

# healthy

*together*

**HOW TO BEAT  
PREDIABETES**

**WEIGHT-LOSS  
SURGERY:  
A HEALTHY  
CHOICE**

**KEEP YOUR  
VISION SHARP**

**A NEW STATE  
OF HEALTH  
FOR YOU &  
YOUR FAMILY**



# A New State of HEALTH

At its heart, healthcare is about people: about you and your family, your doctors and other members of your care team. Supporting that care are researchers—people with minds curious and rigorous enough to help determine which treatments work best and to discover new ones.

At RWJBarnabas Health, we stand for all these people—every single member of each community we serve. With our new partner Rutgers University, one of the nation’s leading public educators, we’re creating a new state of health in New Jersey. Together, we’re building a network of the best minds to deliver unparalleled patient care, to train the next generation of exceptional medical professionals, and to grow our shared commitment to groundbreaking research. Our goal is simple: for you and your loved ones to have access to the highest-quality care in the nation.

For example, we joined the entire state in celebrating the legacy of the historic nurse and our namesake, Clara Louise Maass, who was inducted into the New Jersey Hall of Fame this year in recognition of her contributions to nursing, healthcare and the research of yellow fever. As the first hospital in the country to bear the name of a nurse as its corporate identity, we are very proud to continue her legacy of quality and patient safety in the care and treatment that we provide each day. More than 100 years after her passing, Clara’s legacy continues to inspire a culture of excellence and patient safety, as evidenced by earning our tenth “A” designation in healthcare quality safety from The Leapfrog Group this year.

Where you get your healthcare matters. With this magazine, we’ll share what we stand for and how our values are positively impacting the health of individuals and entire communities. We hope you enjoy reading more about what we’re doing—and its importance to your health—in the pages of this new quarterly publication, *Healthy Together*.

Yours in good health,

**BARRY H. OSTROWSKY**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
RWJBARNABAS HEALTH

**MARY ELLEN CLYNE, Ph.D.**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
CLARA MAASS MEDICAL CENTER



## HEALTH NEWS

### CLARA MAASS MEDICAL CENTER EARNS ACCOLADES

CMMC’s steadfast commitment to improving the health and well-being of the communities it serves is exemplified by the national awards and recognition we have received. Here are some recent examples:

- **SAFETY** Earned 10 Grade “A” scores in Hospital Safety and Quality from The Leapfrog Group
- **LGBTQ** In 2018, earned designation in LGBTQ (Lesbian, Gay, Bisexual, Transgender and Questioning) Healthcare Equality from the Human Rights Campaign Foundation
- **SPECIALTY EXCELLENCE** Earned Specialty Excellence Awards in Bariatric Surgery, Labor and Delivery and Obstetrics and Gynecology from Healthgrades in 2018
- **DISEASE-SPECIFIC CERTIFICATION** Earned the Gold Seal of Approval from the Joint Commission with Disease-Specific certification in Acute Coronary Syndrome, Congestive Heart Failure, Elective Joint Hip Replacement, Elective Joint Knee Replacement and Advanced Certification in Palliative Care
- **CONNECTIVITY** Named by the American Hospital Association’s Health forum to the 18th Annual Health Care Most Wired Hospitals list for 2016 and 2017
- **WORKPLACE PARTNERSHIP** Earned platinum recognition in 2018 from Health Resources and Services Administration (HRSA) Workplace Partnership for Life Hospital Campaign for increased organ donation efforts
- **QUALITY PATIENT CARE** Designated Primary Stroke Center, New Jersey Department of Health Bariatric Surgery Center of Excellence by the American Society for Metabolic and Bariatric Surgery



**Clara Maass Medical Center** | **RWJBarnabas HEALTH**

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- @Clara\_Maass
- RWJBarnabas Health

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# GOING WITH THE FLOW (AGAIN)

**AN INVENTIVE APPROACH TO UNBLOCKING ARTERIES HAS GIVEN SANDRA GAUDIOSI A NEW LEASE ON LIFE.**

**F**or Sandra Gaudiosi, her third experience with a serious medical issue over the past few years proved the most difficult.

The special education teacher had recently had a colostomy, and then a bout with anal cancer, before a surprise episode brought her to the Emergency Department at Clara Maass Medical Center (CMMC). “All of a sudden I got a pain in my breastbone area that went immediately toward my back and I said, ‘Oh my God, this is not right,’” Sandra recalls. “With that, we called 911 for an ambulance.”

After conducting an examination and tests, the physicians at CMMC informed Sandra that she needed to have a percutaneous coronary intervention, or PCI—a treatment that uses dye and a flexible tube or catheter to unblock narrowed coronary arteries and insert a stent to restore vital blood flow to the heart.

“When I was told I had to have this procedure, that really shook me up,” Sandra says. “I was able to face having a colostomy and I was able to find the strength to get through a cancer diagnosis, but knowing that it was my heart this time—that really set me back.”

A devoted wife of 52 years to her high school sweetheart, proud mother of two daughters, and doting grandmother to a

16-year-old “football superstar,” Sandra drew strength from both her family and her dedication to her job to move forward on this frightening and unexpected journey. “I had to get back to my family, my students and my school. I wanted to get back to work and make it to graduation. That was my goal.”

## AN ATYPICAL APPROACH

Traditionally, a PCI is done by inserting a cardiac catheter through the femoral artery in the groin. But Sandra qualified for a “transradial approach PCI,” a less-invasive technique in which the catheter is inserted in the patient’s radial artery at the wrist.

The procedure has several advantages, which include a lower risk of complications from bleeding, early ambulation and early discharge. “When we intervene to fix a blood vessel, because of the blood thinners that the patient is on, there is a risk of bleeding when the catheters are removed at the end of the procedure,” explains Elie Chakhtoura, MD, interventional cardiologist, Director of the Cardiac Catheterization Laboratory at CMMC and member of Barnabas Health Medical Group. “When you perform the procedure through the groin, there is more bleeding and it’s harder to control in that area—so much so that a blood transfusion is sometimes necessary.” In men with prostate disease, the femoral approach can lead to problems in urinating after a prolonged period of post-procedure bed rest.

“With the wrist, we can compress the artery with a simple compression device. The patient is able to ambulate immediately, and often can be discharged

the same day,” Dr. Chakhtoura explains.

## ENERGY RETURNS

Despite her fear of the worst, Sandra says her experience couldn’t have gone better. “The way I was treated, I would do it again,” she declares. “For me, that’s just how simple a procedure this was. The care I received, not just from Dr. Chakhtoura but from the nurses and technicians, was incredible. They explained everything to me, step by step, and kept me feeling at ease. They didn’t put me under general anesthesia, so I was awake the entire time, but with the medicine they gave me for the pain I felt nothing.”

Sandra was kept overnight for observation and went home the following day. Her only restriction? “For a few days I wasn’t supposed to pick up anything over 10 pounds with that hand. After that, I was fine.”

