PHYSICAL THERAPY SERVICES ARE BACK

We are pleased to tell our community that our physical therapy services at the RWJ Rahway Fitness & Wellness Centers in Scotch Plains and Carteret and RWJUH Rahway Rehabilitation Services are open and taking appointments for new and returning patients.

At all locations, we are enacting necessary precautions for your safety, including taking temperatures, cleaning equipment before and after each use, and wearing masks and necessary protective equipment. Social distancing is maintained throughout each session. Although the gyms are still closed and aquatics is not available right now, we are eager to resume aquatic therapy when permitted.

All locations offer physical therapy for orthopedic and sports injuries, concussion, balance and vestibular therapy, and specific interventions for Parkinson’s disease. Additional programs are offered in specific locations such as pelvic floor therapy, lymphedema and neuropathy. A prescription is required for services.

• Physical therapy at the RWJ Rahway Fitness & Wellness Center in Scotch Plains
  2120 Lamberts Mill Road, Scotch Plains  |  908.389.5400

• Physical therapy at the RWJ Rahway Fitness & Wellness Center in Carteret
  60 Cooke Avenue, Carteret  |  732.969.8030

• Outpatient physical, occupational and speech, language and swallowing therapy are available at RWJUH Rahway.
  865 Stone Street, Rahway  |  732.499.6012

A MESSAGE FROM LEadership

Staying Healthy Together

For all of us who call New Jersey home, the COVID-19 pandemic has been a sobering reality. Every one of us has been affected in some way, and some have lost loved ones. To them, we extend our sincerest condolences.

Throughout these extraordinary months, New Jerseyans have come together to encourage each other and the hospitals that care for their communities. At RWJBarnabas Health, we truly have been inspired by the support we’ve received, and offer our heartfelt thanks for every donation and card, and for the countless other gestures of caring.

Most of all, of course, we wish to express our gratitude to our amazing staff—doctors and nurses caring for patients; hospital workers in the offices and on the floors; researchers seeking a cure and a vaccine; those charged with carrying out demanding new cleaning procedures; and those who have quickly adapted our facilities to care for COVID-19 patients.

Now, it’s important to look ahead and begin caring for ourselves again. During the height of the pandemic, many people delayed getting healthcare—a choice that can have devastating consequences. Please rest assured that we’ve gone above and beyond all the measures recommended by the Centers for Disease Control and other national and regional experts to keep everyone in our facilities safe.

This virus has taught us that we cannot let down our guard. At RWJUH Rahway, we are constantly cleaning and disinfecting patient rooms, work stations and high-touch areas. We’ve added more negative pressure rooms and more hand sanitation and handwashing stations. We have ups the preventive maintenance and cleaning of our air handling systems.

All who enter our hospital—patients, doctors and staff—have their temperatures taken and receive a mask. We’ve changed our process so that all outpatients need an appointment to prevent bottlenecks in waiting areas. We practice and are enforcing social distancing. Our staff members are vigilant about wearing and maintaining their personal protective equipment (PPE).

We look forward to supporting your good health in whatever way we can. Welcome back.

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

Robert Wood Johnson University Hospital Rahway complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. For more information, see link on our home page at www.rwjbh.org/rahway. RWJUH Rahway cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al 732.499.6136. RWJUH Rahway konfòm ak lwa sou dwa sivil federal ki apikab yo e li pa fè diskriminasyon sou baz ras, koulè, peyi orijin, laj, enfimite oswa sèks. ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis éd pou lang ki disponib gratis pou ou. Rele 732.499.6136.
2. WELCOME LETTER. A community update from our CEOs.

4. HEROES WORK HERE. We’re beyond grateful for the incredible work of our teams on the COVID-19 front lines.

6. DONORS ARE HEROES, TOO. A sampling of the valuable—and much appreciated—support we’ve received during the pandemic.

9. STAYING STRONG WHILE SOCIAL DISTANCING. Simple steps can help you regain a feeling of control.

10. 6 QUESTIONS ABOUT TELEMEDICINE, ANSWERED. You don’t have to be a technology whiz to have a video visit with your doctor.

12. CLINICAL TRIALS: WHAT EVERY CANCER PATIENT SHOULD KNOW. A trial offers patients a chance to benefit from the latest treatment.

14. NEW WAYS TO LEAD IN CANCER TREATMENT. Collaboration and innovation are driving a new era in oncology.

15. ADVANCED OPTIONS FOR TREATING AUTISM. Telehealth services and intensive treatments offer new help.

16. POWER PARTNERSHIPS. Working together to help make New Jersey healthier.

17. YOUR SUPPORT SUSTAINS US. Communities have stepped up for their local hospitals—and you can still help.

18. COMPASSION IN ACTION. We don’t have the space to tell all of our stories of care and courage. Here are just a few.

20. SAFE AND SOUND IN THE E.D. Rigorous procedures ensure the safety of Emergency Department patients and staff.

22. WELCOME BACK! COVID-19 testing of staff and patients, extreme cleaning and many other measures make our facilities safe for care.
Our providers and staff have risen to—and well above—the unprecedented challenges of caring for patients with COVID-19. Robert Wood Johnson University Hospital (RWJUH) Rahway is proud and grateful beyond words for the indomitable spirit and incredible work done by our teams on the front lines.
1 NURSE MANAGERS gathered for a clap out to honor one of their own, who was discharged from a COVID-19 unit to the Care Connection subacute rehab unit on the fourth floor.

