A MESSAGE FROM LEADERSHIP

New Ways to Care

At RWJBarnabas Health, in addition to treating medical conditions, we actively engage on a variety of levels to promote the health and well-being of our communities.

That outreach takes many shapes, including healthy living classes, educational programs for seniors, partnerships with local arts organizations, providing healthy food and much more.

Social distancing and other pandemic-related restrictions haven’t stopped these efforts, only changed their form. We’re providing virtual support for all kinds of needs, including breastfeeding, perinatal mood and anxiety disorders, arthritis, addiction recovery and more. People who want to learn about wellness techniques, such as guided relaxation or chair yoga, can find what they need through our online programs. For a full list, visit www.rwjbh.org/events.

Meanwhile, we are creatively retooling signature events such as runs, walks and galas to include virtual participation. Our annual Running with the Devils 5K will be going virtual as well (learn more at www.rwjbh.org/runningwiththdevils). Our partners are also creating new events, such as the Somerset Patriots, who hosted sold-out drive-in movies at TD Bank Ballpark with proceeds going to the RWJBarnabas Health Emergency Response Fund to help local healthcare workers.

To make a donation to the fund, visit www.rwjbh.org/give.

Since the beginning of the coronavirus surge, RWJUH Rahway has been helping our local food pantry with donations of healthy food, protective equipment and cleaning supplies. We have helped make important connections with Frontline Appreciation Groups and community organizations that help those in need.

We have transformed nearly all of our support groups to virtual support and are creating educational videos that our communities can use to help manage chronic conditions.

How we meet the needs of our diverse communities will continue to evolve, but our commitment to providing a broad range of culturally competent care for our communities hasn’t changed—and never will.

Yours in good health,

BARRY H. OSTROWSKY
PRESIDENT & CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

KIRK C. TICE
PRESIDENT & CHIEF EXECUTIVE OFFICER
ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL RAHWAY

HEALTH NEWS

SAVED BY A CONGREGATION

“I blacked out. The next thing I knew, I was looking up at the ceiling and someone was saying, ‘Do you know where you are?’” remembers Curt Kamichoff, 63 (at center in photo above).

Midway through Christmas Eve Mass at Saint Agnes Church in Clark, Curt had suddenly slumped over in his pew. Seeing him, Jolanta Kibilska-Borowski, MD, an internist at Robert Wood Johnson University Hospital (RWJUH) Rahway, who was at Mass with her husband, Walter Borowski, MD, also an internist at RWJUH Rahway (both pictured above), rushed to help.

With a nurse and others, they wrestled Curt—who at that point did not have a pulse—into a prone position. Dr. Walter Borowski began mouth-to-mouth and Dr. Jolanta Kibilska-Borowski ripped Curt’s shirt open for chest compressions.

Curt began to have seizures. Someone called 911.

Suddenly, another churchgoer, an EMT, appeared with an Ambu bag, providing pressure to force air into Curt’s lungs. Yet another parishioner located the church’s AED (automated external defibrillator) and delivered electrical shocks to restart his heart.

“That’s when they asked Curt if he knew where he was. “Yes,” replied Curt. “Saint Agnes.” The entire congregation cheered.

Curt was cared for that night at the RWJUH Rahway Emergency Department, and two days later he had a triple bypass. Today, he is 45 pounds lighter and has embraced a much more active lifestyle. “God was looking out for me by having all of those trained people in the church,” he says.

To learn how to administer cardiopulmonary resuscitation at RWJUH Rahway, call 732.729.7159 or visit www.rwjbh.org/cpr.

Robert Wood Johnson University Hospital Rahway

865 Stone Street, Rahway, NJ 07065
732.499.6118 | www.rwjbh.org/rahway

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Robert Wood Johnson University Hospital Rahway

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11. ‘THE SKY’S THE LIMIT.’ Intense physical therapy helps a teenager move again after a traumatic neck injury.

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18. KILLER (AND KINDER) SHOES. A podiatrist explains how to keep your feet happy and stylish.

20. NEW LUNGS, NEW LIFE. A double lung transplant and pulmonary rehabilitation allow a Roselle man to regain his independence.

22. MASTERING NEUROPATHY PAIN. Come in for safe and effective treatment.

23. ROBOTIC-ASSISTED SURGERY. A new technology for better outcomes.
WHAT YOU CAN LEARN FROM POPULAR DIETS

People on the paleo diet are eating lots of proteins, vegetables and fruits, and avoiding grains, dairy and beans.

People who follow a ketogenic (keto) diet consume a lot of fat, a small amount of protein and a very small amount of carbohydrates.

Similarly, the Mediterranean diet, the DASH diet, flexitarian diet and other popular regimens all have their specific must-dos and taboos.

But, varied as they are, all the eating programs have one major thing in common, according to Lauren Bernstein, MS, RD, CDE, at Robert Wood Johnson University Hospital (RWJUH) Rahway: “You’ve got to get the processed foods out of your diet and start eating more real food,” she says.

WHAT’S PROCESSED?
“Processed” food, as the name indicates, means that a food has been changed in some way—cooked, canned, frozen, packaged, fortified, preserved—on the way to your table.

Some foods are minimally processed (think frozen vegetables or roasted nuts), while others are processed with a long list of added sugars, sodium, dyes, gums, stabilizers and so on.

“If you can’t pronounce or recognize the ingredients on the label, the food is ultra-processed,” Bernstein says. “This category includes things like chips, instant noodles, breakfast cereals, chicken nuggets and ready-to-eat microwaveable foods. They’re designed for tastiness and a long shelf life, but not for a healthy diet.

“That’s why all the popular diet plans, as well as recommendations for people with health conditions such as high blood pressure and diabetes, involve cutting out or strictly limiting highly processed foods,” she says.

“Even on WW [formerly Weight Watchers], the ‘zero point’ foods—the ones you can eat your fill of, including beans, fish, eggs, fresh vegetables and fruit—don’t have zero calories. They’re just healthy, unprocessed foods.”

KEEP IT SIMPLE
While eating mostly unprocessed foods is a straightforward guideline, it may not seem easy to follow at first. “Healthy eating takes effort,” Bernstein says. “You have to cook, and you have to plan.”

Menus should include mostly fresh fruits and vegetables, unprocessed meats, nuts, beans, healthy fats like hummus and avocado and low-fat dairy products, with limited sugar, preservatives and white flour.

“I see clients every day, working parents who are so busy with kids and their activities—they’re not making food an important thing in their lives,” Bernstein says. “They’re looking for heat-and-eat foods and takeout. But then they end up 50 pounds overweight, with prediabetes or high cholesterol, and their doctor tells them they have to change the way they eat.”