“The patient is treated mechanically with the catheter and stent to improve blood flow to the affected area, and with medications to lower cholesterol and thin the blood to prevent a recurrence,” explains Dr. Chakhtoura. “Step three is cardiac rehabilitation to improve stamina,



**ELIE CHAKHTOURA, MD**

strength and cardiovascular outcomes.”

With proper arterial blood flow now restored by the insertion of the stent, Sandra started on a course of cardiac rehabilitation, six

Your heart doesn't beat just for you. Get it checked. To learn more, visit [rwjbh.org/heart](http://rwjbh.org/heart).



weeks after the procedure.

Looking back, Sandra realizes just how much her daily life used to be affected by her condition. “Once my blood pressure came down after the procedure, I could immediately feel my overall energy levels begin to rise,” she says. “All I can say is, ‘Listen to your body!’ I think maybe if I were more in tune with myself, I could have caught this a lot earlier—you never think something like this is going to happen to you.”

As she ponders her upcoming birthday, the soon-to-be-73-year-old, now retired, resolves to enjoy her new lease on life by picking up an old hobby.

“I used to play softball, and I used to volunteer as a coach,” she says. “It’s my favorite sport. Once I finish my cardiac rehabilitation program, I’m going to get involved in it again.”



Sandra Gaudiosi does the work in cardiac rehabilitation therapy at Clara Maass Medical Center. Above, left to right, Miriam Abes, RN; Sandra; Catherine Carvajal, RN.



## HOW TO FIND YOUR BMI

You can calculate your body mass index online here:  
<http://bit.ly/BMIFinder>



# WHAT TO KNOW ABOUT WEIGHT-LOSS SURGERY

**BARIATRIC SURGERY HAS COME A LONG WAY—AND IT'S GIVING MANY A CHANCE TO LIVE THEIR LIVES TO THE FULLEST.**



## LOSING IT WITH LOVE

“At Clara Maass Medical Center, our bariatric surgery statistics are in the top 1 percent of the nation in terms of weight loss and complication rates” says Naveen Ballem, MD, Director of Bariatric Surgery. CMMC offers a monthly informational seminar on “Surgical Options for Weight Loss” where people can meet with the Bariatric Center team and learn what to expect before, during and after surgery. A Support Group for Bariatric Patients is held immediately following the seminar. To attend these events or to learn more about weight-loss surgery at CMMC, call 973-450-2393.

## CAN I DRINK ALCOHOL AFTER BARIATRIC SURGERY?

After gastric bypass or sleeve gastrectomy, people will find that their tolerance for alcohol drops because they absorb it more quickly. Alcohol also contains a lot of sugar, which patients should avoid in a healthy diet.

## DON'T MOST PEOPLE REGAIN WEIGHT AFTER BARIATRIC SURGERY?

Eighty-five percent of patients will not only lose, but maintain their weight long-term. The remaining 15 percent make bad food choices, which leads them to regain the weight.

## HOW DOES SOMEONE PREPARE FOR BARIATRIC SURGERY?

At Clara Maass Medical Center, patients meet with a dietitian once a month for three consecutive months to get all the education they need. You can find many resources, such as videos and fact sheets, online. As people become educated on what bariatric surgery is and what the outcomes are, the fear goes away and people become more comfortable with the idea.

We never try to convince people that they need surgery. People come to the realization themselves, whether they're running after their children and can't keep up, or are newly diagnosed with diabetes. They realize that enough is enough, and they need help.

**O**besity affects 78 million Americans and of those, 24 million are severely obese. Weight-loss surgery—or “bariatric surgery”—involves reducing the size of the patient's stomach so he or she will feel full sooner, eat less and, with the help of other lifestyle changes, reduce his or her weight.

However, fear, shame and lack of education prevent many from seeking this potentially life-changing surgery. “The number one reason to consider bariatric surgery is to get healthy,” says Naveen Ballem, MD, Director of Bariatric Surgery at Clara Maass Medical Center. “It's not just about weight loss. It's about health and quality of life.” Here, Dr. Ballem answers some common questions people have about bariatric surgery:

### IS BARIATRIC SURGERY DANGEROUS?

A big misconception is that the operation leads to significant pain and a long recovery, and that's not the case. There is a chance of complications with any kind of surgery, but the risk with bariatric surgery is minimal. Using new technology, we are able to conduct the surgery in an hour or less with a laparoscope and robotic assistance. Patients are generally able to walk the same day, go home in 24 hours and be back to work in a week. The pain can be controlled with Tylenol.

### HOW DO I KNOW WHETHER I QUALIFY?

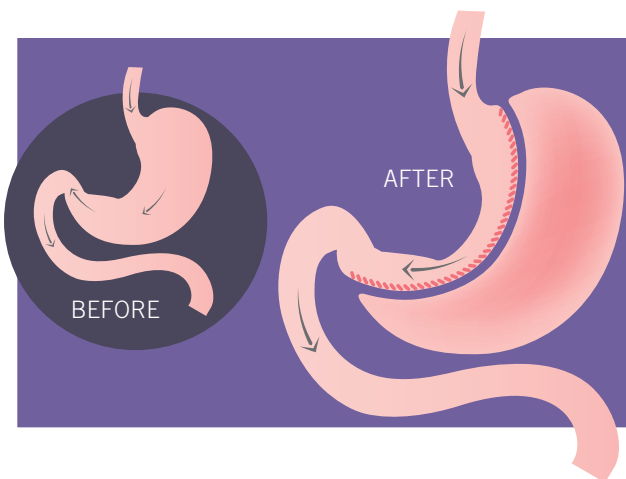
To qualify for bariatric surgery, patients generally need to have a BMI (body mass index) of 40 or more, or a BMI of 35 and at least one or more obesity-related illnesses, such as type 2 diabetes or sleep apnea. Most insurances will cover bariatric surgery for qualified patients.

### SHOULDN'T I BE ABLE TO LOSE WEIGHT ON MY OWN?



NAVEEN BALLEM, MD

Many candidates for bariatric surgery have tried to lose weight many times and have felt defeated. They are embarrassed and reluctant to admit they need help. It's important to realize that for many obese people, losing weight is not a matter of willpower. The American Medical Association recognizes obesity as a chronic medical condition and an urgent public health problem. It's the number one disease affecting Americans.



## WHAT IS LAPAROSCOPIC SLEEVE GASTRECTOMY?

There are several kinds of bariatric surgery, but the “gastric sleeve” is the most commonly performed in the U.S. “Laparoscopic” refers to minimally invasive surgery that can be performed through small incisions. In a sleeve gastrectomy, the stomach is reduced to nearly a quarter of its original size. Before surgery, the stomach looks like a pouch; afterward, it looks more like a sleeve. The smaller stomach restricts food intake and also provides a sense of fullness faster. The procedure is irreversible and nutritional supplements may be required.