2 IN IT TOGETHER: Nurse Manager Rose Caleen, BSN, RN-C (second from right), with some members of her staff.

3 TAKING TEMPERATURES: For everyone’s safety, temperatures are taken upon entry.

4 PHARMACY DEPARTMENT members play a critical role in patient care.

5 MRI COORDINATOR Iraida Muniz helped COVID-19 patients with meals during the surge.

6 ED STAFF MEMBERS wear personal protective equipment (PPE) with flair.

7 ED NURSES turned out to see the tribute to heroes parade organized by the Front Line Appreciation Group (FLAG) of Rahway.

8 STRENGTH AND STYLE: The 2E nursing staff shows off their personal PPE touches.

9 HOUSEKEEPING: Members of our housekeeping, food services and dietary, maintenance and plant services staffs worked tirelessly.

10 BEHAVIORAL HEALTH: Dedicated staff and providers from RWJBarnabas Health Behavioral Health Center and Network have been available to patients in need 24/7.

11 MOBILE HEALTH: During the pandemic, the first responders of RWJBarnabas Health Mobile Health Services have stood ready to provide expert care in any emergency.

12 PEER RECOVERY: Certified Peer Recovery Specialists from the RWJBarnabas Health Institute for Prevention and Recovery offer support to patients with substance use disorders.

13 OUR MEDICAL STAFF worked as a team with respiratory therapists, nurses and other healthcare professionals to care for patients with this complex disease.

To share your thanks or make a donation in support of our healthcare heroes, visit www.rwjbh.org/heroes.
At Robert Wood Johnson University Hospital (RWJUH) Rahway, we’ve dedicated everything we have to fighting COVID-19. And just as we’ve had the community’s back, you’ve had ours, with a steady outpouring of food, supplies, personal items and love. Please know that each and every gift has helped to keep us going. From the bottom of our hearts, thank you!
FLAGS FLYING: The Front Line Appreciation Group (FLAG) of Rahway, FLAG of Cranford, FLAG of Scotch Plains/Fanwood and Feed the Frontline Westfield sent food to fuel bodies and minds. At right is Rahway Mayor Raymond Giacobbe.

GIRL SCOUT COOKIES were a most welcome donation.

GOODY BAGS made by the community and sent with supportive notes lifted our spirits.

AGAPE FAMILY WORSHIP CENTER donated a delightful Caribbean lunch to our staff.

CRITICAL CARE STAFF enjoyed some of the many meals sent by the community.

SPECIAL DELIVERY: Mayor Raymond Giacobbe delivered a delicious lunch along with members of his family and FLAG of Rahway.

MASK MVP: RWJ Rahway Junior Volunteer Johnathan Slohoda and family made wonderful ear-saving mask mates for our staff.

CHILDREN'S SPECIALIZED HOSPITAL: The Long Term Care team from CSH in Mountainside thanks the Front Line Appreciation Group for breakfast sandwiches.

MESSAGE IN A BATTLE: The staff treasured the bright, supportive posters sent by local Girl Scouts.

SWEET SUPPORT: Beautiful cookies touched our hearts.

BOOSTS IN A BROWN BAG: Pretty bags were filled with useful goodies.

To say thank you or to donate for our healthcare heroes, visit www.rwjh.org/give.
As a high reliability organization, we’ve taken every precaution and continue to provide health care services. We have also initiated a resumption of services in adherence 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 (when permitted) 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 we will work to get you an appointment on the same or next day.

<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
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<tbody>
<tr>
<td>Diagnostic radiology, stress and other cardiac testing, lab/blood work, employee physicals, cardiac and pulmonary rehabilitation:</td>
<td>844-795-4968</td>
</tr>
<tr>
<td>Physical therapy, occupational, speech therapy at RWJ Rahway:</td>
<td>732-499-6012</td>
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<tr>
<td>Bariatrics/weight loss surgery:</td>
<td>732-499-6300</td>
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<td>Diabetes:</td>
<td>732-499-6109</td>
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<tr>
<td>Physical therapy at the RWJ Rahway Fitness &amp; Wellness Center, Scotch Plains:</td>
<td>908-389-5400</td>
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<tr>
<td>Physical therapy at the RWJ Rahway Fitness &amp; Wellness Center, Carteret:</td>
<td>732-969-8030</td>
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Learn more at rwbh.org/WelcomeBack

Let’s focus on your health now.

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

Robert Wood Johnson University Hospital Rahway

Let’s be healthy together.
The COVID-19 pandemic has brought all kinds of uncertainty—to our finances, our health and our ability to make plans. “People have lost an important aspect of control over their activities,” says Frank Ghinassi, PhD, ABBP, Senior Vice President, Behavioral Health and Addiction, RWJBarnabas Health, and President and CEO of Rutgers University Behavioral Health Care. “As a result, we’re seeing a lot of people feeling stressed—and even a little more than that, feeling distressed.”

“We all had a rhythm and routine for our days,” he continues, “from what time we took a shower to how we dressed for work to the kinds of things we did for fun. Now all of those old rhythms are challenged, and that makes people feel confused and off-balance.”

While that’s a perfectly normal reaction, Dr. Ghinassi says it’s important to take the next step. “Ask yourself, ‘What can I do in this new reality to help myself feel better and more in control?’” The answer lies in reintroducing predictability, to the degree possible in this unpredictable time.

• Create a new routine. “Establish a new set of patterns,” advises Dr. Ghinassi. “Go to bed and get up in a regular way. Eat at set intervals, not all day long just because you’re not far from the refrigerator. Work out or take a walk regularly. These new routines will become familiar and comforting.”

• Make plans to socialize with others. “Meaningful connection with family and friends is not going to happen automatically,” says Dr. Ghinassi. “Create ways to communicate with people who are important to you, using FaceTime, letters, phone calls or whatever medium you do best. And keep in mind that Snapchat and Instagram are one-way communication, not true socializing.”