STEP BY STEP
Creating new habits is the key. “Do some prep work on the weekends; use a slow cooker that cooks your dinner all day while you’re at work,” Bernstein advises.

Also, meals don’t need to be complicated. “Sauté chicken cutlets and bake a sweet potato,” she says. “Stir-fry some shrimp and vegetables and throw it over brown rice. It doesn’t have to be gourmet; the important thing is that you prepare it yourself.”

Don’t feel you need to eliminate all processed foods in one go. “This is a journey—a marathon, not a sprint,” Bernstein says. “Start with small goals. For breakfast, stop going to the doughnut shop and make eggs with a piece of whole wheat toast at home. Pack yourself lunch in the morning. Getting up just a bit earlier to have time to do these things can make all the difference.”

Finally, know that big payoffs are in store when you cut back on processed foods. “The most immediate effect is that you’ll find you have more energy,” Bernstein says. “And when you go to the doctor for a checkup, you’ll see positive changes in your cholesterol, blood pressure and blood sugar levels. Making these changes will give you a clean bill of health—and make you feel good about yourself.”

If you have diabetes or prediabetes and need help with blood sugar control, call the RWJUH Rahway Diabetes Center at 732.499.6109.
**SHRIMP AND POLENTA**

**INGREDIENTS:**
- Frozen shrimp, defrosted
- Cherry tomatoes
- Fresh spinach
- Polenta
- Balsamic vinegar

**DIRECTIONS:**
- Sauté shrimp in a bit of olive oil until pink and opaque. Remove shrimp from pan.
- Add a handful of cherry tomatoes to pan and cook until they start to burst. Throw one or two handfuls of fresh spinach into pan and cook until wilted.
- Return shrimp to pan and toss until hot. Serve shrimp mixture over polenta with a drizzle of balsamic vinegar.

**SUBSTITUTIONS:**
Instead of polenta, serve shrimp-vegetable mixture over cooked brown rice or pasta. For a vegetarian version, skip the shrimp and stir in cannellini beans.

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**CREAMY WHITE BEANS WITH GREENS**

**INGREDIENTS:**
- Bag of dried white beans
- ½ cup extra virgin olive oil
- Chopped fresh sage
- Garlic greens
- Salt and pepper to taste

**DIRECTIONS:**
- In the morning, empty the bag of dried white beans into a slow cooker and cover generously with water. Cook on low so they are soft by the evening.
- Drain the water and add chopped fresh sage and the olive oil, salt and pepper.
- Stir all ingredients together until they are creamy. Serve with sautéed garlic greens.

**SUBSTITUTIONS:**
Instead of sage, use fresh herbs such as rosemary, parsley or thyme. Add chopped vegetables such as carrots or celery to the slow cooker for extra nutrients and flavor.

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**HEALTHY CHOCOLATE “PUDDING”**

**INGREDIENTS:**
- Ripe banana
- ½ to 1 tablespoon unsweetened cocoa powder
- 1 tablespoon raisins
- ½ tablespoon natural peanut butter

**DIRECTIONS:**
- Cut banana in pieces and microwave for 20 to 30 seconds.
- Add cocoa powder to taste. Add raisins and natural peanut butter.
- Mix and mash together until you achieve pudding consistency.

**SUBSTITUTIONS:**
Swap raisins for another dried fruit, such as tart cherries, blueberries or chopped apricots. For crunchy texture, top with unsalted nuts, granola or whole-grain cereal.

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**QUICK AND CLEAN COOKING**

In addition to being nutritious, meals made from unprocessed foods can be delicious—and fast. “Unprocessed foods are readily available and can fit any budget,” says Diane Weeks, RD, who provides healthy cooking education at RWJUH Rahway. “Preparing more meals with unprocessed foods will keep you and your family healthy without the need for a rigid diet.” Keep some basics in your pantry, refrigerator and freezer so you can put together a healthy meal without a lot of prep work.

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**ALL THREE RECIPES FROM FOOD & NUTRITION MAGAZINE. USED WITH PERMISSION.**
At a compact 5’7” and 227 pounds, Julio Sabater wasn’t an obvious candidate for weight loss surgery. “To look at me, you wouldn’t have thought I was obese,” says the 62-year-old founder, president and chief executive officer of a workforce development service in Elizabeth. When Julio met with Anish Nihalani, MD, Medical Director at the Surgical Weight Loss Program at Robert Wood Johnson University Hospital (RWJUH) Rahway, in December 2018, “Dr. Nihalani looked at me and said, ‘Why are you here?’” Julio recalls. “When I told him, he said, ‘Those are good reasons.’”

Though Julio had been overweight for most of his life, his health took a turn for the worse in his mid-50s. He was diagnosed with diabetes, which occurs when the body has difficulty using the hormone insulin. It was part of a constellation of serious metabolism-related disorders that include heart disease and are known collectively as metabolic syndrome. “This was a wake-up call,” Julio says. “Losing weight became urgent.”

LAP BAND LIMITS
In 2010, he decided to undergo a procedure called laparoscopic adjustable gastric banding, or lap band. The minimally invasive procedure places an

BARIATRIC SURGERY REVERSES SERIOUS HEALTH DISORDERS FOR A LOCAL MAN.
inflatable ring across the upper part of the stomach to create a smaller pouch to hold food, leading to a feeling of fullness more quickly.

“I lost 15 or 20 pounds after surgery,” Julio says. But he continued to struggle to control his weight despite doing aerobic exercise, going to the gym and watching his diet. His diabetes remained, and he had high blood pressure, back pain, numbness in his left leg and obstructive sleep apnea, a condition in which fleshy tissue in the throat blocks breathing during slumber.

“I was still messed up and taking about 15 pills a day,” Julio says. Eventually, he had a minor heart attack that led him to receive four stents to keep clogged arteries open.

“I needed to do something further that would have a bigger impact,” Julio decided. That’s when he went to see Dr. Nihalani.

“Laparoscopic banding can be a great operation, but it’s purely restrictive and causes no metabolic changes,” Dr. Nihalani says. “As with many obese people, Julio needed to correct his metabolism as much as his weight.”

METABOLIC BENEFITS
Dr. Nihalani and Julio decided to take a different approach with a procedure called laparoscopic sleeve gastrectomy, also known as gastric sleeve surgery. While minimally invasive, the surgery permanently reduces the size of the stomach by about 70 percent. The process also changes signaling of hormones such as ghrelin, which tells the brain you’re hungry, and GLP-1, which tells the brain you’re full.

“All bariatric surgeries cause you to lose weight, but data show that metabolic surgery allows control of problems related to metabolic syndrome, including diabetes and heart disease,” Dr. Nihalani says. “You don’t have to be extremely heavy to have these metabolic conditions or benefit from metabolic surgery.