Pictured clockwise: renderings of the planned new ED entrance, nurses' observation station and ED lobby.



# READY FOR ANYTHING

**AT CLARA MAASS MEDICAL CENTER, AN EMERGENCY DEPARTMENT EXPANSION WILL STREAMLINE CARE.**

When a medical emergency hits, people need help fast. And when an emergency department (ED) treats more than 80,000 patients annually—as the Clara Maass Medical Center (CMMC) ED does—it needs not only plenty of space, but forward-thinking strategies as well.

Both of these are in place at CMMC, an ED that is already known for its excellent care and treatment at all levels. The ED offers faster treatment than an urgent care center, with the resources of a full hospital.

Now, a major ED expansion will further enhance the patient experience. The expansion, which began last year, will

provide more than 10,000 additional square feet of treatment space. It will allow the department to create a separate, child-friendly pediatric Emergency



**JOHN FONTANETTA, MD**

Department—with 10 additional pediatric treatment rooms—to increase the ED's focus on pediatric care and to better serve the nearly 25,000 children and adolescents who come to the ED at CMMC each year.

“The new ED will have a different look and an improved flow,” explains Wilfredo M. Yap Jr., MSN, RN-BC, NEA-BC, Director of CMMC's ED. “The new construction is going to create an optimized workflow for our staff so they can expedite the care of our patients through the Emergency Department more efficiently.”

But one important thing will remain the same: the quality of care. “Many of our Emergency Department physicians are ‘double-boarded,’ which means they are board-certified not just in emergency medicine, but also internal medicine,” explains John Fontanetta, MD, Chairman of Emergency Medicine. “A few are even triple-boarded. We have more physicians that are board-certified in both disciplines than any other ED in the state of New Jersey. With the broad range of medical issues experienced by our patients, it's important to have highly skilled and experienced physicians to handle it all.”

The expansion is expected to be

## EXCELLENCE IN THE ED

In addition to its newly expanded and upgraded facilities, the Emergency Department (ED) at Clara Maass Medical Center offers superb care. Staffed 24 hours a day by a dedicated team of doctors, nurses and support staff, the ED has:

- 24-hour laboratory diagnostic testing and radiology services
- A state-of-the-art electronic medical records system that allows caregivers to see your records and transmit updates to your private physician
- Joint Commission and New Jersey Department of Health and Senior Services designation as a Primary Stroke Center for the early diagnosis, intervention and treatment of strokes
- Joint Commission Disease-Specific Certification for Acute Coronary Syndrome

To contact the CMMC Emergency Department, call 973-450-2100. In an emergency, dial 911.

completed in the summer of 2019. “In the meantime, we are continuing to treat our patients with few interruptions,” Yap says, “so there is absolutely no impact to the patient experience as we invest in our newly renovated and constructed ED.”

Learn more about how CMMC is always expanding to serve you better at [rwjbh.org/claramaass](http://rwjbh.org/claramaass).



# A NEW STATE OF HEALTH

## FOR NEW JERSEY, THE NATION, THE WORLD

### WHAT THE UNPRECEDENTED PARTNERSHIP BETWEEN RWJBARNABAS HEALTH AND RUTGERS UNIVERSITY MEANS FOR YOU.

The state's largest integrated health system, RWJBarnabas Health, and Rutgers University, one of the nation's leading public research universities, have formed a groundbreaking partnership that will increase access to care and reduce healthcare disparities, while advancing health science discovery and innovation. RWJBarnabas Health will make a significant investment in recruiting and retaining the nation's finest doctors, researchers and medical students. That means more expert physicians to care for patients and more clinical trials to find better treatment options. Moreover, everyone on this dynamic new team has a mission to deliver excellence in every area of the patient experience. Altogether, the partnership means a transformation of the way healthcare is delivered in New Jersey.

That's the big picture. What's the personal picture for you and your family? You'll be able to get compassionate, world-class care without having to travel far from home. In the following pages, we'll share more good news about what this partnership means for you.



### PARTNERSHIP BY THE NUMBERS



To be invested by RWJBarnabas Health in the education and research mission of the integrated academic health system, over 20 years



Committed by RWJBarnabas Health to encourage Rutgers medical students to remain in New Jersey and provide care to its residents



Physicians and providers (2,500) and staff (3,000) under the direction of the new Combined Medical Group



Patient visits conducted by RWJBarnabas Health and Rutgers, combined, in 2017



# KNOWLEDGE IS POWER

## HOW IN-STATE CLINICAL RESEARCH CONNECTS TO BETTER CARE FOR NEW JERSEY PATIENTS.

If you've read or watched anything about medical care in recent years, it's clear that the field of medicine is always advancing. How do medical treatments improve? Through clinical research or clinical trials. Doctors, nurses and scientists gather information through personal interaction with patients, or through collection of blood, tissue or data, to find new and better ways to detect, diagnose, treat and prevent disease.

When this research takes place in New Jersey, residents have the ability to participate in those clinical trials, and to be among the first patients to benefit from new treatments. Those opportunities will increase dramatically as a result of the RWJBarnabas Health/Rutgers partnership, which will double the Rutgers research portfolio—already the largest in New Jersey—and make it possible to hire about 100 new high-caliber principal investigators (lead researchers).

To learn more about this historic partnership, visit [www.RutgersRWJBHtogether.org](http://www.RutgersRWJBHtogether.org).

### EXPANDING CANCER CARE

The Rutgers Cancer Institute of New Jersey offers a prime example of how the partnership between Rutgers and RWJBarnabas Health will enhance both clinical research and patient care. Under the new partnership, Rutgers Cancer Institute of New Jersey—the state's only National Cancer Institute-designated Comprehensive Cancer Center—is now able to more easily provide patients with greater access to outstanding cancer services and clinical trials close to home.

“For many cancers, standard therapy may not be sufficient to have the greatest success for an individual patient,” says Steven K. Libutti, MD, FACS, Senior Vice President of Oncology Services for RWJBarnabas Health and Director of the Rutgers Cancer Institute of New Jersey. “We're constantly



STEVEN K. LIBUTTI, MD, FACS

looking for the next generation of therapies that will be more effective, and the only way we make those discoveries is through the conduct of clinical research.” Immunotherapy, in which a person's immune system can be used to fight cancer, is just one of many cutting-edge areas of study at Rutgers Cancer Institute.

### ACCESS EVERYWHERE

Thanks to the new partnership, more cancer patients will have access to the most advanced care. Rutgers Cancer Institute will leverage telemedicine and video conferencing to bring experts at different sites together with patients. “We're also expanding the number of patient navigators we have in our program,” says Dr. Libutti. “These navigators are essentially partnered with a patient from the moment of diagnosis throughout his or her care. They can make certain the patient goes to the closest facility that has the capability to address that patient's particular cancer problem with exceptional treatment.”