• Build a new set of activities that give you pleasure. “A lot of things we like to do can’t happen now because they involve going to crowded places like movie theaters, restaurants, concerts and stadiums. We need to find activities that will bring us pleasure and are doable within our current limitations,” says Dr. Ghinassi. “That could involve playing or listening to music, streaming films, gardening, painting or any other enjoyable hobby.”

If social distancing has led to behaviors that could be destructive, such as overeating or drinking too much, or if the blues have crossed the line into depression, don’t hesitate to reach out for help. “There are many front doors to behavioral healthcare,” Dr. Ghinassi says. “You can ask a trusted healthcare provider to recommend a counselor. If your employer has an Employee Assistance Program, take advantage of that. Seek out your local mental health facility or call the New Jersey Hopeline at 855.654.6735. Call the RWJBarnabas Health Access Center, which is available 24/7, at 800.300.0628.”

• And take heart. “We’ll get through this,” says Dr. Ghinassi. “Humans are enormously adaptable. Through millennia of plagues, famines, wars and pestilence, we’ve risen to every challenge. It’s in our DNA. We’re going to learn and restructure, draw strength from each other and find solutions.”

For help accessing mental health services, call the RWJBarnabas Health Access Center at 800.300.0628.
You don’t have to be a technology whiz to have a video visit with your doctor.

Virtual online doctor visits have been available for some time—but since the COVID-19 pandemic, they’ve soared. “During just one week in April, doctors in our medical group conducted more than 10,000 telemedicine visits,” says Andy Anderson, MD, President and Chief Executive Officer of the RWJBarnabas Health medical group.

Stay-home orders during the lockdown have played a huge role in the increase, but other causes are also speeding up telemedicine’s adoption. Dr. Anderson tells how and why:

1 What factors are contributing to telemedicine’s surge?
Historically, demand for telemedicine was driven by urgent issues, rather than by routine or other kinds of care. Habit has played a role, too—the expectation that
patients and physicians need to physically be together in order to get the best possible care.

Now, there’s a greater openness to using technology platforms in all realms of our lives. Those platforms are increasingly sophisticated, so that patients and providers can really see each other, see the parts of the body in question and read each other’s expressions.

In the RWJBarnabas Health medical group, we have an easy-to-use platform for telemedicine visits. It’s as simple as a click to get into a virtual room for an appointment. It’s also secure and is fully HIPAA-compliant.

2 What are some examples of conditions that can be treated in a virtual visit?

Let’s say a person falls and cuts himself. A telemedicine visit can help determine whether he needs stitches and/or an antibiotic. Symptoms and treatment for a urinary tract infection can also be discussed virtually. If someone has a sore throat, he or she can show the back of the throat and tonsils to the doctor via video.

Chronic conditions, such as COPD [chronic obstructive pulmonary disease], congestive heart failure or asthma could be managed through a video visit, as a physician is able to observe whether a person is short of breath, for example, or whether his legs are swollen.

Diabetes that is not well controlled can also be discussed, as the patient can report his blood sugar levels and medication can be adjusted accordingly.

It’s important to note that in any of these cases, a visit can begin as a video visit and then become an in-person visit if the condition warrants it. If you aren’t sure what the best course of action is—video, in-person office visit or Emergency Department visit—don’t feel you have the burden of having to make the decision on your own. Call your physician’s office and have a conversation.

3 What about well visits and checkups?

Clearly, some exams and procedures require an in-person visit. However, many aspects of a wellness visit, specifically a Medicare Annual Wellness Visit, can be conducted virtually. A physician can ask about, for example, colon cancer screenings or mammograms, home safety and more. Patients like that they can save time and don’t have to travel.

In addition, we’re hoping to see increased use of monitoring devices that can transmit information from patient homes to physician offices, including blood pressure monitors, blood glucose monitors, pulse oximeters and even wireless scales.

4 Am I at risk for contagion if I visit a physician’s office?

At RWJBarnabas Health medical group offices, we’ve taken the necessary steps to make it very safe to visit in person. We have social distancing plans, including the use of Plexiglas barriers, a distance line at checkout areas, modified waiting room seating and limitations on the number of patients scheduled during a specified time frame. We also follow rigorous cleaning regimens, offer hand sanitizer stations and more.

5 Are telemedicine visits covered by insurance?

During the early stages of the pandemic, Medicare, Medicaid and many private insurances expanded their coverage for telemedicine. The situation is evolving, so check with your insurer, but our sense is that coverage for telemedicine will continue to expand.

6 How will telemedicine change healthcare in the future?

While the COVID-19 crisis has pushed us into this world fast, I think healthcare will be sticking with telemedicine from now on. Telemedicine is not a solution for everything, but it is a solution for a lot more things than we realized. It’s a great tool to have in our toolkit.

The most important message we have for patients is to continue to make your health a priority. Don’t put off care if you aren’t feeling well, or postpone contacting your physician for help managing any chronic health conditions. Whether virtually or in person, your provider is there to help you.
CLINICAL TRIALS: WHAT EVERY CANCER PATIENT SHOULD KNOW

TRIALS OFFER PATIENTS A CHANCE TO BENEFIT FROM THE LATEST TREATMENT.

If you or a loved one is diagnosed with cancer, you’ll want to seek the highest possible level of care—and clinical trials can be a critical aspect of that care. “Clinical trials offer tomorrow’s treatments today,” says Howard S. Hochster, MD, FACP, Director, Oncology Research for RWJBarnabas Health, and Associate Director, Clinical Research and Director, GI Oncology for Rutgers Cancer Institute. “As the state’s only NCI-Designated Comprehensive Cancer Center, Rutgers Cancer Institute of New Jersey and RWJBarnabas Health provide patients access to a wide range of clinical trials, many of which are not available elsewhere. We do this at Rutgers Cancer Institute in New Brunswick and...”
What happens in a clinical trial?
Clinical trials are research studies that evaluate new treatment options for diseases and help doctors learn which treatments are most effective.

