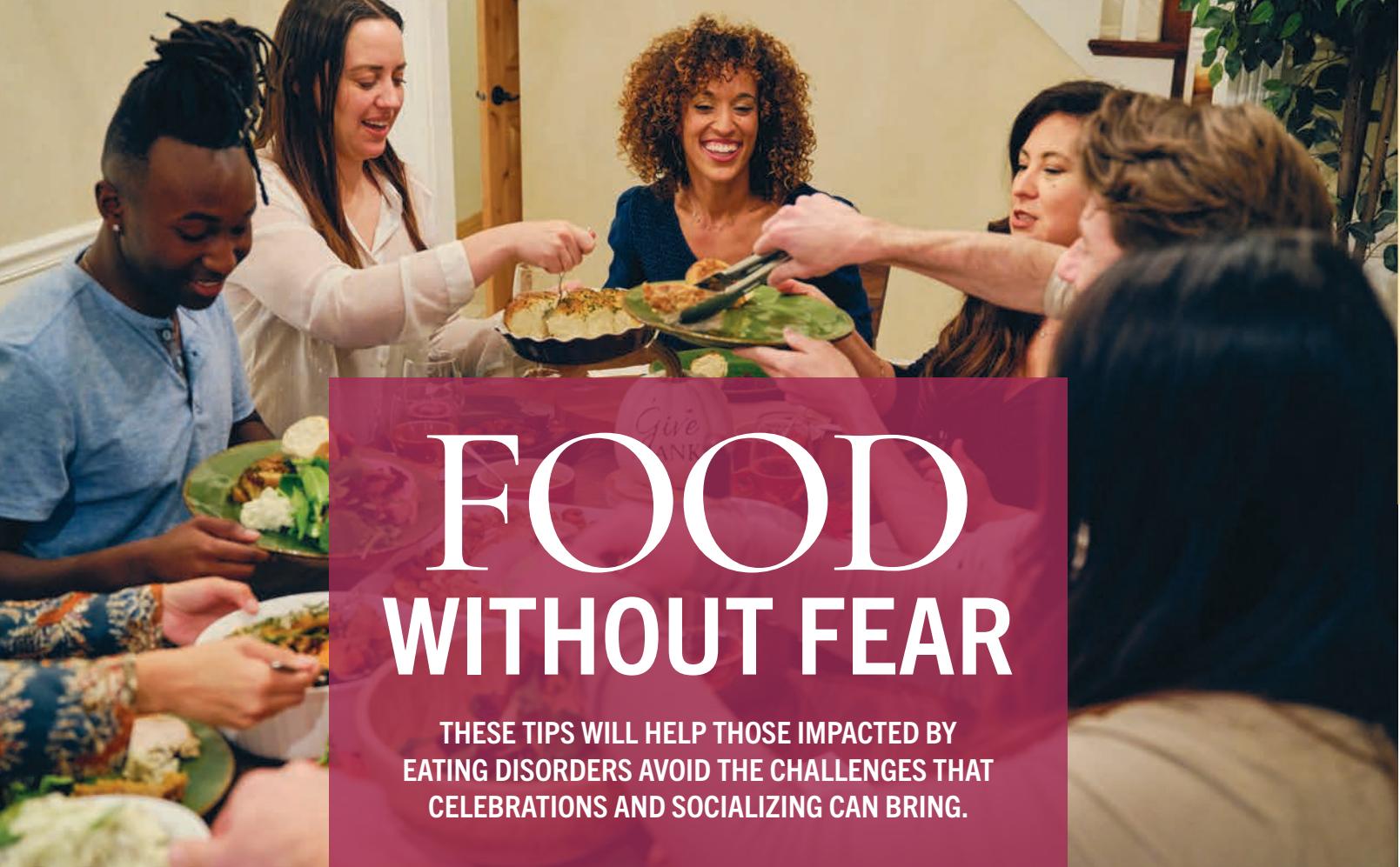
When it comes to shared dishes and buffets, whether at home or in a restaurant, watch out for cross-contamination. Using the same serving spoon for gluten and non-gluten food can pose a problem. To mitigate this risk, when possible, people with celiac disease should try to be the first ones getting food from the communal dishes before the food becomes cross-contaminated.

Holiday sweets pose another challenge as not all candy is gluten-free. Dr. Agrawal recommends consulting online resources, such as the Celiac Disease Foundation, to identify gluten-free products and using apps to scan barcodes to tell whether a product contains gluten.