For New Jerseyans who have cancer, home is where the care is. “The significance of this partnership is really our ability to bring cutting-edge therapies, state-of-the-art technologies and world-class physicians directly to patients in their own community,” Dr. Libutti says. “We strongly believe in the notion that cancer does not travel well. No patient in New Jersey has to travel out of state to get the most advanced and exceptional cancer care.”

To learn more about RWJBarnabas Health and Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-designated Comprehensive Cancer Center, visit [rwjbh.org/cancer](http://rwjbh.org/cancer).

For a referral to a Combined Medical Group physician, visit [rwjbh.org/medicalgroup](http://rwjbh.org/medicalgroup) or [rutgershealth.org](http://rutgershealth.org).



# CARING WITH PURPOSE

## A NEW VISION FOR HEALTHCARE UNITES PROVIDERS AND PATIENTS.

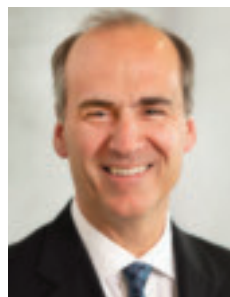
When many hearts and minds work with one purpose, healthcare can be transformed.

That's the guiding idea behind the Combined Medical Group, a joint physician practice that will be a key part of the partnership between RWJBarnabas Health and Rutgers.

"Having a shared purpose, a vision and a set of core values excites our employees and physicians and other healthcare professionals," says Andy Anderson, MD, MBA, Chief Executive Officer of the Combined Medical Group. "They want to be part of something

that's going to help define the future of healthcare."

RWJBarnabas Health and Rutgers are engaged in a partnership, not a merger, so each remains a separate institution. The



ANDY ANDERSON, MD, MBA

practitioners at RWJBarnabas Health and the faculty practice of Rutgers-employed healthcare professionals (including physicians, dentists, psychologists,

nurses, pharmacists and others) will collaborate and innovate as a team. The Combined Medical Group will include approximately 5,500 physicians, providers and staff.

### VISION INTO REALITY

In order to integrate their efforts seamlessly, the group needs a common purpose. "We're focused on three areas," explains Dr. Anderson, who comes to the partnership from a similar role at Aurora Health Care in Wisconsin. "Those areas are: making sure we put patients first, valuing each member of the healthcare team and improving the health of the communities we serve."

That three-part purpose has to touch every aspect of the patient's experience, Dr. Anderson believes. "Healthcare is not only about hospitals. It's also about office practices, home-care services, access to medications and more," he says. "We want to better connect all those pieces and parts to make it easier for patients."

The effort will include a review of the electronic medical records system. "In the future state of the health system, a patient will be able to look at their medication list or next appointment, get reminders or get lifestyle recommendations, all through a single portal," Dr. Anderson says.

### A FOCUS ON WELLNESS

The vision also includes focusing more attention on helping patients stay well. For example, having staff and providers talk more with patients about lifestyle habits can give them better control over chronic diseases like diabetes.

Though the goals of the Combined Medical Group are ambitious, they are also, in a way, simple. "We want to be the health system where patients want to get care," Dr. Anderson says, "and where people want to work."



# GREAT MINDS, BIG HEARTS

**THE RWJBARNABAS HEALTH/RUTGERS PARTNERSHIP OPENS THE DOOR TO NEW CENTERS OF EXCELLENCE—INCLUDING A GROUNDBREAKING NEUROSCIENCES ENTERPRISE.**

Many critical conditions fall under the scope of a neurosurgical team: stroke, concussion, trauma to or infection in the brain or spine, and more. While Rutgers and RWJBarnabas Health already place among the top tier of neurosurgical care providers, their partnership is allowing the creation of a neurosciences institute of global renown.



**ANIL NANDA, MD, MPH**

“This is a unique opportunity to build a truly world-class center,” says Anil Nanda, MD, MPH, the newly appointed Senior Vice

President of Neurosurgical Services for RWJBarnabas Health. Dr. Nanda also will serve as Professor and Joint Chair of the Department of Neurosurgery at both Rutgers-Robert Wood Johnson Medical School and Rutgers-New Jersey Medical School. He comes to his role from Louisiana State University Health Sciences Center—Shreveport, where he built an internationally known department of neurosurgery.

### FOCUSED ON QUALITY

“Our challenge here in New Jersey is to build on different cultures in the medical schools and in different hospitals and create a unified system,” Dr. Nanda says. Among his top priorities are to look at safety; to identify whether all sites have the cutting-edge technology they need;

and to do a sophisticated data analysis of outcomes. “We’ve hired a biostatistician and an epidemiologist to help us create a neurological dashboard to look at safety and quality issues across the system,” he explains.

While good data and technical expertise are critical, they’re only part of successful neurosurgical care, Dr. Nanda says. “We want to do this in a compassionate setting, to treat patients like we would want our families treated,” he says.

Public health outreach on topics like concussions and stroke will be a priority, as will looking at ways to eliminate disparities in healthcare. “We want to make sure patients get very good care, even if they live in communities that are economically challenged. That’s very important to me personally,” Dr. Nanda says. “And I feel strongly that in the neurosurgical services line, a rising tide brings healthcare up for all people in New Jersey. That’s why this is a magnificent partnership, with a strength in numbers that will allow us to provide excellent care to all.”

To learn more about neurological services, treatment and care at RWJBarnabas Health, visit [rwjbh.org/neuro](http://rwjbh.org/neuro).



## A SPORTS SLAM DUNK

RWJBarnabas Health and Rutgers University have partnered to develop an outstanding sports medicine program for Rutgers athletes, students and faculty, as well as for communities throughout New Jersey. The combined effort includes a new state-of-the-art athletic facility, the RWJBarnabas Health Athletic Performance Center, scheduled to be completed in July 2019.

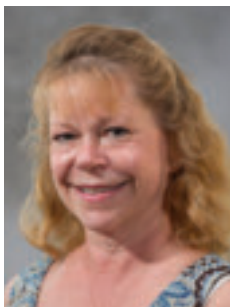


“Omar was very motivated and upbeat in physical therapy,” Dr. Fantasia says.

# BACK ON TRACK

**A YOUNG ATHLETE TAKES A DEVASTATING FALL AND GETS BACK UP—WITH THE HELP OF CHILDREN’S SPECIALIZED HOSPITAL.**

Last April, Omar Shehabeldin, 14, was running for a school bus when he felt a “pop” in his knees and fell—hard. Instead of going to a track meet as he’d planned, he was taken to the Emergency Department at Robert Wood Johnson University Hospital New Brunswick. Both knees appeared to be broken.



MICHELE FANTASIA, MD

In fact, the tendon that

connects the patella (kneecap) to the tibia (shin bone) had basically torn off in both legs. The tendons had to be surgically reattached with a type of hardware that looks like nails.

What had happened to cause such drastic injuries to the athletic Omar, who as a high school freshman was already a standout on the football team?