Generally, clinical trials evaluate the safety and effectiveness of new drugs, use current drugs in a new manner or combine drugs to evaluate their effectiveness. Every clinical trial must be approved by regulatory authorities to be sure the scientific evidence merits this kind of investigation and that it’s ethically sound.

Clinical trials are undertaken only when we have evidence that the new approach is likely to be better than the standard treatment. Patients should speak with their physicians about the risks and benefits, including possible side effects, of the treatment being studied.

During a trial, patients will have many staff members paying attention to them—physicians and research staff including nurses, data managers and others—whose job is to make sure they get the treatment exactly as written in the protocol.

Who’s eligible for a clinical trial?
Every patient who has a cancer diagnosis should ask whether a clinical trial might be right for him or her, and should consider a clinical trial at every step of the cancer journey. Sometimes a trial isn’t appropriate at the beginning, but may be later on.

Requirements for participation vary. Criteria may include age, gender, type and stage of cancer, other existing medical conditions and treatment history.

Before patients can participate in a clinical trial, they must sign an informed consent document, which explains all aspects of the trial as well as alternative treatment options.

What are some examples of cancer research taking place in clinical trials?
For years, everyone with certain cancer diagnoses received the same type of treatment for their cancers, but not everyone reacted the same way. Now we’re able to use clinical trials to make progress in precision medicine, where we can specifically target, on a molecular level, the gene mutations or changes that make an individual’s normal cells turn into cancer cells.

Another exciting area now is immunotherapy—using a person’s own immune system to fight cancer. We’ve learned that cancer cells have ways to mask themselves from the immune system.

Today, we’ve seen many breakthroughs in drugs that restore the body’s ability to fight off cancer cells.

CAR T-cell therapy is another promising area of research. It involves obtaining immune cells from a patient, reengineering them in a lab to make them as effective at fighting cancer as possible, then reinjecting them into the patient’s body. This results in a “living” therapy with ongoing benefit.

Currently, Robert Wood Johnson University Hospital in New Brunswick, in conjunction with Rutgers Cancer Institute, is one of only two certified programs in the state to offer this form of immunotherapy.

To learn more about clinical trials, visit www.cinj.org/clinical-trials. To speak with a clinical trial navigator to explore your options, call the Oncology Access Center at 844.CANCERNJ.
NEW WAYS TO LEAD IN CANCER TREATMENT

COLLABORATION AND INNOVATION ARE DRIVING A NEW ERA IN ONCOLOGY.

Every week, up to 40 of New Jersey’s top cancer experts virtually convene as part of the new N.J. Statewide Cancer Programs Collaboration—a unique approach initiated and implemented by Steven K. Libutti, MD, Director, Rutgers Cancer Institute of New Jersey, and Senior Vice President, Oncology Services, RWJBarnabas Health.

“As the state’s only NCI-Designated Comprehensive Cancer Center, we felt that it was important that we communicate with other cancer programs in New Jersey during the COVID-19 pandemic,” says Dr. Libutti. “We felt we could learn quite a bit from hearing about other experiences, and that each program shouldn’t have to go through the COVID-19 pandemic,” says Dr. Libutti. “We felt we could learn quite a bit from hearing about other experiences, and that each program shouldn’t have to go through the learning curve on its own.”

In addition to Rutgers Cancer Institute and RWJBarnabas Health, all major cancer programs in the state participate, including those at Atlantic Health System; Capital Health Cancer Center; MD Anderson Cancer Center at Cooper; John Theurer Cancer Center at Hackensack University Medical Center, Hackensack Meridian Health; Hunterdon Healthcare; Inspira Health Network; Regional Cancer Care Associates; Saint Peter’s Healthcare System; St. Luke’s University Health Network, Warren; Summit Medical Group; Trinitas Comprehensive Cancer Center; and Penn Medicine/Virtua Cancer Program.

MANY MINDS

Subgroups in the areas of medical oncology, radiation oncology, surgical oncology and operations meet throughout the week to discuss topics relevant to their programs. On Friday mornings, all participants join a call to exchange information and insights.

“We’ve come up with plans for how to safely continue and then augment surgical oncology and other care during the pandemic,” says Dr. Libutti. “What are the right testing regimens to use? How do you open up surgery facilities safely to protect patients and providers from exposure? Which treatment regimens can be delivered at home, and which can be delayed without bad consequences for patients?

“Oncology itself is a very collaborative field, because so many modalities are used to treat a cancer patient in a very coordinated way,” continues Dr. Libutti. “It’s not a huge leap for us to extend collaborations beyond the borders of health systems.”

Patients in New Jersey will reap the benefits. “Our state sees 50,000 new diagnoses and 16,000 deaths from cancer every year,” says Dr. Libutti. “We’re going to leverage the strengths of each program to work together to help cancer patients.”

VIRTUAL CARE FOR CANCER PATIENTS

The Rutgers Cancer Institute of New Jersey, in partnership with RWJBarnabas Health (RWJBH), had already begun a pilot program for cancer consultations via video. The pandemic accelerated the expansion of the plan to almost all of the groups’ cancer specialists.