“Metabolic surgery is not the last resort,” he continues. It should be one of the first options in treatment of any patient suffering from obesity and diabetes.” For those wishing to learn more, Dr. Nihalani offers individualized counseling either online or in person.

NO MORE PILLS
Julio went through three sessions of monthly preparatory education about how the surgery would affect his eating and require a healthy lifestyle. “I had been engaged with weight loss all my life and already felt well informed, but it had been difficult to succeed,” he says.

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That changed dramatically after he underwent his gastric sleeve surgery in April 2019. “I lost another 40 to 50 pounds,” Julio says. “Guess how many pills I’m taking now: none.”

His diabetes is now under control, and his blood pressure and cholesterol have dropped to healthy levels. “All my numbers are perfect,” Julio says. “Some of my doctors are amazed.” He sleeps better and feels more motivated to be active.

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Results have been so life-changing that Julio has become a proponent of bariatric surgery among friends, relatives and even strangers.

“People say they’re afraid of surgery,” he continues. “But not taking action is not avoiding risk. On the contrary, it means you have a very high risk of premature death, or being old and in really bad shape. That sounds strong, but regretfully, it’s true. Not making a decision is in fact a decision.”

Julio now wishes he’d had gastric sleeve surgery sooner. “There’s a whole improvement cycle you move into where you lose weight, which gives you energy, which gives you more motivation, which makes you more active, which makes you lose more weight,” he says. “It’s the opposite of what happens when you’re obese. It’s been incredible.”

Welcome back! RWJUH Rahway has taken every precaution to make healthcare safe for our patients, employees and visitors. To learn more about weight loss surgery at RWJUH Rahway, call 732.499.6300 or visit www.rwjbh.org/weightloss.
TRUE FRIENDS IN NEED
NEIGHBORING CORPORATIONS STEPPED UP WITH GENEROUS DONATIONS TO RWJUH RAHWAY DURING THE COVID-19 CRISIS.

MERCK: TELEMEDICINE FOR CRITICAL CARE
Merck Foundation donated $50,000 toward the COVID-19 Emergency Response Fund to fund a Critical Care telemedicine program. Patients who need to be hospitalized come in with respiratory issues that require a Critical Care stay and constant supervision from intensivists. RWJUH Rahway was able to immediately purchase the equipment to get the telemedicine program started.

The Merck grant helped facilitate communication among doctors, patients and caregivers.

For more information on the ways our donors are changing lives, please visit www.rwjrahwaygiving.org or call 732.499.6135.

RSI: CRUCIAL EMERGENCY SUPPLIES
When RSI Bank asked how it could best support RWJUH Rahway and its staff during the coronavirus crisis, it learned that a contribution to the hospital's Emergency Response Fund, which is used to purchase emergency care supplies and personal protective equipment, was the best way to help. RSI Bank then donated $10,000 to support the fund, with the gracious message: “Thank you to RWJUH Rahway for providing critical care to our local community.”

PHILLIPS 66 BAYWAY REFINERY: OXYGEN UPGRADE AND DIGITAL STETHOSCOPEs
Phillips 66 Bayway Refinery has donated $50,000 toward an oxygen upgrade project and digital stethoscopes at RWJUH Rahway to aid in the fight against coronavirus. The donation helped RWJUH Rahway defray the costs of oxygen and upgrading the hospital’s oxygen system in response to the COVID-19 pandemic. “The demand for oxygen has been and remains great,” says RWJUH Rahway CEO Kirk Tice. “We are incredibly thankful to Phillips 66 for their help and support.” In previous years, Phillips 66 has helped RWJUH Rahway purchase radios and vests for first responders.

With a single sentence, you can impact the future of health care.

By adding as little as one sentence to your will, you can impact the future of Robert Wood Johnson University Hospital Rahway. Designating the hospital as a partial beneficiary of your estate will help ensure that the next generation has access to extraordinary care, right in their local community.

For simple bequest language or further information, please contact Heather Hays at 732-499-6223 or Heather.Hays@rwjh.org. Information is also available online by visiting rwjrahwaygiving.org.
YOUR HEALTH, AT YOUR FINGERTIPS

Now you can manage your healthcare right from the Apple Health app on your iPhone. You can easily keep track of allergies, conditions, immunizations, vitals and more, and consolidate your health records in a timeline—all in one place. Here’s how:

1. If you don’t have one yet, create a username and password for the RWJBarnabas Health Patient Portal (www.rwjbh.org/patientportalenroll).

2. Download the Apple Health app from the Apple Store. (You’ll need an iPhone running iOS 11.3 or later.)

3. Be sure your iPhone is password-protected, ideally with two-factor authentication.

4. Go to the Health Records section of the Health app, search for RWJBarnabas Health, and log in.

5. After you log in once, your health records will start to appear in the Health app, and will update automatically.

Download the Apple Health app at the Apple Store and access your RWJBarnabas Health medical records at www.rwjbh.org/patientportalenroll.
Patients who seek care through the RWJBarnabas Health (RWJBH) Oncology Access Center have a big advantage: They get connected to an oncology nurse navigator who acts as their problem-solver and supporter before, during and after treatment. The oncology nurse navigator becomes an important member of the patient’s healthcare team and serves as his or her advocate while compassionately supporting their physical, emotional and spiritual needs from diagnosis through survivorship.

“When you choose RWJBarnabas Health for your cancer care, you’re not only getting quality care, but someone to walk beside you on your treatment journey,” explains Jeanne Silva, RN, Director, Nurse Navigation, Oncology Services at RWJBH. “Moreover, we coordinate all of our resources, so that if a patient has a problem—be it financial, social or medical—the navigator can help the patient get the benefit of resources from throughout the health system.”

When a patient makes an appointment with an RWJBH cancer provider, the oncology nurse navigator will follow up with the patient the next day. “The navigator asks if there are any questions about the upcoming appointment and goes through some of the specifics of what will happen,” Silva says.

That’s just the beginning. Oncology nurse navigators, who are located at each RWJBH facility, also do the following:

**Identify possible barriers to treatment.** Does the patient have financial or insurance concerns? Does the patient have family or friends who can provide support? Is there a transportation issue? The nurse navigator can identify and help with these problems right away. “In one case, we were able to get a patient to see a specialist located 70 miles away from the patient’s home,” Silva says.

**Communicate constantly.** This is essential in two ways. First, the nurse navigator is the central clearinghouse for information provided from the many specialists on a cancer patient’s care team—medical oncologists, radiation oncologists, surgical oncologists, social workers, nutritionists and more. The navigator can ensure that no aspects of treatment fall through the cracks and that the patient receives the highest quality of care.

Second, the navigator can follow up to be sure a patient understands what’s happening.