In fact, his family had long known he had Osgood-Schlatter disease, a not uncommon cause of knee pain in children. Bones, muscles and tendons change rapidly during growth spurts, and physical activity puts extra stress on them. “It started when Omar was younger,” says his mother Aliaa Gouda. “When he got on the floor to pray with his father, he would complain that his knee hurt. The doctor told us that he would outgrow it, as most children do.” Unfortunately, Omar was an exception.

## WORKING IT

After surgery, Omar was sent to Children’s Specialized Hospital in New Brunswick for rehabilitation. “We stayed in close touch with the pediatric orthopedic surgeon, Dr. Stephen Adolfsen, who wanted to be sure the knee bones and patella had really fused before Omar began to bear weight on his legs,” says Michele Fantasia, MD, a specialist

in pediatric rehabilitation medicine at Children’s Specialized Hospital. “We worked with Omar on upper body and upper extremity training and core strengthening, all while he was in a special wheelchair that elevated his legs.” In June, Omar was cleared to walk with braces. In therapy, he began to bend his knees, bit by bit.

Omar was fortunate to have the considerable resources of Children’s Specialized, which include recreational therapy activities, water therapy and a therapy dog named Burton. “Our staff has experience in all developmental stages, and we are equipped with multiple therapeutic modalities,” Dr. Fantasia says.

Omar was discharged on June 21 and continues to go to the hospital for outpatient rehab. “Everybody at that hospital works with so much heart. It is a great place,” his mother Aliaa says. “In fact, we’re going to go back and volunteer to help people there.”

To learn more about Children’s Specialized Hospital, call 888-244-5373.

# NEW WAYS TO FIGHT SUBSTANCE USE DISORDERS

AN INNOVATIVE PEER RECOVERY PROGRAM HELPS PEOPLE OPEN A WINDOW TO RECOVERY.

For information about placement into treatment for yourself or a loved one, call the State of New Jersey's IME (Interim Managing Entity) at 844-276-2777.

A hospital patient who has a substance use disorder may feel many things: fear, anger, loneliness, shame. What he or she may not feel is ready to accept help.

"That's where the magic of our Peer Recovery Program comes in," says Connie Greene, MA, CAS, CSW, CPS, Vice President of the RWJBarnabas Health Institute for Prevention and Recovery (IFPR). Peer Recovery Specialists—highly trained individuals who are in long-term recovery from their own substance use disorder—are available 24/7 at participating RWJBarnabas Health Hospitals through the Peer Recovery Program (PRP).

"Recovery Specialists are the best people to assess where this patient is at and how to engage him or her, because they've been in that bed," Greene explains. "That's a great relief for a person who may be isolated and may have exhausted relationships and resources."

For more information about the Institute for Prevention and Recovery, visit [rwjbh.org/preventionandrecovery](http://rwjbh.org/preventionandrecovery).

The goal of a Peer Recovery Specialist—one that often takes some time to achieve—is to get the person to agree to go to the next appropriate level of care, and to help him or her navigate the steps needed to maintain recovery.

## NEW TACTICS FOR AN EPIDEMIC

In 2016 and 2017 alone, approximately 2,200 New Jerseyans died of overdoses. As part of the effort to reverse the tide, the IFPR staff has, with the help of state funding, gone from about 30 employees to about 160 over the past two and a half years.

The Peer Recovery Program is one of the innovative tactics the IFPR is using in its fight. In the past, patients who were brought to an emergency room with an overdose were given NARCAN to reverse the overdose, then sent on their way. Since 2016, participating RWJBarnabas Health hospitals have integrated Peer Recovery Specialists into ER teams, where they follow up with the patient and provide continuing support.



CONNIE GREENE, VP, IFPR

Now the Peer Recovery Program is functioning on medical floors as well. "Federal statistics tell us that between 9 and 10 percent of the population has a substance use disorder," Greene says. "So if you follow the data, up to 10 percent of the patients in our hospitals are affected."

Formerly, when a patient who was in the hospital for a different reason presented signs of a substance use disorder, physicians were often at a loss about how to proceed. Now Peer Recovery Specialists can be called in to come to the bedside, offer an intervention and guide the patient to the care that's needed.

"It's a very, very difficult job, but there is also the joy of holding someone's hand as they move into recovery," Greene says. Of the 5,500 people the Peer Recovery Program has interacted with, 85 percent have accepted recovery support services.

The blessings ripple out to family members as well. "Every morning when I see the whites of my son's eyes and hear him say 'Hi, Mom,' I want to cry, and then call you to thank you," one mother wrote to the Recovery Specialist who worked with her son. "May peace be with you on our journey as well—one day at a time."



# KEEP YOUR KIDNEYS HEALTHY

## TAME HYPERTENSION BEFORE KIDNEY DAMAGE OCCURS.

**T**he heart beats steadily, creating pressure that moves blood through the body to nourish tissues and organs.

But when that pressure is too high—a result of obesity, genetics or other factors—the walls of blood vessels are damaged. They get weaker, narrower or harder.

Over time, the force of high blood pressure, or hypertension, can impair the arteries' ability to deliver sufficient blood to the

kidneys. In turn, kidneys can't fully perform their critical function of removing waste products and excess fluid from the body.

"There is a clear relationship between hypertension and renal failure that many



M. ISABEL ROBERTI, MD, PHD



RICHARD MANN, MD, MS

## THE NATION'S #1 LIVING DONOR KIDNEY TRANSPLANT PROGRAM

Humans need only one kidney, so a person with two healthy kidneys can donate one of them to a desperately ill patient. Many people do just that, thanks to the world-class Living Donor Kidney Transplant program at Saint Barnabas Medical Center, which is ranked number one in the country. To learn more about kidney transplants or the Living Donor Institute at SBMC, visit [www.rwjbh.org/sbmcckidneytransplant](http://www.rwjbh.org/sbmcckidneytransplant).



At right: The care team from the Renal and Pancreas Transplant Division at Saint Barnabas Medical Center.

To learn more about kidney transplant services at RWJBarnabas Health, visit [www.rwjbh.org/kidneytransplant](http://www.rwjbh.org/kidneytransplant).

people may not be aware of," says Richard Mann, MD, MS, Medical Director of the Renal and Pancreas Transplant Program at RWJUH New Brunswick and Rutgers Robert Wood Johnson Medical School. "In many cases, hypertension plays a role in the progression of injury to the kidney and, in some cases, hypertension is the primary cause of renal injury."

### A COMMON PROBLEM

More than half of the U.S. population over age 20 has high blood pressure, and an estimated 3.5 percent of children and teens have it as well. "For a long time, pediatric hypertension was an under-recognized problem," says M. Isabel Roberti, MD, PhD, Director of the Children's Kidney Center at Saint Barnabas Medical Center. "Now the recommendation is for blood pressure screenings to begin as early as age 3."