The specialists are using a secure platform, which is private and simple for patients to access. In addition to convenience, telemedicine has a number of benefits for cancer patients:

• The elimination of potential exposure for patients with compromised immune systems
• The ability to have several specialists virtually present at the meeting
• The capacity to have geographically distant family members at the meeting
• The means to effectively share information with patients. “As I’m talking to a patient, I can show a picture of, for example, lymph nodes, and also type out instructions on the screen and then email these to the patient,” says Andrew M. Evens, DO, MSc, Associate Director for Clinical Services and Director, Lymphoma Program, Rutgers Cancer Institute, and Medical Director, Oncology Service Line, RWJBH.

“As we always say, ‘Cancer doesn’t travel well,’” explains Dr. Evens. “Telemedicine doesn’t replace in-person care, but we knew there was an appetite for this service. Who wants to drive an hour or more on the parkway or turnpike for a consult when you don’t have to?”

Healthy Together | 14 | COVID-19 Special Issue
ADVANCED OPTIONS FOR TREATING AUTISM

TELEHEALTH SERVICES AND INTENSIVE TREATMENTS OFFER NEW HELP.

Stay-at-home orders during the pandemic have posed particular challenges for children and adults with autism spectrum disorder (ASD). Deprived of face-to-face services, they have been lacking the stimulation and training they need, and have spent much less time interacting with others than usual.

“It’s a situation where problem behavior is more likely to occur,” says Wayne Fisher, a professor in the Department of Pediatrics at Rutgers Robert Wood Johnson Medical School and Director of the Rutgers Center for Autism Research, Education and Service (RUCARES). “We wanted to provide support for kids and families to help them manage the situation more effectively.”

The result was the development of ABA (Applied Behavior Analysis) Short-Term Telehealth Services provided by Children’s Specialized Hospital (CSH). The services begin with a quick-start evaluation. For children with severe problems whose behavior may be dangerous to themselves, a behavior stabilization and safety program is developed in two 90-minute appointments. For children with mild to moderate ASD, a quick-start behavior management program and behavior management group are available over the course of eight appointments via a simple-to-access, private telehealth platform.

Though telehealth services for people with autism have been available in other states, it was not an option in New Jersey until an executive order as part of the COVID-19 response allowed it. Fisher hopes the trend continues.

“This method has many benefits. It really helps families, many of whom travel quite a distance for in-person specialized care, in terms of convenience,” he says. “For specialists, there’s therapeutic value in seeing the child and family at home, under naturalistic conditions.”

EXPANDED SERVICES

The ABA short-term telehealth program is part of an expansion of autism services that CSH now offers through a collaboration with RUCARES. This summer will see the opening of CSH RUCARES, the first center of its kind in New Jersey dedicated to innovative research, education and service to support children and adults with ASD.

CSH RUCARES will accept patients for a new Severe Behavior Disorders Program, which will provide specialized services to children and adolescents with autism and other developmental disabilities who display dangerous behavior such as self-injury and aggression. Patients will undergo intensive outpatient treatment from a team of board-certified behavior analysts and registered behavior technicians. “Our program has a data-based approach based on empirical research, and all of our staff and faculty are highly trained,” explains Fisher, who is the Director of CSH RUCARES.

CSH is also expanding its Pediatric Feeding Disorders Program with a new program for children who have not progressed through traditional feeding programs. “It’s a data-based, intensive, goal-driven day program. We see patients for about eight weeks, then transition to outpatient follow-up services once or twice a week,” says Cathleen Piazza, Director of the Pediatric Feeding Disorders Program at CSH and a professor in the Rutgers Graduate School of Applied and Professional Psychology. “We also find telehealth services very valuable because we can work with and see the patient where he or she eats, in real time.”

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

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.
At RWJBarnabas Health (RWJBH), we have always been committed to meaningful partnerships with organizations that share our vision to create healthier communities. Their efforts during the COVID-19 pandemic, however, have taken their support to a whole new level. “We asked our partners to help us in several ways—through donations, through disseminating educational information and through support for our frontline healthcare heroes,” says Justin Edelman, Senior Vice President, Corporate Partnerships, RWJBH. “The response was beyond what we ever could have imagined.”

Our corporate partners had our back. New Jersey Devils/Prudential Center provided a significant and impactful monetary donation in addition to protective equipment and more than 10,000 tickets to future events for our healthcare heroes. Rutgers University Athletics donated protective equipment and used its reach on social media to educate our communities on important safety tips, while the Somerset Patriots raised funds through online memorabilia auctions, merchandise sales and a pop-up food truck event. Too numerous to mention, the supportive efforts from so many of RWJBH’s partners (see list at right) have been crucial to our mission.

On behalf of RWJBH and all of our partner organizations, we wish you good health and good fortune at all times. Together, we’ll be there for you.

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

FRIENDS IN NEED

Warmest thanks to these partners:
- Cedar Stars Academy
- Cure Insurance Arena
- George Street Playhouse
- Lakewood BlueClaws
- Mets Radio Network
- Monmouth University Athletics
- MSG Networks
- New Jersey Devils/Prudential Center
- New Jersey Golf Foundation
- NJPAC
- New Jersey Youth Soccer Association
- Novo Nordisk New Jersey Marathon & Half Marathon
- Princeton University Athletics
- Pure Basketball
- Rutgers University Athletics
- RWJBarnabas Health Arena
- Seton Hall University Athletics
- Somerset Patriots
- Special Olympics New Jersey
- Trenton Thunder
- Yankees Radio Network

WORKING TOGETHER TO HELP MAKE NEW JERSEY HEALTHIER

For the Somerset Patriots’ Virtual Opening Day, Michael Rodricks, MD, threw the ceremonial first pitch to Brittany Roper, RN. Both work in the Critical Care Unit at RWJUH Somerset.

The Lakewood BlueClaws held a remote game of “Horse” (renamed “Claws”) to support RWJBH healthcare heroes. The winning hospital gets a private field day at FirstEnergy Park.