“Doctors do a great job of explaining, but often you can see the patient’s mind drift off as the person starts to worry about things like, ‘Who’s going to pick my kids up from school?’” Silva explains. “A navigator can talk to the patient later about what he or she understood and relay the necessary information over again in smaller bits so it’s easier to process.”

**Set priorities.** “Sometimes what feels urgent to a patient is not clinically urgent, but our nurse navigators have the ability to know what is truly time-sensitive,” Silva explains. “For example, recently a young man needed to see a specialist as soon as possible. Based on the navigator’s intervention, he was able to get in to see the doctor in one day.”

**Save time.** Often, a patient needs several medical procedures—for example, an echocardiogram and a port insertion before chemotherapy treatment can begin. A nurse navigator can arrange for multiple appointments to be scheduled at the same facility on the same day. “A navigator is key to making sure all the pieces fit together and to minimizing the time a patient needs to spend at a facility,” Silva says.

“At oncology nurse navigators is a critical part of a patient’s cancer care team,” she continues. “He or she is the kind of person who can anticipate what’s needed and make it happen—and who has a relentless desire to help patients.”
July 24, 2019: a grayish, unremarkable day on the beach at Ocean Grove. Lifeguard Sam Jarmer, 16, dives into the water to cool down, but hits a hidden sandbar. Soon after, Sam's mom, Jessica, sitting on the beach several blocks away, sees a call from Sam's boss come in on her phone. “I immediately knew not only that he was injured; I could feel that it was bad,” she remembers.

When he hit the sandbar, Sam suffered a burst fracture in the C6 vertebra near the base of the neck and lost the ability to move his arms and legs. A fellow lifeguard jumped in to lift his head above the water, and a trauma team was dispatched from a nearby hospital. Sam was strapped to a backboard, and six of his fellow lifeguards carried him to a waiting ambulance. “He kept saying, ‘I’m so sorry, Mom,’ because we were supposed to go on vacation the next day,” Jessica remembers.

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“He kept saying, ‘I’m so sorry, Mom,’ because we were supposed to go on vacation the next day,” Jessica remembers.

Sam was in surgery for six hours while the burst vertebra was replaced with a titanium cage. He spent the next five days recovering at the hospital. At that point, he could occasionally raise his arms a bit, but nothing more.

It was time for intensive inpatient rehabilitation and therapy at Children’s Specialized Hospital (CSH) in New Brunswick. “I remember feeling that this would be the place that would make it all better,” Jessica says.

MAKING PROGRESS

The first piece of good news came from Michele Fantasia, MD, Director of the Spinal Cord Injury Program at CSH. Her evaluation determined that Sam’s injury was “incomplete,” meaning that Sam still had some motor and sensory function below the level of injury. “As I say with all incomplete injuries, ‘The sky’s the limit,’” Dr. Fantasia told Jessica.

Four months of recreational, physical and occupational therapies followed. “The occupational therapists made modifications for everything,” Jessica remembers. “They kept constructing things in some kind of magical workshop they had.” There was a special fork to help Sam relearn how to feed himself, a device to help him brush his teeth and more.

“Everyone at Children’s really helped me when I was at one of the lowest points in my life with my injury,” says Sam. “They just showed compassion in all of the support and love that they gave me.” On November 19, Sam was discharged from CSH.

Today, Sam continues with a rigorous program of outpatient physical therapy. During the COVID-19 lockdown, he did his exercises via telemedicine for a few weeks. His older brother, home from college, was there to help.

Sam continues to work on his core muscles, arms and fingers. He now has muscle control in all parts of his legs and continues to work on walking independently. “I’m staying positive,” he says. “I know it will take time and I’ll be back to where I was, but for now I’ve just got to keep pushing forward.”

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

### ‘THE SKY’S THE LIMIT’

AFTER A TRAUMATIC NECK INJURY, INTENSE PHYSICAL THERAPY HELPS A TEENAGER MOVE AGAIN.

At Children’s Specialized Hospital, we provide world-class care for children and young adults who face special health challenges across the state of New Jersey and beyond. Our locations in Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Toms River and Warren treat everything from chronic illnesses and complex physical disabilities like brain and spinal cord injuries to developmental and behavioral issues like autism and mental health.
[ANYTOWN] A musical with a mission: “Anytown,” an original educational musical, tells the story of Hope, a high-achieving high school student who becomes addicted to opioids after a soccer injury. The show has toured middle and high schools in New Jersey and was developed through a partnership with George Street Playhouse in New Brunswick, RWJBH and the Horizon Foundation of New Jersey.

[BEAT BUS] They’ve got the beat: Students in Long Branch, Asbury Park and Neptune have experienced a state-of-the-art mobile recording studio to create their own music thanks to the Beat Bus, a collaboration between Lakehouse Music Academy and the Asbury Park Music Foundation that is supported in part by RWJBH. In addition to providing a means of creative expression and new ways to collaborate, the Beat Bus helps prepare students for success in the digital age.
PARTNERSHIPS WITH LOCAL ARTS GROUPS HELP PROMOTE THE WELL-BEING OF COMMUNITIES.

Research has shown that the arts stimulate creativity, ease stress, promote joy, improve memory and enhance education. That’s why RWJBarnabas Health (RWJBH), with its strong commitment to creating and sustaining healthy communities, partners with local arts organizations.

“We understand the clear and beneficial impact that taking part in the arts has on health and well-being,” says Michael Knecht, Senior Vice President of Strategic Marketing and Communications for RWJBH. “These partnerships are an important way for us to help people in our communities and also support local grassroots organizations.”

RWJBH supports a broad range of arts events. Music, dance and film are high on the list: RWJBH has sponsored the Asbury Park Music + Film Festival; the Montclair Jazz Festival; the Central Jersey Jazz Festival; Maplewoodstock Music & Art Festival; the “Sounds of the City” free outdoor concerts presented by the New Jersey Performing Arts Center in Newark; and the SOMA Film Festival in South Orange and Maplewood.

Drama has a place as well. RWJBH is a sponsor of the New Jersey Repertory Company, a professional nonprofit theater in Long Branch with a mission to develop and present new plays. And in a proactive move to help stem the opioid epidemic among young people, RWJBH has partnered with the George Street Playhouse in New Brunswick and the Horizon Foundation of New Jersey to create “Anytown,” a one-hour musical that demonstrates how addiction can happen to anyone. The show has toured to schools throughout the state, followed by Q&A discussions with students.

“These partnerships are all part of the RWJBarnabas Health commitment to reaching out beyond the walls of our medical centers to help people get and stay healthy in all kinds of ways,” says Knecht. “And they’re wonderful examples of how meaningful collaboration with local organizations can make an impact throughout the state.”