With no current cure for celiac disease and a restrictive diet the only recommendation, work is underway to find alternate treatments. "From enzymes that might reduce the risk of contamination to injections and infusions that might be able to modulate the immune system, there's definitely a bright future," Dr. Agrawal says.

To learn more about the Pediatric Celiac Disease Center, visit www.rwjbh.org/childrenshealth.





FOOD WITHOUT FEAR

THESE TIPS WILL HELP THOSE IMPACTED BY EATING DISORDERS AVOID THE CHALLENGES THAT CELEBRATIONS AND SOCIALIZING CAN BRING.

Social gatherings are supposed to be a fun time shared between friends and family. But the combination of bountiful buffets, triggering social media, and stress to impress can create challenges for those vulnerable to disordered eating patterns.

"An eating disorder can negatively impact every body system and cause lifelong consequences, so early detection makes a significant difference in positive outcomes," says Christine DeSouza, MS, RD, CEDS-C, nutrition coordinator for the Eating Disorders Program at Robert Wood Johnson University Hospital (RWJUH) Somerset. "Loved ones are in the best position to notice changes that could indicate an eating disorder, as they know their family and friends the best."

When an evaluation is needed, RWJUH Somerset's Eating Disorders Program can help. Part of RWJBarnabas Health's Behavioral Health Services together with Rutgers Health University Behavioral Health Care, the program offers the full spectrum of inpatient

and outpatient care, and provides comprehensive, holistic treatment for adults and teens ages 14 and older in a newly renovated space designed to facilitate healing.

NAVIGATING THE NOISE

Whether you know someone who might be facing an eating disorder or struggle with the pressures yourself, these tips can help manage triggers during celebrations.

Social Media

An endless feed of recipes, cooking demonstrations, and appearance-focused content can precipitate negative thoughts. "Posts that label a dessert as a 'better' or 'healthier' version can sometimes feel triggering, because they suggest that the original is less acceptable," DeSouza says. "This puts unnecessary judgment on food. Instead, we should aim to view all foods as neutral."

The good news is that you have some control over your social media. If you don't want to continue to see certain

posts, avoid clicking on them or hide those accounts. You also can log off from social media or simply turn off your phone altogether.

Parties and Dinners

Coworkers, friends, family, or servers may offer you food that you don't want at celebrations. Instead of feeling pressured to take it, simply say, "No, thanks, I just ate," or "I'm saving room for something else." Family members might make well-intentioned yet unwanted comments that seem judgmental, but don't engage them. At sit-down meals that make you uncomfortable, excuse yourself to go outside and get some air. You can also use the time to call a friend for support.

Additional strategies to help you get through social situations include:

- Inviting close family and friends to a trial meal to mentally prepare for a dinner
- Rehearsing specific responses to unwanted comments
- Role-playing with a therapist or dietitian to handle difficult situations

CONVERSATION STARTERS

Broaching the subject of an eating disorder can be delicate. If an issue is suspected, a caring, nonjudgmental approach can maintain trust and facilitate conversation. It's helpful to start with the bigger picture and then zoom in. Try these tips for initiating conversation:

- Gain a better sense of the person's mental health. (How's school or work going? How are things with your friends or family?)
- Ask about the person's physical health and eating habits. (Have you been feeling OK? How have meals been?) If they express difficulty, ask if there is anything you can do to make mealtimes easier.
- Thank the person for sharing and express that you can be a trusted resource for help.
- If you are a parent, make an appointment with your child's health-care provider to identify any issues and determine next steps.

Disrupted Routines

Attending events can throw off routines and proper nutrition. Don't skip meals or cut back earlier in the day in anticipation of a big dinner. Instead, try to maintain a regular eating pattern throughout your day.

Food-Focused Socializing

Even when it comes to celebrations that aren't typically centered around food, social events often involve snacks. To minimize your temptation, try standing or sitting away from serving areas. You also can plan activities that don't leave much time for snacking, such as sporty outings or a game night. DeSouza urges people to remember the purpose of the get-together is to spend time with family and friends—not focus on food.

A CIRCLE OF SUPPORT

Having a strong support system is essential when dealing with an eating disorder. Here are some ways to provide aid to those in need:

Make Home a Haven

Home should be a safe place where calm family meals are prioritized. Avoid negative self-talk, comments about dieting, or appearance-focused remarks, as these can unintentionally reinforce harmful ideas. For individuals already more vulnerable, added stress can make it harder to cope. A supportive home environment can make all the difference.