A "silent" disease, hypertension can go undetected without regular screening. "The earlier we catch hypertension, the better," says Dr. Roberti. "Damage due to high blood pressure in children and teens is reversible, and action now can prevent their having kidney problems as adults." The good news is that, in both children and adults, hypertension is treatable with a multi-pronged approach including medication, diet changes and exercise.

# A New **State of Health** for **NEW JERSEY**, for the **NATION**, for the **WORLD**

## **RWJBarnabas Health and Rutgers University launch the state's largest academic health system**

With the partnership of RWJBarnabas Health and Rutgers University, it is the dawn of an incredible new era in health.

Jointly, RWJBarnabas Health and Rutgers University will operate a world-class academic health system dedicated to high-quality patient care, life changing research and clinical training of tomorrow's health care workforce. By partnering, these two higher education and health care industry leaders will improve access to care and reduce health disparities in New Jersey and across the nation.

At the center of all of this are the patients who will benefit from increased access to a world-class academic health system, clinical innovation, groundbreaking research and newly developed centers of excellence, as well as more providers that families need to manage their health and wellness.







Left, and top right, Robert V. Gamba, Chairman of the Foundation's Board of Trustees. He is shown at the 2018 Golf Invitational Featuring Former New York Giant David Diehl and Friends, held annually to support Clara Maass Medical Center. David Diehl, below, was the event host.



# GIVING AND GETTING BACK

## FOUNDATION DONATIONS HELP NEIGHBORS FLOURISH.

Robert V. Gamba has enjoyed a long relationship with Clara Maass Medical Center. The local businessman was born at the hospital's original Newark location in 1950, and his two daughters were born at the Belleville site.

So when he got a call to help out in 1985, it wasn't a hard decision. "I was a young man, busy building a business and a family, and my friend, Bob Gaccione, who was on the board of the Clara Maass Medical Center Foundation, asked me if I'd like to join them. I said, 'Absolutely!' And here I am, all these years later."

Now, as chairman of the Foundation's Board of Trustees, Gamba oversees the fundraising arm of the hospital, providing support for much-needed capital improvements and other initiatives. "We're doing a huge expansion of our operating rooms, increasing the number of operating rooms from seven to 11," says Gamba. "And we've nearly doubled the size of our Emergency Department, which treats about

80,000 patients a year, providing additional dedicated pediatric and psychiatric treatment rooms."

The Foundation raises money for the hospital in a variety of ways, including major gifts, direct mail, grants, special events and planned giving programs. Notable are two significant annual events that Gamba proudly co-chairs—a golf invitational and a food-and-wine tasting. "I have it easy. I just oversee things and have a good time," says Gamba with a laugh. "It really is the combined effort of our outstanding board members and our Foundation's hard-working, dedicated staff that makes these events the successes that they are. Even if you don't play golf, we have a wonderful event, A Tasteful Experience, and everyone

loves to enjoy delicious food. It's a very fun, festive night—not a lot of speeches! Just a great time for everyone who comes."

What inspires Gamba to give so much of himself, and to ask others to do the same? For him, the answer lies in the community. "This is a community hospital, in the truest sense of the word," he says. "Not only do you experience top-rated care with state-of-the-art technology and facilities, but you're being treated with sincerity, warmth and compassion."

"Everyone is so friendly there—it really is like one big family. In fact, a lot of the doctors on staff were born and raised in the area, which is not common, so they're thoroughly dedicated to the hospital and the patients. I always tell people, when you give to Clara Maass, your dollars are immediately reinvested to help you, your family, friends and neighbors."

To learn more about the Clara Maass Medical Center Foundation, call 973-450-2277 or visit us at [www.claramaassfoundation.org](http://www.claramaassfoundation.org).



# Removing Barriers to **BREAST CARE**

## **A GRANT TO IMPROVE ACCESS TO BREAST SCREENINGS FOR WOMEN OF COLOR**

Over the past several decades, improved screenings and treatments have enabled more women to survive breast cancer. However, the mortality rate among black women with breast cancer remains surprisingly high. In fact, African-American women are 40 percent more likely to die from breast cancer than white women, according to the Susan G. Komen Foundation.

Similarly, Latina women are diagnosed with breast cancer at more advanced stages than white women, a statistic that may be due to lower mammography rates and delays in follow-up care after an abnormal mammogram.

Numbers like these have led Hannah Kotch, MD, a board-certified and fellowship-trained Diagnostic Radiologist at Clara Maass Medical Center (CMMC) and a team of breast cancer experts to ramp up their efforts to increase access to quality care for all women. The team, led by Dr. Kotch, was awarded a \$27,448 grant from Komen North Jersey—an affiliate of the Susan G.

Komen Foundation—to fund outreach, breast care

RWJBarnabas Health and Clara Maass Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-designated Comprehensive Cancer Center—bring a world-class team of researchers and specialists to fight alongside you, providing close-to-home access to the latest treatments and clinical trials.

To schedule a mammogram, contact the Radiology Department at 973-450-2045, or visit [rwjbh.org/mammo](http://rwjbh.org/mammo).

and treatment for African-American and Latina women between the ages of 40 and 59 in Essex, Hudson and Bergen counties. “This grant contributes to our overarching goal of reducing barriers to quality cancer care experienced by uninsured and underinsured women,” says Tina Jacobs, Director of Community Health at Komen North Jersey.

### WHERE DISPARITIES BEGIN

The breast cancer disparities are due to a combination of influences. “There are external factors, such as access to insurance and healthcare, along with a delayed diagnosis and access to therapies,” Dr. Kotch says. “This free program specifically targets African-American and Latina women who have little to no health insurance coverage.”

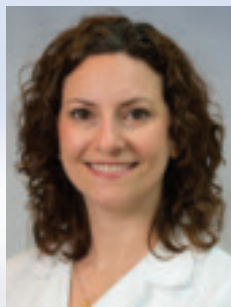
Language can also be a barrier, as can time constraints. “Stretched thin with work and family obligations, women of color may struggle to find time to focus on themselves,” Dr. Kotch says.

Other factors that prevent women from getting checked, according to the Susan G. Komen Foundation, may include lack of a nearby mammography center, lack of transportation, lack of sick leave, or fear of bad news or pain from the procedure.

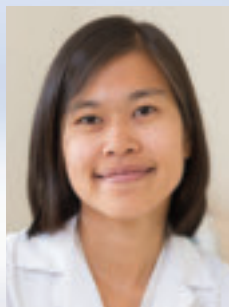
Internal factors, such as tumor biology, may also be present, says Dr. Kotch. “African-American women have higher rates of aggressive breast tumors, which may be diagnosed at a later stage,” she notes. “While we can’t change tumor biology, we can help women get in the door for more consistent screening exams to improve early detection.”