Seton Hall Men’s Basketball Coach Kevin Willard sent a video recognizing and thanking our healthcare heroes.

The Lakewood BlueClaws held a remote game of “Horse” (renamed “Claws”) to support RWJBH healthcare heroes. The winning hospital gets a private field day at FirstEnergy Park.

NJ Devils star Travis Zajac led a stick tap at 7 p.m. nightly across social media platforms to celebrate and support all frontline workers.

For the Somerset Patriots’ Virtual Opening Day, Michael Rodricks, MD, threw the ceremonial first pitch to Brittany Roper, RN. Both work in the Critical Care Unit at RWJUH Somerset.

Smart Olympics New Jersey athletes offered video recognition for doctors, nurses and hospital workers saving lives and treating patients at RWJBH facilities.

Rutgers Men’s Basketball co-captain Akwasi Yeboah shared important safety information and the need to fight the virus together with fans via social media.
The offers from the public began as soon as the crisis did. People emailed, texted and called hospitals, some in tears, wanting to know how they could help local healthcare providers. They sent money. They donated dinners. They sent cards. Someone had a friend who had a friend whose company could provide personal protective equipment (PPE). A small painting business had 20 face masks to donate. A hardware store provided gloves. The contributions came in a steady stream.

“The donations were from longtime loyal donors as well as those who had never made a gift to one of our hospitals before,” says Glenn Miller, Executive Vice President and Chief Development Officer at RWJBarnabas Health (RWJBH). “People wanted to make sure that our doctors, nurses and staff had what they needed to stay healthy and do their jobs.

“The word ‘heroes’ gets used a lot, and admiration for the dedication of our caregivers was driving this outpouring of support,” he continues. “Supporters saw our caregivers getting up to go to work every day under incredibly difficult circumstances, fighting to save lives.”

As of mid-May, the RWJBH system as a whole had received nearly $10 million in support. Of that amount, $6.7 million came in checks and online gifts, large and small; $3.2 million in donated PPE and other supplies; and $870,000 in food donations. “RWJBH hospitals have always enjoyed wonderfully generous support from the communities they serve,” Miller says. “In recent months, I think our doctors and nurses were certainly reminded about how much people value them and the work they do.”

ONGOING NEED
The money raised goes into the RWJBH system’s Emergency Response Fund, where it’s used to purchase much-needed equipment and supplies.

The fund also is used to support frontline hospital workers. “When employees need to be quarantined away from their families, we’ve been able to help make that happen,” Miller says. “Other colleagues needed childcare so they could come to work. And sadly, we’ve lost colleagues, and we’re working to develop resources to address the repercussions of such terrible losses.”

Beyond tangible support, the outpouring from the community provided an invaluable morale boost. “For healthcare workers going through this experience, to take a break and find a hot meal or a card or a note—it’s meant the world to them,” Miller says. “When you feed someone, you’re enriching their body, obviously, and also their soul.”

The Emergency Response Fund remains open. “We’re in an ongoing crisis, and philanthropy will continue to play an important role in helping us prepare for any surges or future outbreaks,” Miller says.

In addition, capital projects, new programs and equipment upgrades will still need to be funded for each medical center. “We’re incredibly grateful for the outpouring of support, and the tremendous positive impact it has on our work and our commitment to keeping communities healthy,” Miller says. “We cannot thank people enough.”

The gifts also have a benefit for the giver. “We’ve heard that people in the community want to feel that they have the ability to bring hope,” says Miller, “and that they’re empowered to make a difference.”
COMPASSION IN ACTION

In the course of covering COVID-19 units at Robert Wood Johnson University Hospital (RWJUH) Rahway, she had caught the virus, though she didn't realize it at first. Chills, a high fever, dehydration and symptoms of a urinary tract infection increased until she had to admit that she needed to go to the Emergency Department.

She could have gone to a hospital nearer to her home in Harrison, but she insisted on going to RWJUH Rahway. “I have full confidence in all the physicians, nurses, in everyone there,” Pinky, as she prefers to be called, says. “I knew that patients there get the best care.” A COVID-19 swab confirmed a positive diagnosis. Pinky became a patient on a unit where she was usually the one doing rounds.

Her condition didn’t respond to treatment, and she had vomiting and diarrhea. “I knew I was getting sicker. I could see that the oxygen levels in my blood were low,” Pinky recalls. “No visitors were allowed. I told the staff my only request was, please don’t let me die by myself.”

Because she is a nursing supervisor, her phone was continuing to receive alerts about emergencies in the hospital. “I could hear them calling codes and the room numbers. I could hear that people were dying all around me. I would sit up in bed and pray, ‘Please, don’t let me be next.’”

The combined efforts of specialists in infectious disease, pharmacy and nursing eventually hit upon the combination of medications that would start Pinky on the road to recovery. “I will be forever grateful to them,” she says.

She’s grateful, too, for the kind and sympathetic care she received from a range of caregivers. “The nursing assistants who bathed me, the nurses who without my asking would bring me a box of tissues or a cup of ice. The nurse who brought me an extra cup of tea in the morning. Yes, they’re there because they have a job to do—taking vitals, whatever—but they went above and beyond.

“I’m a critical care nurse, we save lives. I know all about dramatic scenes, pumping on people’s chests, all that. But the biggest takeaway I have now is that it’s the little things that count, because you’re helpless and can’t do anything. The small things you do are so meaningful, and that is what people will remember you by.”

Pinky spent 10 days in Care Connection, a subacute unit at RWJUH Rahway for recovering COVID-19 patients. As soon as she was discharged, she began to count the days until she could get back to work.