When to Say Something

Because everyone has their own patterns, it's best to look for changes in a person's

general demeanor compared with a couple of months ago. (See the sidebar "Top 10 Signs to Watch For.") "If a person is making negative changes in their life that are not indicative of their normal self, you might want to think about talking to them," DeSouza says.

To open the lines of communication, approach the person in a caring, nonjudgmental way. Instead of focusing on food, weight, or appearance, ask questions about their general well-being. (For specific ideas, see the sidebar "Conversation Starters.") "Just letting the person know you're there for them can go a long way," she adds. "Respect their pace and comfort level—they'll share when they feel ready."

Seeking Outside Help

The Eating Disorders Program at RWJUH Somerset offers a multidisciplinary team of psychiatrists, nurses, dietitians, and therapists who work collaboratively to monitor nutritional rehabilitation. They partner with families and provide education on everything from meal planning and coping skills to identifying triggers and more.

Located on the hospital's Somerville campus, inpatient services include access to additional medical disciplines such as gastroenterology, endocrinology, and family medicine. If a different level of care is needed, partial hospitalization

TOP 10 SIGNS TO WATCH FOR

"Eating disorders can affect anyone, regardless of body size, shape, appearance, gender, or race—you can't determine who is struggling based on looks alone," says Christine DeSouza, MS, RD, CEDS-C, nutrition coordinator for Robert Wood Johnson University Hospital Somerset's Eating Disorders Program. While it's not always apparent, picking up on changes in normal lifestyle patterns can help address potential issues before they become a problem.

Here are 10 signs to look for:

1. Mood swings, irritability, or anxiety
2. Ongoing complaints of stomachaches, nausea, or dizziness
3. Changes in clothing style or wearing baggy clothing
4. Skipping meals, calorie counting, or excessive exercise
5. Frequently bringing home uneaten food from packed school lunches
6. Regularly using the bathroom after meals
7. Shifting perspectives around food, such as eliminating entire food groups, or making sudden or extreme dietary changes
8. Negative body comments or self-deprecating statements
9. Frequent mirror checking
10. Weight fluctuations (although this is not a reliable indicator)

and intensive outpatient care also are available. During an initial evaluation, the team decides the appropriate level of care or whether the patient should see an individual local provider.

"If you notice that someone is struggling or is not acting like themselves, and you're concerned for their health or safety, we're here," DeSouza says.

For more information about the Eating Disorders Program, call 800.300.0628 or visit www.rwjbh.org/eatingdisorders.





NOURISHING NEIGHBORHOODS

NEW INITIATIVES EXPAND ACCESS TO HEALTHY FOOD AND IMPROVE COMMUNITY WELLBEING.

The term “food insecurity” may bring to mind hunger or not knowing where someone’s next meal will come from. “But the concern is not just about having food,” says Balpreet Grewal-Virk, PhD, Senior Vice President, Community Health, RWJBarnabas Health (RWJBH). “It’s also about the impact of foods people eat and issues such as affordability and access.”

Such issues are known as social determinants of health—nonmedical factors that directly affect health outcomes and overall wellness. “RWJBarnabas Health has always had a critically important clinical focus, but more than ever, we’re also invested in social determinants of health,” Grewal-Virk says.

One recent investment is the Sadie Vickers CommUnity Garden in Toms River, an initiative of Community Medical Center (CMC) in partnership with the Sadie Vickers Community Resource Center (SVCR), which connects people to supporting programs that

meet individual needs. There are plans to add a hydroponic greenhouse, further expanding access to nutritious food along with comprehensive wellness education.

“These projects are part of a larger, significant initiative that offers programs throughout our health system,” Grewal-Virk says. “We’re trying to make access to healthy food as convenient and affordable as possible.”

OFFERING HEALTHY OPTIONS

Almost 1 million people in New Jersey face hunger daily due to food insecurity. What’s more, over a quarter of neighborhoods are identified as food deserts or food swamps. These are areas where fast foods and processed foods are easier to find and are often cheaper to buy than healthier options such as fresh fruits and vegetables. Lack of affordable access to healthy food is associated with higher risks of chronic conditions such as diabetes, obesity, heart disease, and mental health disorders.

“As health-care providers, we are committed to helping our communities not only manage or treat disease, but help to prevent it as well,” says Barbara Mintz, Senior Vice President, Social Impact and Community Investment, RWJBH. “We want our communities to be healthy and thriving. A healthy food system is linked to healthier communities. Our programs addresses this by increasing access to healthy farm food and nutrition education, bringing those components together.”