To learn more about RWJBarnabas Health corporate partnerships, visit www.rwjbh.org/corporatepartners.

[ASBURY PARK MUSIC + FILM FESTIVAL]
Making (sound) waves: The Asbury Park Music + Film Festival, of which RWJBH is a Founding Partner, celebrates the role of music in film, as well as the shore town’s long history as an incubator of great music. It benefits underserved children in Asbury Park and surrounding areas by providing music education, instruments and social connection opportunities.

Note: All photos on these pages were taken before the COVID-19 pandemic and social distancing guidelines.
A HIGH-TECH LOOK AT THE HEART

DOCTORS CAN NOW USE ARTIFICIAL INTELLIGENCE FOR A NONINVASIVE, HIGHLY ACCURATE TEST FOR CORONARY ARTERY DISEASE.

The Heartflow Analysis FFR-CT software generates a 3D color-coded image of a patient’s heart and arteries, indicating the location and degree of artery blockages.
After the test, they told me I was a walking time bomb," says Ray Duarte, 50.

As the Regional Director of Information Technology at Monmouth Medical Center Southern Campus and at Monmouth Medical Center, Ray had volunteered to be among the first for an advanced noninvasive technology known as Fractional Flow Reserve Computed Tomography (FFR-CT). This test evaluates how well blood flows through a patient’s heart arteries and determines whether—or where—blockages exist.

“I had upper back pain on and off, for which I was seeing a chiropractor with no relief,” says Ray. “I did have high cholesterol, which I was addressing with improved diet and exercise, and a family history of heart disease.

“However, due to my active lifestyle and symptoms that were not typical for heart disease, my primary care doctor told me he would never have recommended so much as a stress test for me,” Ray recalls. But the FFR-CT test showed that Ray’s right coronary artery was 99 percent blocked. Without the test and subsequent treatment, such a blockage could have led to a heart attack at any time.

FINDING THE BLOCKAGES

The powerful, artificial intelligence-based FFR-CT test is used to diagnose coronary artery disease (CAD)—blockages in the blood vessels supplying the heart. CAD is a leading cause of death in the U.S., accounting for 600,000 to 700,000 deaths per year. It can cause shortness of breath, chest pain (typical and atypical) and heart attack, and can lead to death.

When a patient has chest pain or suspicious symptoms, the usual noninvasive ways of detecting inadequate blood flow include an electrocardiogram (ECG), which uses electrical signals; a stress test, in which blood flow is tested while a patient exercises, via ECG or an echocardiogram (ECHO), which uses ultrasound waves; or a nuclear stress test, which uses radioactive dye and an imaging machine. In addition, a computed tomography (CT) scan can show calcium deposits that could narrow arteries.

Prior to FFR-CT technology, however, the only way physicians could see for certain whether coronary arteries were blocked was to do an invasive procedure, known as cardiac catheterization and angiogram. In this procedure, a special dye is injected through a long, thin, flexible tube (catheter) that is threaded through an artery in the leg up to the arteries of the heart.

If a blockage is found, the cardiologist can decide whether to correct it during the angiogram—for example, by inserting a small tube (stent) to keep the artery open—or to send the patient for bypass surgery.

ARTIFICIAL INTELLIGENCE

While a crucial and sometimes lifesaving technology, an angiogram often shows no significant blockages, according to Rajesh Mohan, MD, MBA, FACC, FSCAI, an interventional cardiologist and Chief Medical Officer at Monmouth Medical Center Southern Campus (MMCSC).

That’s where noninvasive FFR-CT comes in. Using “machine learning,” an application of artificial intelligence, the software compares images from existing CT scans of a patient’s heart to an ever-growing database of tens of thousands of other CT images. This large database helps physicians analyze the likelihood that any specific blockage could cause harm and also provides direction about treatment.

“The FFR-CT technology creates a three-dimensional image of blood vessels and color-codes them based on the severity of the blockage,” says Dr. Mohan. “It then also shows how each blockage impacts blood flow to the heart.” Armed with this knowledge, a physician can decide whether lifestyle changes, medication, a stent or surgery is the best course of action.

“With this information, we can give our patients a more definite diagnosis and have confidence in the best treatment plan without putting them through unnecessary invasive procedures,” says Dr. Mohan. “Its accuracy is unlike that of any other noninvasive tests available to us.”

IS FFR-CT FOR YOU?

Since CAD is a common type of heart disease, many patients can benefit from this advanced technology.

However, FFR-CT is not available everywhere. Specialists at MMCSC are among the first in the state to use it, and MMCSC is the earliest hospital in the state to utilize it in the Emergency Department and throughout the hospital, as well as for outpatients.

“The test needs to be done appropriately, according to criteria set by the American College of Cardiology,” says Dr. Mohan. “Patients need to have symptoms—for example, chest pain or shortness of breath on exertion, which a lot of people actually disregard.

“If these exist in association with some of the coronary risk factors like smoking, hypertension, diabetes, high cholesterol and family history, then I think that patient is an ideal candidate for this study.”

As for Ray Duarte, a stent procedure opened his blocked artery, his back pain has resolved and medication is controlling his cholesterol. He is back to an active lifestyle.

Says Dr. Mohan, “We at Monmouth Medical Center Southern Campus are excited and privileged to introduce such a cutting-edge, revolutionary technology.”
At his yearly physical, a patient is found to be 35 pounds over ideal body weight. He has hypertension, and his lab results indicate prediabetes. His doctor urges him to change his diet, be more active and lose the extra weight to reduce his risk for stroke, heart disease and diabetes.

The patient acknowledges that he should. But at his next yearly physical, he’s still 35 pounds overweight.

In that all-too-common scenario lies the possibility for a new approach to healthcare, one that simultaneously provides help for behavioral as well as physical issues. “The goal is to help people make better choices—about things like what they eat, how they exercise and about alcohol and nicotine—and thereby avoid many chronic health disorders,” says Frank A. Ghinassi, PhD, ABBP, Senior Vice President, Behavioral Health and Addiction at RWJBarnabas Health (RWJH), and President and CEO of Rutgers University Behavioral Health Care.

“Through integrated care delivery, we want to treat both body and mind, preferably in the same location and during the same healthcare visit,” he says.

In the case of the overweight patient, for example, the primary care provider will look to determine the cause of the patient’s inability to lose weight. “Is the issue genetic? Does the patient have a low metabolism?” asks Dr. Ghinassi. “Or is there a mood disorder that’s affecting energy level and motivation?”

Once barriers to a healthier lifestyle are identified, doctors and behavioral health specialists can work together to develop solutions tailored to the patient’s specific needs.

AN INTEGRATED APPROACH

“Often, people with behavioral and addiction disorders are treated ‘from the neck up’ and are referred to dedicated behavioral health offices,” says Dr. Ghinassi.