### EMPHASIS ON EARLY DETECTION

The earlier that breast cancer is seen, the higher the chance of survival. In addition,



HANNAH KOTCH, MD



RACHELLE LEONG, MD

## WHAT TO KNOW ABOUT THE FREE MAMMOGRAM PROGRAM

You may be eligible for a free mammogram if:

- You are African-American or Latina.
- You are between the ages of 40 and 59.
- You live in Bergen, Essex or Hudson counties.
- You have no insurance, or not enough insurance.
- You have a prescription from a physician. (If you don’t know how to get a prescription, call the Radiology Department at the number below for more information.)

**Spread the word about this important free program to your family and friends! For more information, call the Clara Maass Medical Center Radiology Department at 973-450-2045.**



early, small cancers are more easily treated with less aggressive therapies. Screening tests are the only way to find breast cancer before it causes signs or symptoms.

The Komen grant program at CMMC will provide screening mammograms and if needed, diagnostic mammograms and biopsies to 150 women through March 2019. The grant supports imaging costs or co-pays, as well as the cost of a patient navigator to guide patients through the process of scheduling and receiving treatment and follow-up care.

“For those who require treatment and support beyond screening, we have a highly trained team of experts who can tailor an appropriate treatment plan,” Dr. Kotch says, though she notes that statistically only one to two cancer diagnoses are anticipated among the 150 women to be screened.

If a patient needs a surgeon, a referral will be made. “From start to finish, we use a team approach to help a patient navigate the breast health process,” says Rachelle Leong, MD, a board-certified, fellowship-trained breast surgeon and a member of the Barnabas Health Medical Group.

When a woman receives a first mammogram in the Radiology Department at CMMC, Dr. Kotch and her team will discuss yearly exams. “Our goal is to establish care and keep women on a routine schedule,” Dr. Kotch says. “Mammograms should begin at age 40 and continue every year. We hope women will feel comfortable and cared for here and will spread the word to friends and family.”

## BREAST CANCER MYTHS—BUSTED

**MYTH: If I don’t have a family history of breast cancer, I won’t get it.**

**FACT:** Only about 25 percent of individuals diagnosed with breast cancer have a family history of the disease. All women should have breast screenings, regardless of genetics.

**MYTH: Mammograms aren’t needed after menopause.**

**FACT:** Two of three invasive breast cancers are detected in women over age 55. Yearly screenings are recommended for all women, from age 40 on.

**MYTH: A breast lump is always cancer.**

**FACT:** Most lumps are benign conditions, such as a cyst or fibroadenoma. Some fluctuate with a woman’s menstrual cycle. Get all lumps checked by a doctor.

**MYTH: A small lump is less likely to be cancerous than a large one.**

**FACT:** Size doesn’t determine a cancer diagnosis. See your doctor if you’re concerned about a new or changed lump—even if it’s tiny.

**MYTH: If I’m diagnosed with breast cancer, I must have surgery immediately.**

**FACT:** Prompt workup and testing are important, but there is time to weigh your options and even to get a second opinion. Make sure you have information about the treatment options that are best for you.



# CARE FOR AGING EYES

WHILE SOME EYE CHANGES ARE INEVITABLE WITH AGE, TREATMENTS AND REGULAR CHECKUPS CAN HELP AVOID SERIOUS COMPLICATIONS.

If you're over 40, you may have noticed vision changes—maybe you need reading glasses or you find you're more sensitive to glare, eye dryness and tearing. While bothersome, those conditions won't hamper your independence—but there are age-related eye diseases that could. The best way to avoid potentially serious complications? See your ophthalmologist for regular, comprehensive eye exams. He or she will check for vision changes and eye diseases and can help you find solutions for challenges like those outlined here.

## VISION CHANGES

- **Presbyopia** is the term for a loss of the ability to see objects that are near. Reading glasses are usually the first solution. Your doctor may also suggest other non-surgical and surgical options.
- **Cataracts**—cloudy areas that form in the lens, making vision blurry—are common in older people. According to the National Eye Institute (NEI), more than half of Americans have a cataract or have had cataract surgery by age 80. Surgery removes the cloudy lens and replaces it with an artificial lens.

To contact the Eye Surgery Center, please call 973-450-2000.

“We have a wide range of intraocular lens implants to taper vision to individual lifestyles,” says Michael Landolfi, DO, Chief of the Department of Ophthalmology and the Eye Surgery Center at Clara Maass Medical Center.

## EYE DISEASES

- **Age-related Macular Degeneration (AMD)** affects more than two million Americans, according to the NEI, making it the leading cause of vision loss among people age 50 and older. AMD is often detected in an eye exam, before symptoms become noticeable. Medical treatments can help, halt or limit AMD-related vision loss.
- **Diabetic Retinopathy**, an eye condition that affects the retinas of people with diabetes, can be slowed by keeping blood glucose and blood pressure in check. Laser surgery and new types of medications can end or slow its progression.



MICHAEL LANDOLFI, DO

- **Glaucoma** is a group of eye diseases that cause damage to the optic nerve. Early detection through a dilated eye exam is important. Many surgical and non-surgical treatment options,

including new drugs, can reduce glaucoma-related vision loss.

- **Retinal Detachment** occurs when the retina separates from the wall of the eye. Treatment may include laser surgery or freezing, or targeted surgical procedures.

If you've detected a change in your vision or eye health, consult your ophthalmologist for an early diagnosis and treatment. “I recommend yearly eye exams for my patients,” says Dr. Landolfi.



## SPECTRUM OF EYE CARE

At the Eye Surgery Center at Clara Maass Medical Center, board-certified ophthalmologists and surgeons treat the full range of eye conditions with a spectrum of services, from routine eye exams to the latest surgical techniques. “The Eye Surgery Center is the preferred surgical site of many of the region's most renowned eye surgeons,” says Dr. Landolfi. “Over 50 eye surgeons in private practices choose our comprehensive outpatient surgical suite for their patients because of our exceptional staff and technologically advanced equipment.”



## PARTNERSHIP POWER

As part of its LGBTQ outreach, Clara Maass Medical Center frequently partners with Bloomfield Pride, a volunteer education and advocacy community group. “CMMC reached out to us about a year ago to learn about the work we do and tell us more about their initiatives,” says Tobias Wilson, co-chair of Bloomfield Pride. “Since then, we’ve partnered on a number of events, including a fundraiser for the RAINN Foundation, which helps homeless LGBTQ adolescents, a community dinner and conversation about addiction in the LGBTQ community, and our annual pride picnic. The power of a community hospital openly identifying itself as an LGBTQ-friendly medical center cannot be overstated.” To learn more, visit [bloomfieldpride.org](http://bloomfieldpride.org).

To learn about programs and services at CMMC for the LGBTQ community, contact us at 1-888-724-7123.