The Sadie Vickers CommUnity Garden opened in summer 2024 and provides 100 earth boxes—raised beds that each yield about 30 pounds of fresh produce. Volunteers from CMC and SVCR worked together to prepare the boxes. The garden’s produce is distributed through farmers markets, food pantry programs, and community partner organizations.

“Through this project, we not only help provide the community with locally

Top: Sadie Vickers CommUnity Garden in Toms River. **Bottom:** RWJBarnabas Health leadership, along with state and local elected officials and key stakeholders, gathered to announce the plans for Harvest: An RWJBH Farm-to-Community Center.



Right: RWJBarnabas Health employees volunteered their time to help plant the earth boxes at the Sadie Vickers CommUnity Garden. **Bottom:** This rendering depicts the demo kitchen at Harvest: An RWJBH Farm-to-Community Center.

grown fresh food but educate community members on the importance of healthy nutrition and wellness,” Mintz says. “Education is an important component when people are accustomed to relatively unhealthy food being more accessible.”

Plans for a greenhouse to accompany the Sadie Vickers garden are modeled on a similar program at Newark Beth Israel Medical Center (NBIMC), where fresh food grown at the hydroponic Beth Greenhouse is donated or sold through the Beth Farmers Market in conjunction with education programs.

SYSTEMWIDE SUPPORT

The gardens are among numerous RWJBH programs across New Jersey that expand access to nutritious food. One of the most recent initiatives is Harvest: An RWJBH Farm-to-Community Center in Newark.

The Harvest facility provides a centralized hub for storing, packaging, and distributing farm-to-table food from New Jersey growers. Residents gain access to the program’s fresh fruits, vegetables, eggs, meat, and more through community partners such as federally qualified health centers, schools, and food pantries.

Harvest concentrates a variety of innovative, holistic services under one roof. In dedicated consultation and wellness offices, registered dietitians educate community members on healthy eating and meal preparation. Supplemental Nutrition Assistance Program (SNAP) Navigators and Community Health Workers also offer



support for new mothers and families, and help coordinate access to food and health-related services.

A fully equipped demonstration kitchen at Harvest provides a space for nutrition and cooking education. A separate commercial kitchen is available to local chefs, caterers, food entrepreneurs, culinary students, and local organizations to enhance their operations, support their businesses, and receive training.

RWJBH hopes to replicate the Harvest model elsewhere in the state, building on existing initiatives. Examples of programs already in place include four food “farmacies”—one each in New Brunswick and Jersey City and two in Newark—where registered dietitians counsel patients one-on-one, providing tailored recommendations for food choices available on-site.

“Food is medicine, and these local food

hubs help manage and prevent diseases and comorbidities,” Mintz says.

RWJBH also has SNAP Navigators available at all of its hospitals to guide low-income families through the application process for and enrollment in the federal food-assistance program and connect them with local food resources.

Other statewide initiatives include nutrition education available for children and families through KidsFit, which cultivates healthy lifestyles and behaviors through offerings such as a cooking class called Hannah’s Kitchen. In addition, RWJBH recently expanded a partnership with Share My Meals, a food recovery program now operating at all of the health system’s hospitals to redistribute surplus food from cafeterias to local families experiencing food insecurity. “Share My Meals not only feeds people and reduces waste but also reduces our carbon footprint,” Mintz says.

By strengthening local food systems, RWJBH and its community partners seek not just to improve food security and equal access to food. “With this focus, we’ll help improve the physical and economic health of individuals and communities,” Grewal-Virk says.



To learn more about healthy food initiatives at RWJBarnabas Health, visit www.rwjbh.org.

A NEW ERA IN NURSING

RWJBARNABAS HEALTH SCHOOL OF NURSING EXPANDS WITH A NEW LOCATION IN OCEANPORT.

Nurses are the backbone of patient care, the essential link between patients, physicians, and families. They combine clinical expertise with compassion, translating complex medical information into meaningful guidance and reassurance. As the eyes and ears of the health-care team, nurses assess, advocate, and communicate to ensure that every patient receives safe, coordinated, and holistic care.

Yet today, the nursing profession faces significant challenges. Across the nation and here in New Jersey, a shortage of nurses continues to grow, driven by factors such as an aging workforce, rising health-care demands, occupational fatigue, and a shortage of qualified nursing faculty. According to the New Jersey Collaborating Center for Nursing, the state is projected to face a shortfall of more than 24,000 nurses within the next decade.