But that approach can create roadblocks. “Maybe the patient can’t get an appointment for three weeks, or he doesn’t like the idea of walking into a building that says ‘counseling services’ or ‘psychiatry’ on the sign,” he explains.

To provide coordinated care, RWJH and Rutgers University Behavioral Health Care are bringing services closer together. “At many of our primary care and pediatric delivery sites, primary care physicians work with psychologists or social workers who are located in the same office suite or in the same building,” says Dr. Ghinassi. “A patient can be offered a chance to meet the physician’s behavioral health colleague even before leaving the initial appointment, find out what might be possible and perhaps find it easier to commit to following up with a subsequent call or visit.”

The next evolution of care at RWJBH and Rutgers University Behavioral Health Care will be to have a clinical social worker or psychologist located right in the same office space as the primary care provider.

Integrated healthcare is the future, Dr. Ghinassi believes. “People tend to come to a healthcare system when they’re in crisis—they need coronary artery surgery, for example, or their depression makes them unable to function in daily life. Of course, we’ll always be there for those people,” he says.

“However, we’re evolving to an equal focus on early screening and intervention. Together, RWJBarnabas Health and Rutgers University Behavioral Health Care are on a mission to improve the health and life satisfaction of patients and families throughout New Jersey.”
What happens with heart valve disease?
The heart has four valves. Each valve has a tissue flap that opens and closes with each heartbeat to keep blood flowing properly through your heart's four chambers and to the rest of the body.

If one or more of the valves doesn’t open fully or lets blood leak back into the heart chambers due to disease, the heart has to work harder and insufficient blood may flow through the body.

What are the different types of valve disease?
There are three basic categories.

Regurgitation, or backflow, of blood into the chambers occurs when a valve doesn’t close tightly.

Atresia is when a blood valve lacks an opening for blood to flow through.

Stenosis, the most common type, occurs when the flaps of a valve thicken, stiffen or fuse together so that the heart valve doesn’t fully open and too little blood flows through the valve.

What causes it?
Heart valve disease can be present at birth (congenital) or develop as a result of cardiac-related conditions such as heart failure, atherosclerosis (buildup of waxy plaque inside the arteries) and damage from a heart attack. Less frequently, an infection or rheumatic fever can lead to heart valve disease.

Risk factors include aging, smoking, high blood pressure, high cholesterol, diabetes, overweight, lack of physical activity and a family history of early heart disease.

What are the symptoms?
During a physical exam, your doctor may hear an unusual heartbeat sound called a heart murmur, which may be a sign to investigate further. Other signs include unusual tiredness, shortness of breath and swelling of the ankles, feet, legs, abdomen and veins in the neck.

How is heart valve disease treated?
Heart valve disease can be treated with medicines, such as blood thinners and drugs to lower cholesterol and blood pressure. Lifestyle changes, such as maintaining a healthy weight, quitting smoking, managing stress and becoming more physically active, are also recommended.

For more serious conditions, heart valves can be repaired or replaced surgically. In recent years, less invasive procedures have been developed that allow smaller incisions, lower risk of infection and a faster recovery time.

For one type of valve disease, aortic stenosis, an innovative treatment known as transcatheter aortic valve replacement (TAVR) has become more widely available. In this procedure, an alternative to traditional open-heart surgery, an artificial valve is threaded through a blood vessel to the heart on the tip of a catheter. When placed, the new valve begins to work immediately. Patients can expect to go home the following day.
still look good—by adjusting shoe styles to accommodate changes that come with age.

“Everyone’s feet change as they get older,” says Dr. Haller. “Arches collapse, tendons get weaker, bones get softer, feet swell and many people develop arthritis. That sounds bad, but it’s normal. It happens in different degrees and different forms depending on how you take care of your feet—including the kind of shoes you wear.”

One of the most important rules is to wear shoes that fit well, not shoes you choose just because they are attractive or low-priced. Here’s what to look for in different parts of the shoe:

**THE HEEL**

“High heels are beautiful,” admits Dr. Haller, “but they’re terrible for your feet.” She explains that, over time, wearing heels can shorten the Achilles tendon on the back of the ankle and lead to **plantar fasciitis**—an inflammation of the band of tissue that runs along the bottom of the foot, from the toes to the heel, and is continuous with the Achilles tendon.

“Not only that,” she adds, “but over time you lose fat from the ball of your foot, which causes increased pressure on the bones in the front of the foot when you’re wearing heels. This causes pain and can potentially lead to **neuromas**—benign but painful nerve tumors—and **stress fractures** in the metatarsals, the bones of the mid-foot, which take all the pressure.”

Wearing flat shoes isn’t the solution, says Dr. Haller, since very flat shoes don’t support the arch and don’t provide much cushioning between the foot and the ground. If you want to wear a flat, choose one with some support,
such as a Mary Jane style or sandal with a strap on the foot as well as a thick sole.

“The optimal heel height is less than an inch,” says Dr. Haller. If you do choose to wear higher heels, even just for special occasions, pass up the stilettos and “choose stacked or chunky heels, which are more supportive and distribute pressure better,” she advises.

THE INSOLE
When possible, Dr. Haller advises, choose shoes that have removable insoles, so an orthotic device can be customized to replace the footbed with one that’s more cushioned or provides more arch support. Extra insole padding, in fact, is good to add to almost any kind of shoe, from heels to flats.

THE TOE
Round is better than pointy. “Pointy shoes can lead to corns—hard patches of skin that occur at pressure points—and calluses, the thickening of the outermost layers of skin, or even crossover toe deformity, in which the second toe overlaps the big toe,” says Dr. Haller. “Shoes with plenty of space for toes can prevent these issues from developing.”

Men can also suffer from a bunion, a bony bump that forms on the joint where the big toe meets the foot, and hammertoes, in which tendons that are too tight pull and curve the toe under the foot, especially if they wear tight-fitting loafers with pointy toes.

THE MATERIAL
Leather shoes are good because the material is flexible. “You can take them to a shoe repair shop to change the shape of the upper to offset hammertoes or bunions,” says Dr. Haller.

For tennis or running shoes, Dr. Haller says that a breathable nylon mesh is best, with a solid heel counter—an insert that reinforces the heel cup—to help with support.

Whatever your shoes are made of, change footwear every day. “It allows your shoes to air out so they don’t stay sweaty or get moldy, and that’s good for your feet,” she says.

THE BOTTOM LINE
So what’s the ideal shoe for happy feet? “Good, supportive running shoes are the best thing you can wear,” says Dr. Haller. “They cushion the ball of the foot and the heel, providing shock absorption as you walk. In addition, they’re generally roomier in front, allowing toes to spread out.”