# SERVING THE LGBTQ COMMUNITY

## CLARA MAASS MEDICAL CENTER PROVIDES A WELCOMING ENVIRONMENT, AND MORE.

For its dedication to serving the LGBTQ (Lesbian, Gay, Bisexual, Transgender, Questioning) community, CMMC has been designated a Leader in LGBTQ Healthcare Equality by the Human Rights Campaign Foundation. Here, Michael Straker, MD, Director of Obstetrics and Gynecology at CMMC, talks about the importance of providing “culturally competent” care to LGBTQ patients:

### What’s been the key to your success in engaging the LGBTQ community?

A genuine focus on acceptance. Our goal is to provide a safe and comfortable environment to receive quality care without fear of judgment.

### How do you and your staff approach care for LGBTQ patients?

We always want to be certain we are providing compassionate care, but we’re also able to address some of the

misconceptions that some folks may have. For example, lesbian women may be less likely to look for preventive services for cervical cancer due to their perceived lower risk. However, their risk is very similar to that of heterosexual women.

### What are some of the challenges or issues for LGBTQ patients?

Feeling disenfranchised and not having a voice in the medical field, they may not go to a doctor when recommended or they may skip care altogether. So, we just want to make sure that we can address any issue

that they may have—even things like obesity—that may not fall into the purview specifically for OB/GYN care. We always strive to work holistically and focus on the person, not only on organ systems.



MICHAEL STRAKER, MD

# HOW TO NIP DIABETES IN THE BUD

**YOU CAN PREVENT DIABETES—AND GET EXPERT MEDICAL HELP IN DOING SO (FOR FREE) AT CLARA MAASS MEDICAL CENTER.**

**D**iabetes can cause severe harm to heart, kidneys and eye function—and in the past 20 years, the rate of diabetes diagnosis has tripled. In fact, 28 million American adults are now diabetic, while another 84 million (about one in every three of us) are prediabetic.

The good news is that the onset of diabetes can be significantly delayed and even prevented through some simple but key lifestyle changes.

## WHAT IS PREDIABETES?

Prediabetes means your blood glucose (sugar) is higher than normal, but not at the level to qualify for diabetes—yet. Left unchecked, it will likely develop into actual diabetes. People with prediabetes are also at higher risk for heart attack and stroke.

## WHO IS AT RISK FOR PREDIABETES?

People at greatest risk fall into one or more of these categories:

- Are overweight
- Age 45 years or older
- Have a parent or sibling with type 2 diabetes
- Are physically active fewer than three times a week
- Have had gestational diabetes (diabetes during pregnancy) or given birth to a baby who weighed more than nine pounds
- Are African American, Hispanic/Latino American, American Indian,

## ARE YOU READY TO BEAT PREDIABETES?

For more information on CMMC's free Diabetes Prevention Program, contact Dorothy Szast, RD, CDE, Diabetes Education Coordinator, at 973-450-2126.



or Alaska Native (some Pacific Islanders and Asian Americans are also at higher risk)

About 90% of all people with prediabetes don't even know they have it.

### WHERE CAN I GET HELP?

Beginning in the spring of 2019, Clara Maass Medical Center (CMMC) will begin offering a diabetes prevention course to help people succeed in making those changes.

Adopted from a new, research-based diabetes prevention program created by the Centers for Disease Control (CDC), CMMC's course will meet for 16 sessions over the course of year. Patients can enroll in the program, at no cost, either by a referral from their physician or after completing a CDC screening test. "We're offering you complimentary sessions with a registered dietitian nutritionist and a certified diabetes educator who are going to give you all of the insight, skills and strategies to lose weight and maintain a healthy weight, with the added benefit of preventing diabetes,"

says Elizabeth Hanna, CMMC's Clinical Nutrition Manager. "We know that the number-one factor most related to diabetes prevention is weight loss. Even a 5 to 7 percent weight loss can be effective in preventing diabetes. Research has shown that people with prediabetes who take part in a structured lifestyle change program can cut their risk of type 2 diabetes by 58 percent. For people over 60 years old, the figure is 71 percent."

Weight management will be the program's most appealing aspect, Hanna says. "We're not just monitoring blood sugars, we're talking about losing weight," she says. "We want to help our participants learn how to live a lifestyle that's sustainable with sound, evidence-based approaches that aren't a quick fix or fad, and develop a healthy relationship with food."

### LEARN MORE ABOUT PREVENTING DIABETES

To find more about ways to prevent and control diabetes, visit [rwjbh.org/claramaass](http://rwjbh.org/claramaass).

## TEST YOUR DIABETES RISK

This test was created by the national Centers for Disease Control. For each of the following questions, add the number of points given for each "Yes" answer. All "No" answers are 0 points.

WRITE YOUR SCORE IN THE BOX



1. Are you a woman who has had a baby weighing more than 9 pounds at birth?

(1 point)

2. Do you have a sister or brother with diabetes?

(1 point)

3. Do you have a parent with diabetes?

(1 point)

4. Find your height on the chart below. Do you weigh as much as or more than the weight listed for your height?

(5 points)

5. Are you younger than 65 years of age and get little or no exercise in a typical day?

(5 points)

6. Are you between 45 and 64 years of age?

(5 points)

7. Are you 65 years of age or older?

(9 points)

TOTAL YOUR SCORE




### IF YOUR TOTAL SCORE IS...

**3 TO 8 POINTS:** This means your risk is probably low for having prediabetes now. Keep your risk low. If you're overweight, lose weight. Be active most days, and don't use tobacco. Eat low-fat meals with fruits, vegetables and whole-grain foods. If you have high cholesterol or high blood pressure, talk to your healthcare provider about your risk for type 2 diabetes.

**9 OR MORE POINTS:** This means your risk is high for having prediabetes now. Please make an appointment with your healthcare provider soon.

### AT-RISK WEIGHT CHART

Height	Weight (lbs)	Height	Weight (lbs)	Height	Weight (lbs)
4'10"	129	5'4"	157	5'10"	188
4'11"	133	5'5"	162	5'11"	193
5'0"	138	5'6"	167	6'0"	199
5'1"	143	5'7"	172	6'1"	204
5'2"	147	5'8"	177	6'2"	210
5'3"	152	5'9"	182	6'3"	216

# She gave everything she had to nursing, including her life.

## Let's celebrate Clara Louise Maass, New Jersey Hall of Fame Class of 2017.

After serving overseas as a nurse for the U.S. Army – even contracting dengue fever herself – Clara Maass answered the call for volunteers in Havana, where dozens were dying of yellow fever daily. While there, Maass was the only woman to participate in an experiment to determine the root of the yellow fever epidemic. It was her sacrifice that proved the *Aedes Aegypti* mosquito to be the cause, put an end to those experiments and led to life-saving treatment. Today, RWJBarnabas Health proudly honors Clara Maass as she is inducted into the New Jersey Hall of Fame. Her courageous spirit lives on at Clara Maass Medical Center in Belleville, New Jersey. Learn more at [rwjbh.org/claramaass](http://rwjbh.org/claramaass)

**Clara Maass**  
**Medical Center**

**RWJBarnabas**  
**HEALTH**

Let's be healthy together.