To meet this challenge head-on, RWJBarnabas Health (RWJBH) is expanding its investment in the future of nursing through the RWJBarnabas Health School of Nursing. Building on its strong foundation in Elizabeth on the campus of UCNJ Union College of Union County, NJ, the school has opened a second location at Fort Monmouth's Squire Hall in Oceanport, where the first class of 53 students began its journey this past fall.

The 40,000-square-foot, state-of-the-art space, which also houses The Institute for Nursing Excellence, features advanced simulation technology, experienced faculty, and immersive hands-on training opportunities. A dedicated Student

Resource Center further supports academic success and professional growth.

HELPING NURSES THRIVE

Nurses are at the core of New Jersey's largest and most comprehensive health system, which now cares for more than 5 million people each year. "Let me be clear, without our 11,000 nurses, there would be no RWJBarnabas Health," says Mark E. Manigan, President and Chief Executive Officer, RWJBH.

RWJBH's commitment to nursing extends far beyond the classroom.

Since its founding in 1891 as the Elizabeth General Training School, the RWJBarnabas Health School of Nursing, formerly Trinitas School of Nursing, has upheld a legacy of excellence. It is New Jersey's longest-operating nursing school and among the oldest in the nation.

"Our investment in nursing merely starts with the School of Nursing, but it does not end there," Manigan says. "Through The Institute for Nursing Excellence and The Center for Professional Development, Innovation and Research (CPDIR), RWJBH provides nurses with support and training, as



Some of the inaugural RN Track students at the RWJBarnabas School of Nursing's Oceanport location along with Mark E. Manigan, President and Chief Executive Officer of RWJBarnabas Health (RWJBH), and Mary Beth Russell, PhD, RN, Executive Dean of the RWJBarnabas Health School of Nursing and Senior Vice President, The Center for Professional Development, Innovation and Research, The Institute for Nursing Excellence at RWJBH



Leaders from RWJBarnabas Health and UCNJ Union College of Union County, NJ, along with state and local elected officials, celebrate the opening of the RWJBarnabas Health School of Nursing in Oceanport.

well as opportunities for growth throughout their careers."

The RWJBarnabas Health School of Nursing—as it was officially renamed in March—will continue to offer programs at its Elizabeth location, maintaining its valued partnership with UCNJ. "We appreciate the incredible partnership and collaboration with UCNJ's administration and leaders who were instrumental in making this possible," says Nancy Holecek, MAS, MHA, BSN, RN, FNAP, Executive Vice President and Chief Nursing Officer, RWJBH. "Our collective vision for providing students with a learning environment conducive to developing the knowledge, skills, and attitudes required to become competent, professional nurses will continue to be reflected in our nursing school philosophy."

RWJBH is excited to be a part of investing in the future of nursing. "These students will learn more than they ever imagined, grow into competent and confident professionals, and make a difference that will ripple far beyond those walls," adds Mary Beth Russell, PhD, RN, Executive Dean of the

RWJBarnabas Health School of Nursing and Senior Vice President, CPDIR, The Institute for Nursing Excellence at RWJBH.

AVAILABLE PROGRAMS

The RWJBarnabas Health School of Nursing offers Generic Registered Nurse (RN) and Cooperative Nursing programs at both its Elizabeth and Oceanport locations. The Cooperative Nursing program awards a diploma in nursing from the RWJBarnabas Health School of Nursing and an Associate of Science degree from UCNJ. Licensed practical nurses (LPNs) who want to

COOPERATIVE PROGRAM FEATURES

The RWJBarnabas Health School of Nursing's Cooperative Nursing program is available at its two locations—Elizabeth and Oceanport. The program offers:

- Financial aid and scholarships
- Student support and tutorial services
- An administrative student liaison
- Academic and personal counseling
- Computer labs and learning and a simulation center
- Clinical hours at RWJBarnabas Health (RWJBH) facilities
- Postgraduate employment opportunities with RWJBH
- The opportunity to pursue credits toward a Bachelor of Science in Nursing degree

advance their careers can register for the LPN to RN program in Elizabeth.

Those who successfully complete their education at the RWJBarnabas Health School of Nursing earn a total of 65 credits and upon graduation become eligible to sit for the National Council Licensing Examination for Registered Nurse Licensure.