“I want to say thank you to everybody who touched me,” Pinky says. “I’m also concerned about the people on our staff who saw so much death and suffering. How can we help them? That’s another reason I want my colleagues to see me come back. Not everything is doom and gloom; there are successes.

“And here I am, I’m the example. Thanks to their care, I’m walking the halls and making rounds again.”

Maria “Pinky” Ruiz, RN, received a “clap out” and the playing of “Here Comes the Sun” upon her discharge.
WE DON’T HAVE THE SPACE TO TELL ALL OF THE STORIES OF CARE AND COURAGE WE’VE SEEN IN THESE CHALLENGING TIMES. HERE ARE JUST A FEW.

HEARTFELT SYMPATHY

“Having no visitors allowed at the hospital has made it really hard on grieving families,” says Karen Vargas, BSN, RN, Emergency Department Nurse Manager. “They never got to see their loved one or say goodbye. I wanted to find a small way for them to get some closure.”

Her idea: to mail a card of sympathy to families along with the actual EKG (electrocardiogram) of their loved one.

Vargas took the patient’s EKG strip, inserted it into a small glass bottle and affixed that to the card. More than 50 of these went in the mail May 1, with more planned to go out until the end of the no-visitor policy.

The card reads:

“You hold your loved one’s heartbeat in your hand. A simple strip of paper filled with the essence of them. The heart is the place we hold our joy, sorrow, courage, love and faith.

“At Robert Wood Johnson University Hospital Rahway, we treat all our patients like family and although you could not be by your loved one’s side during this extremely difficult time, please take comfort in knowing that your family member was cared for and surrounded by love until the very end. Our deepest condolences.”

FORER IN OUR HEARTS

COVID-19 took the life of Alex Kowalenko, DO, age 90, a beloved osteopathic physician. Dr. Kowalenko practiced medicine for almost 60 years and was affiliated with RWJUH Rahway for almost 30 years. His rich legacy includes having inspired two other family physicians: his daughter, Karen Kowalenko, DO, and his son, Thomas Kowalenko, DO, local family practitioners with ties to RWJUH Rahway. “He was everyone’s doctor,” says his granddaughter, Madeline Warshauer, who has worked as a development intern at RWJUH Rahway. “He cared and took care of all.”

Dr. Alex Kowalenko’s family has asked that donations be made to the “Dr. Grandpa Alex” fund to support the RWJUH Rahway COVID-19 Relief Fund: www.rwjbh.donordrive.com/campaign/Dr-Grandpa-Alex.

Wired to Help

Early on in the crisis, a 93-year-old woman had passed away in the hospital without family present because no visitors were allowed. Courtney Kovacs, BSN, RN-BC, 2E Nurse Manager (in foreground at left), knew that the patient’s daughters wanted to see their mother one last time. She helped the patient’s nurse prepare the woman for her family and then arranged a FaceTime session with each daughter so they could say goodbye privately.

The grateful daughters told Kovacs she had made a huge difference to their family. Hospitals throughout the RWJBarnabas Health system have since purchased iPads to enable families to communicate with their family members while they’re in the hospital.
SAFE AND SOUND
IN THE E.D.

RIGOROUS PROCEDURES
ENSURE THE SAFETY OF
EMERGENCY DEPARTMENT
PATIENTS AND STAFF.

Emergency Department (ED) visits fell sharply during the height of the coronavirus crisis, in New Jersey and nationally as well—and that has doctors worried.

“We’ve seen our ED volume decline by approximately 50 percent,” says Michael Bernstein, MD, MBA, Medical Director of the Robert Wood Johnson University Hospital (RWJUH) Rahway ED.

“Our delay in care can lead to permanent disability and even death. People need to know that it is safe to come to the ED for evaluation of any symptoms that are worrisome. We’ve put in the place the proper precautions to protect our patients and our staff.”

“COVID-19 did not change the prevalence of life-threatening heart attacks, strokes, respiratory emergencies, surgical emergencies and other infectious diseases, but the number of people seeking medical care for these conditions in the ED has dropped precipitously,” says Dr. Bernstein.

“We believe that people are not seeking the care they need because they are afraid of getting exposed to COVID-19,” he explains. "This is concerning because any delay in care can lead to permanent disability and even death. People need to know that it is safe to come to the ED for evaluation of any symptoms that are worrisome. We’ve put in the place the proper precautions to protect our patients and our staff.”
SAFETY MEASURES
Safety steps taken by Emergency Departments throughout the RWJBarnabas Health system include:
• Separation of COVID-19 and non-COVID-19 patients upon entry
• Setting aside special areas that are completely separate from COVID-19 patients and caregivers
• Creation of “negative pressure” isolation rooms that prevent airborne contaminants from drifting to other areas in the hospital
• Provision of masks for all staff and patients
• Frequent disinfectant wiping of surfaces and equipment.

“We are all doing our part to provide the best and the safest medical care for our patients,” says Dr. Bernstein.

CARDIAC CONCERNS
Doctors have long pounded the drum for patients to call 911 if they experience symptoms of a heart attack. “Time is heart muscle,” says Mathew Cholankeril, MD, Chair of Cardiology at RWJUH Rahway. “The sooner we can treat you after the onset of symptoms—ideally, within 90 minutes—the less damage to your heart.”

Dr. Cholankeril urges people to be aware not only of the classic symptoms of a heart attack (see list, above) such as chest pain or a feeling of heaviness in the chest, but of non-traditional symptoms such as shortness of breath as well.