But Dr. Haller, who often appears on the TLC show “My Feet Are Killing Me,” understands that no one can wear running shoes all the time. Choose footwear that has as many elements of comfort as possible, she advises. “If you want a pointy toe, try to choose a shoe that has a lower heel. That way you don’t have gravity pushing your foot forward into a smaller space,” she says. “I personally love a very fashionable loafer that has a pointier toe but a low heel.” Conversely, if you opt for a shoe with a taller heel, look for one with a more rounded toe. Careful shoppers, she says, can find shoes that look as good as they feel, and keep the wearer walking and dancing for years to come.

To find a podiatrist at RWJUH Rahway, call 888.724.7123 or visit www.rwjbh.org/rahway.
A DOUBLE LUNG TRANSPLANT AND PULMONARY REHABILITATION ALLOW A ROSELLE MAN TO REGAIN HIS INDEPENDENCE.

Going for walks, climbing stairs and exercising are activities Gustavo Larrahondo, 67, will never take for granted again.

Although a life-threatening lung disease once made it a daily struggle to breathe, the Roselle resident can do all of those things now, thanks to a double lung transplant at Newark Beth Israel Medical Center (NBI) and pulmonary rehabilitation at Robert Wood Johnson University Hospital (RWJUH) Rahway.

A father of three and grandfather of three, Gustavo first noticed something was wrong in 2018 when he started experiencing a persistent dry cough, shortness of breath and difficulty lifting heavy objects. In October of that year, a surgical biopsy of his lung tissue determined that he had idiopathic pulmonary fibrosis, a severe lung disease of unknown origin that results in scarring of the lungs. Both of his lungs were damaged.

The news came as a shock to Gustavo, who had never smoked and was otherwise in good health. “I never imagined I would have something like this,” he says.

There is no known cure for idiopathic pulmonary fibrosis. “The average lifespan [after diagnosis] is usually five years or less, which is why transplant becomes an option,” explains pulmonologist Thomas Kaleekal, MD, Medical Director of NBI’s Advanced Lung Diseases and Transplant Program, the only lung transplant program in New Jersey.

Gustavo was added to the national lung transplant waitlist. He required an oxygen tank to breathe and a walker to get around, often relying on the assistance of his wife, Ligia. “I needed help with little things like walking to the bathroom,” he says. “I lost my independence.”

REHAB FOR STRENGTH

No one knew when lungs would become available for transplant. In the meantime, Gustavo was advised to undergo pulmonary rehabilitation at RWJUH Rahway, a supervised program that combines exercise with education, breath retraining and nutritional counseling. Both NBI
and RWJUH Rahway belong to the RWJBarnabas Health system.

“Pulmonary rehab can keep muscles strong and help patients rebound more quickly from surgery,” says Dr. Kaleekal. “This is important because people with serious lung diseases tend to do less physical activity, causing them to lose muscle mass. Also, the medications we use during transplant surgery, like steroids, can cause muscle weakness. The idea is that if you come into surgery strong, you’re likely to walk out in good shape.”

“When I first met Gustavo he was tethered to a nasal cannula [oxygen device], but he was motivated. He did great in rehab and came a long way,” says Paula Erickson, RRT, registered respiratory therapist for RWJUH Rahway. “He was a perfect candidate for a transplant.”

During his rehab sessions, Gustavo worked out using treadmills, arm machines, cross trainers and ellipticals. He also learned how to retrain the way he breathes to help increase oxygen levels and avoid feeling out of breath.

In late May 2019, Gustavo received news that two donor lungs were available that were a match for his body. “Usually patients have about two hours to get to the hospital after they get the call,” says Dr. Kaleekal. “We have surgeons available 24/7 to do a lung transplant at any time.”

Gustavo says it’s hard to put into words how he felt on the day of his transplant. “I felt a little bit of everything—excitement, but also nervousness because it was such a big surgery,” he recalls.

BACK TO EXERCISING

Although lung transplant patients typically spend less than three weeks in the hospital, Gustavo’s case required two months. After being released from the hospital, he spent two weeks in a rehab facility before returning home in August 2019. He then resumed pulmonary rehab at RWJUH Rahway to help rebuild endurance and make the most out of his new lungs.

“We don’t want patients to be couch potatoes, so we do the same types of exercises as before the transplant,” says Erickson. “Our goal is to get patients to eventually exercise on their own—either at home or at a gym.” Erickson also encourages patients to monitor the oxygen levels in their blood with a pulse oximeter, a small, inexpensive device that can be placed on the finger.

Today Gustavo is enjoying a new lease on life with his new lungs. He no longer requires an oxygen tank to breathe, can go for walks and drive a car, and has even been cleared to travel on a plane. He says he feels grateful for the wonderful care he received from the doctors and staff at NBI and RWJUH Rahway.

“Everybody involved in the process was so good, and I’m very thankful for that,” he says. “I have so much more quality of life than before.”

FOR MORE INFORMATION

To learn more about lung transplants at Newark Beth Israel Medical Center, visit www.rwjbh.org/lungtransplant. The RWJUH Rahway Pulmonary Rehabilitation program is located in the Nicholas Quadrel Healthy Heart Center, 2nd floor, 865 Stone Street, Rahway. To learn more or to make an appointment, call 732.499.6208.
Numbness, tingling, weakness, pain: Symptoms of peripheral neuropathy—a condition caused by damaged nerves that often starts in the hands and feet—can range from uncomfortable to very painful.

For many people, those symptoms have worsened during the pandemic, says Paul Abend, DO, FAAPMR, Medical Director, Inpatient and Outpatient Rehabilitation Services at Robert Wood Johnson University Hospital (RWJUH) Rahway. This is especially true for people with diabetes, the most common cause of the condition. (Other causes include chemotherapy and radiation treatment, infection, autoimmune disorders and certain medications.)

“People haven’t been going out as much, and they tell us they’ve been sitting around more. They may have limited their trips to buy food. As a result their A1C levels—a key measure of blood sugar—are not being well controlled, which can aggravate neuropathy,” says Dr. Abend. “Eating better and getting exercise are keys to getting the A1C level under control.”

HELP AT HAND
For those who need treatment, advanced neuropathy therapies are available at RWJUH Rahway. “If you have previously had treatment for neuropathy and had a setback, you may need adjustment in your treatment, almost like a tune-up,” says Dr. Abend.

Patients need not fear coming to the hospital, he says, because every safety precaution has been taken to keep patients and employees safe. These measures include taking temperatures; cleaning equipment before and after each use; washing hands; wearing masks and necessary protective equipment; and proper physical distancing.

Patients who have weakness and balance issues will receive evaluations by occupational and physical therapy specialists. If appropriate, assistive devices such as a cane or walker are prescribed, as well as devices for home areas such as the bathroom and chairs.