PROSPECTIVE STUDENTS

	APPLICATION SUBMISSION	DECISION NOTIFICATION FROM RWJBH SCHOOL OF NURSING	APPLICANT ACCEPTANCE DECISION BY
GENERIC RN FALL 2026 SEMESTER	MAY 1-JUNE 30	JULY 15	JULY 19
LPN TO RN FALL 2026 SEMESTER	MAY 1-JUNE 30	JULY 10	JULY 14

To learn more about the RWJBarnabas Health School of Nursing, visit www.rwjbh.org/nursingschool.





FIGHT FLU

FOLLOW THIS SIMPLE CHECKLIST TO HELP YOU STAY HEALTHIER WHEN INFLUENZA SPREADS.

Influenza isn't strictly seasonal: Flu viruses can infect people year-round. "But when weather turns colder, we tend to see more respiratory illness—both because we spend more time indoors with other people and because cold air helps flu viruses spread faster," says Jennifer Turkish, MD, a primary care provider with Primary & Specialty Care at Old Bridge and a member of RWJBarnabas Health Medical Group.

Dr. Turkish says you can counter flu's seasonal edge by preventing infection, reducing symptoms, or vanquishing the virus with steps like these:

GET VACCINATED

If you didn't already receive your annual flu vaccine, it's not too late for

an inoculation that can prevent infection or shorten the duration of your illness if you get sick. "Flu typically causes symptoms such as mild fever and

JENNIFER TURKISH, MD

To learn more about primary care or to make an appointment, visit www.rwjbh.org/medgroupprimarycare.

decreased appetite, but for some people, such as children and older adults, an influenza infection can become more severe and may even result in hospitalization," Dr. Turkish says. "Vaccination reduces these risks."

WASH HANDS REGULARLY

Good hand hygiene means washing away germs you can easily pick up from surfaces. "Wash with soap and water before eating or after any activities where hands may have contacted viruses," Dr. Turkish says. Also avoid touching your face—where mucous membranes in the eyes, nose, and mouth are highly susceptible to infection—and cough into your elbow rather than your hand to help avoid spreading viruses you might carry.

PRACTICE HEALTHY HABITS

Eating a well-balanced diet, getting enough restful sleep, and drinking plenty of fluids help the immune system fight off challenges such as viral infections. In addition, keeping physically active is especially important in winter, when remaining indoors

tends to curtail movement. "Even stepping outside for a 10-minute walk can help you



PRIMARY AND SPECIALTY CARE HUB OPENS IN OLD BRIDGE

Residents of Old Bridge and surrounding communities now have access to multispecialty services at RWJBarnabas Health Primary & Specialty Care at Old Bridge. The 72,000-square-foot, three-story building offers access to a variety of specialties affiliated with RWJBarnabas Health Medical Group, Rutgers Health, and Family First Urgent Care. Specialties include:

- Heart and vascular
- GI/digestive health
- General surgery
- Endocrinology
- Primary care
- Urgent care

Specialty services in neurology, neurosurgery, rheumatology, thoracic surgery, and sports medicine will be available soon. Additional services also will be available in the near future from JAG Physical Therapy, the Matthew J. Morahan III Health Assessment Center for Athletes, LabCorp, and New Jersey Imaging Center, along with oncology/hematology and infusion services with Rutgers Cancer Institute, New Jersey's only NCI-designated Comprehensive Cancer Center.

stay active while also exposing you to fresh air and sunlight, which can further bolster the immune system," Dr. Turkish says.

SEEK TREATMENT

Mild flu symptoms might resolve on their own with rest, hydration, and over-the-counter remedies such as acetaminophen or nonsteroidal anti-inflammatory medications; cough and congestion relievers; and warm liquids such as soup and tea. But if symptoms like fever, lack of appetite, or body aches don't respond to home treatment, or get worse, consult your primary care physician. Your doctor may prescribe antiviral medication that can help control the infection, especially when administered within 48 hours of the onset of your symptoms.

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Two of our hospitals, Robert Wood Johnson University Hospital and Cooperman Barnabas Medical Center, have earned recognition as Best Regional Hospitals, ranking in the top 10 in New Jersey, and in the top 25 in the competitive Mid-Atlantic Region. Our hospitals throughout New Jersey have been recognized for quality in a variety of specialties: cardiac and cancer care, neurology and orthopedic surgery, and more. [Learn more at rwjbh.org/usnews](http://rwjbh.org/usnews).