Adding complexity to the situation is the fact that the novel coronavirus seems to exacerbate a range of other cardiovascular problems. “COVID-19 is a vascular disease as well as a respiratory disease,” says Dr. Cholankeril. “It can lead to clotting in the arteries. It’s possible that a patient may have heart disease that has not been recognized, and with the stress of COVID-19 illness a cardiac event occurs. The event can be any of the known cardiac syndromes, including heart attack or heart failure. We just don’t have the answers yet.”

The important thing to know, he says, is that the advice for going to the ED is the same now as it was before COVID-19. “Pay attention to symptoms,” says Dr. Cholankeril, “and don’t hesitate to call 911.”

STROKE RISK
The coronavirus-related clotting that can lead to heart attacks also appears to increase risk for stroke.

A stroke occurs when a blood vessel that leads to the brain is blocked by a clot, or ruptures, leading to death of brain cells as they’re robbed of oxygen-and nutrient-rich blood. Immediate treatment can minimize the long-term effects of stroke, such as speech and movement difficulties, and even prevent death.

People with uncontrolled high blood pressure or diabetes are at increased risk of stroke, as are smokers. But the pandemic has introduced a new wrinkle: a striking increase in strokes among COVID-19 patients as young as their 30s and 40s, who had no stroke risk factors and no other COVID-19 symptoms. This new risk makes it all the more important for people to act when they have symptoms (see list, below).

“Pay attention to the suddenness of the symptoms, which could include confusion and severe headache, and call 911 so you can be taken to the hospital right away,” advises Adham Kamel, MD, Director of the Stroke Program at RWJUH Rahway.

COVID-19, can affect the nervous system in other ways, too, says Dr. Kamel. “One of the most common ways is the loss of smell,” he says. “Another is exacerbation of seizures in people who are prone to them. All of these things have to be further investigated.”

What’s not in question is this emphatic advice from doctors: Don’t be afraid to go to the hospital if you need to. “You really have to weigh the risks and benefits,” says Dr. Kamel, “and realize that the risks are much higher if you stay at home.”
The safety and health of our patients and team members have always been top priorities at RWJBarnabas Health (RWJBH). Now we’ve taken everything the medical profession has learned about COVID-19 and implemented best practices at Robert Wood Johnson University Hospital Rahway and all of our facilities.

“At RWJBarnabas Health, we’ve been on a safety journey to becoming a High Reliability Organization for three years,” says John Bonamo, MD, Executive Vice President, Chief Quality Officer and Chief Medical Officer for RWJBH. “The high safety standards we had before the pandemic are making it possible for us to come back confident.”

Safety is an all-encompassing effort. “Every little thing we do is a building block aimed at making our facilities COVID-free,” says Dr. Bonamo.
WHAT WE'RE DOING
Testing is a major way RWJBH hospitals are keeping COVID-19 from spreading. Every admitted patient, every surgical patient and every Emergency Department patient with flu-like symptoms is tested. In addition, team members—who work directly with patients or not—are tested, many of them multiple times.

Hospital administrators and staff also have taken a hard look at all relevant processes, including how rooms are cleaned, how personal protective equipment (PPE) is used—even how air in the hospitals is circulated.

“As we discharge COVID-19 patients, the rooms in which they were cared for get a special deep cleaning,” says Dr. Bonamo. “We clean everything in the rooms to the nth degree, from top to bottom—including changing all the air filters and cleaning all the vents.”

RWJBH has taken the enormous step of retooling all of its heating and cooling systems to pull in fresh air from outside, rather than continuously recirculating the air inside a building. “It’s a big expense for the small number of infections it’s likely to prevent,” says Dr. Bonamo, “but each small yield of prevented cases adds up and is very important because of how quickly this disease spreads.”

WHAT YOU CAN DO
Although healthcare is an essential service, many people have avoided going to the doctor or hospital to limit their risk of exposure to COVID-19. That fear is unfounded when visiting RWJBH facilities—and it could be dangerous. Putting off urgent medical care or physician visits for chronic disease management, childhood immunizations and other health services can have devastating effects.

“You don’t want the virus, but you also don’t want a heart attack or a stroke, or for your child to get a different infectious disease,” says Dr. Bonamo. “You’re not protecting your health by staying away, you’re jeopardizing it.”

“We take public health and safety extraordinarily seriously,” Dr. Bonamo continues. “We understand why people might want to avoid coming to the hospital, but it’s important for everyone to know that we can keep them safe and help them get healthy.”

NO EFFORT SPARED
Preventing the spread of COVID-19
We’re going beyond the recommendations of the Centers for Disease Control and Prevention, the New Jersey Department of Health and other trusted organizations to implement best practices for preventing the spread of COVID-19. Steps we’re taking:

• Stringent cleaning and disinfection of all rooms, including all equipment, surfaces and air vents
• COVID-19 testing for all surgical patients, all admitted patients and all patients with flu-like symptoms in the Emergency Department
• COVID-19 testing for doctors, nurses and other staff. Those who have a negative test will be retested to guard against false negatives
• Continued restriction of visitors based on directives from the state of New Jersey
• Active screening of team members, patients and visitors (when permitted), as they enter a facility
• Requirement for everyone who enters a facility to wear a mask or face covering
• Strict requirements for the use of personal protective equipment (PPE) with both COVID-19 positive and non-COVID patients
• Social and physical distancing measures for all people in our facilities—in all employee and patient areas
• Strict hand hygiene rules, with hand sanitizer in all employee and patient areas
• Retooling of the heating and cooling systems in our facilities to bring fresh air in from outside rather than recirculating inside air
• Continued preparation and readiness for potential future surges.
You’ve taken every precaution.
So have we.
Welcome back.

If you’ve put off any 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 health care services. We have initiated a resumption of services in adherence to all public health guidance and regulatory policies. Learn more at rwjbh.org/WelcomeBack