For neuropathy caused by diabetes or chemotherapy, the team at RWJUH Rahway has had success with MicroVas, in which electrical stimulation boosts blood flow and helps heal damaged tissue.

The healing continues at home. “With neuropathy, as with so many conditions, it’s the responsibility of the patient to take ownership of their care. Otherwise, it doesn’t work,” says Dr. Abend.

That means keeping up a regular exercise routine. “You don’t have to go to a gym,” says Dr. Abend. “You can go for a walk outside; if it’s raining, go up and down steps in your home. Try a guided tai chi or yoga video. Use arm weights. Therapeutic resistance bands are great for strengthening muscles.”

The important thing, says Dr. Abend, is not to suffer unnecessarily with neuropathy. “We are here to help you,” he says, “with the most advanced treatments available.”

To learn more about physical therapy and neuropathy treatment at RWJUH Rahway, 865 Stone Street, Rahway, call 732.499.6012.
COMMUNITY CALENDAR

RWJUH Rahway Is Here for You

When in-person meetings can’t happen, we can still help. RWJUH Rahway is ready to meet you virtually for a telemedicine appointment, consultation or support. Below are some of our virtual support groups and educational programs. If you have a healthcare need, or would like an email invitation to these professionally run virtual meetings, call Community Education at 732.499.6193.

ALL RECOVERY MEETINGS are for everyone who supports recovery. Find a full calendar of All Recovery meetings that you can join online or by phone at www.rwjbh.org/allrecovery.

BREAST CANCER SUPPORT GROUP:
Virtual meetings on the first Tuesday of each month from 7 to 8:30 p.m. and on the first Wednesday of each month from 5:30 to 7 p.m.

CAREGIVER SUPPORT:
Virtual meetings on the first Wednesday of each month from 7 to 8:30 p.m.

DIABETES SUPPORT:
In-person support group from 7 to 8 p.m., first Tuesday of every month in Conference Room 3 at RWJUH Rahway, 865 Stone Street, Rahway. In addition, Lauren Bernstein, MS, RD, Certified Diabetes Educator at RWJUH Rahway, is providing individual education for people with diabetes, both in person and virtually. To learn more, call 732.499.6109.

FIBROMYALGIA SUPPORT:
Virtual meetings on the first Thursday of each month at 5:30 to 7 p.m. or 7 to 8:30 p.m.

PARKINSON’S SUPPORT GROUP:
Virtual meeting on the second Wednesday of every month at 1 p.m. The group is open to all people with Parkinson’s and their care partners. Call Community Education at 732.499.6193 and provide an email or phone number for an invitation to this meeting. If you don’t have a computer, tablet or smartphone, you may join using a regular home phone.

WEIGHT LOSS SURGERY SUPPORT:
Get started on a path to better health with weight loss surgery. Virtual seminars and support groups are available. Anish Nihalani, MD, Medical Director of the Surgical Weight Loss program, is available for virtual consultations. Call 732.499.6300.

ONLINE SUPPORT FOR NEW AND EXPECTING MOTHERS

- Breastfeeding Support, every Monday from 12 to 1 p.m. International Board Certified Lactation Consultants will provide guidance and answer questions about latch issues, breast/nipple pain, milk supply concerns, pumping, supplementation, returning to work and weaning. Register at www.rwjbh.org/breastfeedingsupport.

- Perinatal Mood and Anxiety Disorders, every Wednesday from 11 a.m. to 12 p.m. One of the most common complications of childbirth is anxiety or feelings of anger or sadness. You are not alone. Join our judgment-free and supportive virtual community, led by a perinatal mood disorder certified specialist. Register at www.rwjbh.org/PMADsupport.

Let’s Focus on Your Health

If you’ve put off medical care due to COVID-19, please don’t delay it any longer.

As a high reliability organization, we’ve taken every precaution and continue to provide healthcare services. We adhere to all public health guidance and regulatory policies. This means stringent cleaning and disinfection throughout our facilities, including equipment and surfaces, frequently and between patients. And we’re actively screening team members, patients and visitors for symptoms and temperature upon entering a facility.

For your safety, all outpatient testing and therapy now requires an appointment. Call us at one of the numbers below and for some services we will work to get you an appointment on the same or the next day.

- Diagnostic radiology, stress and other cardiac testing 844.795.4968
- Bariatrics/weight loss surgery 732.499.6300
- Cardiac rehabilitation 732.499.6056
- Diabetes 732.499.6109
- Pulmonary rehabilitation 732.499.6208
- Physical therapy, occupational, speech therapy at RWJUH Rahway 732.499.6012
- Physical therapy at the RWJ Rahway Fitness & Wellness Center, Scotch Plains 908.389.5400
- Physical therapy at the RWJ Rahway Fitness & Wellness Center, Carteret 732.969.8030

Learn more at www.rwjbh.org/WelcomeBack.
We treat your non-emergency medical needs including:

- Common, acute illnesses such as colds, flu, infections and minor injuries (X-ray available)
- Chronic conditions and breathing disorders
- Skin, hair and nail conditions
- Immunizations, vaccinations and physicals
- Preventive care testing and evaluations

Some things shouldn’t or can’t wait for an appointment. First Health, an RWJBarnabas Health medical group provider affiliated with Robert Wood Johnson University Hospital Rahway, combines the convenience of extended weekday hours, as well as weekend and holiday hours, with the confidence of seeing a trusted provider.

Our facility offers quick and high-quality care for the entire family. Our highly-trained medical professionals treat your non-emergency medical needs in a comfortable, safe and caring environment.

As an RWJBarnabas Health medical group provider, First Health is now Horizon Blue Cross Blue Shield OMNIA Health Plan Tier 1-designated and accepts most major insurances.

We treat your non-emergency medical needs including:

- Common, acute illnesses such as colds, flu, infections and minor injuries (X-ray available)
- Chronic conditions and breathing disorders
- Skin, hair and nail conditions
- Immunizations, vaccinations and physicals
- Preventive care testing and evaluations

First Health – Clark
152 Central Avenue
Clark, NJ 07066
Open
Monday – Thursday: 7 am – 7 pm
Friday: 7 am – 5 pm
Saturday: 7 am – 3 pm
Sunday: Closed
Please call for holiday hours.
732-382-9700

First Health – Edison
10 Parsonage Rd #102
Edison, NJ 08830
Open
Monday – Thursday: 8 am – 7 pm
Friday: 8 am – 5 pm
Saturday: 7 am – 3 pm
Sunday: 9 am – 3 pm
Please call for holiday hours.
732-662-4680

TWO Convenient Urgent Care Centers in the area affiliated with RWJUH Rahway.

Walk-Ins Welcome