

A Publication of
**MONMOUTH MEDICAL CENTER
SOUTHERN CAMPUS**

Winter 2022

healthy *together*

**WHEN YOUR FEET
NEED SPECIAL CARE**

**THE DOCTOR
EVERYONE
MUST SEE**

**YOU NEED SURGERY:
NOW WHAT?**



**PROTECT YOUR HEART
THIS WINTER**

MESSAGES FROM LEADERSHIP



“At RWJBarnabas Health, we enter the new year with renewed strength. We’ve taken the challenges of the pandemic and used them to find ways to better serve our communities, patients and staff. Additionally, we are expanding telehealth, offering advanced genomic testing for infants and pushing toward breakthroughs in pediatric cancer research, with a focus and dedication to creating a healthier 2022 for all.”

BARRY H. OSTROWSKY

PRESIDENT AND CHIEF EXECUTIVE OFFICER, RWJBARNABAS HEALTH



“Monmouth Medical Center Southern Campus is proud that despite the challenges of delivering care during the COVID-19 pandemic, we were able to achieve Emergency Department patient satisfaction scores ranking in the top 15 percent nationwide and a recent certification as an

Advanced Primary Stroke Center. We welcome the new year with a renewed commitment to providing our community with the highest-quality care for your emergent health needs, as well as innovative community health programs to help everyone live healthier, more fulfilling lives.”

ERIC CARNEY

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

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Southern Campus**

**RWJBarnabas
HEALTH**

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HEALTH NEWS



Ocean County Sheriff Michael Mastronardy (left, at left) presents the Outstanding Instructor Award to Joe Cuffari and (right) James Romer.

AWARDED FOR INSTRUCTING POLICE ON MENTAL HEALTH

During the October 8 Ocean County Police Academy Basic Class #110 graduation ceremony hosted by the Ocean County Sheriff's Department, Monmouth Medical Center Southern Campus (MMCSC) Psychiatric Emergency Screening Services (PESS) Assistant Vice President Joe Cuffari, LPC, and Mental Health Clinician James Romer, MA, were recognized as Outstanding Instructors.

Joe and Jim have been teaching police recruits for many years in areas of mental health, screening law, situational awareness and the mental health system, as explained in an MMCSC video at www.rwjbh.org/mmcscpress.

The partnership and training with the Police Academy is crucial for both new recruits and established officers to be trained on techniques to keep people in crisis and officers safe. PESS provides screening and treatment for people in need of emergency psychiatric assistance and partners with local police departments to provide screeners who accompany officers when responding to incidents in the community and help to de-escalate highly emotional situations.



CERTIFICATE OF DISTINCTION GIVEN FOR STROKE CARE

Monmouth Medical Center Southern Campus is proud of its recent Certificate of Distinction for Advanced Certification as a Primary Stroke Center from the Joint Commission. The Joint

Commission is an independent, not-for-profit national body that oversees the safety and quality of healthcare and other services provided in certified organizations, and confers the certification based on a review of compliance with national standards, clinical guidelines and outcomes of care.

healthy *together* contents

WINTER 2022



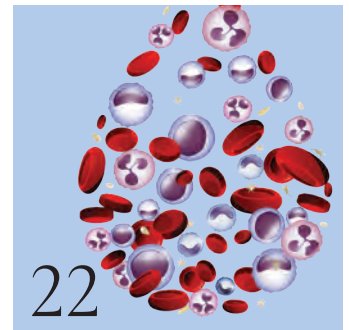
20



6



18



22



8

- 2. WELCOME LETTER.** A community update from our CEOs.
- 4. YOU NEED SURGERY: NOW WHAT?** Top tips for finding the right surgeon and having a successful procedure.
- 6. WHEN YOUR FEET NEED SPECIAL CARE.** These steps can help ward off wounds due to diabetes.
- 8. WHERE SHOPPING MEETS SUPPORT.** Find bargains and raise funds for MMCS programs and services at a new thrift store.



16

- 9. FAST ANSWERS FOR VERY SICK BABIES.** Advanced genomic testing is here.

- 10. HOW COVID-19 IS RESHAPING HEALTHCARE.** Innovation and resilience in the face of a crisis.
- 12. CHILDHOOD CANCER: FINDING THE BEST CARE.** World-class pediatric hematology/oncology services, close to home.
- 14. HEADING OFF WINTER HEART ATTACKS.** Read this before you shovel snow.
- 16. SPECIAL NEEDS, SPECIAL TREATMENT.** Children's Specialized Hospital expands access to care.

- 17. CONNECTED TO THE COMMUNITY.** Partnerships help improve the well-being of MMCS neighbors.
- 18. BREAST SURGERY: WHAT WOMEN SHOULD KNOW.** Knowledge is power in the fight against breast cancer.
- 20. 8 REASONS TO SEE A PRIMARY CARE PHYSICIAN.** Regular visits can help keep you healthier.
- 22. TEAMING UP AGAINST BLOOD DISORDERS.** A new hematologist/oncologist provides expertise in cancerous and noncancerous blood problems.

Monmouth Medical Southern Campus

Members of MMCS Surgical Services include (from left) general surgeon William P. Boyan, Jr., MD; Eduard Krishtul, MD, Charge Anesthesiologist; Jarrod P. Kaufman, MD, Chair of Surgery; Warren Flores, BSN, RN, CNOR, OR Charge Nurse; ophthalmic surgeon Jonathan M. Barofsky, MD; ophthalmic surgeon Daniel B. Roth, MD; Carmen Lugo, CRCST, CHL, CER, OR Manager; and Geraldine Smith, RN, MSN, CNOR, Administrative Director, Patient Care Services.

YOU NEED SURGERY: NOW WHAT?

TOP TIPS FOR FINDING THE RIGHT SURGEON AND HAVING A SUCCESSFUL PROCEDURE.

Learning you need surgery can feel daunting. But millions of people undergo successful procedures every year, and you can improve your odds of doing the same if you follow steps linked to better results, or outcomes.

“The first step is to choose the right surgeon,” says Jarrod P. Kaufman, MD, Chair of Surgery at Monmouth Medical Center Southern Campus (MMCS). In part, that means finding a doctor who makes you feel comfortable, answers your questions and treats you with compassion and respect. “But it’s also important to choose a surgeon with experience and training in the procedure you’re having,” Dr. Kaufman says. “Surgeons who do the same procedure regularly tend to have superior outcomes, which include better quality

of life, less pain and fewer complications such as infections or readmission to the hospital within 30 days.”

Here’s how to find a skilled and experienced surgeon for whatever procedure you might face.

- **Get professional opinions.** Start by asking your primary care physician or other doctors for a recommendation. If they give a general answer like “Everyone in that practice is good,” ask what they think distinguishes different surgeons—and who they would choose if they had to undergo the procedure you have in mind.

- **Survey your social network.** Ask people you trust for suggestions. Check if friends or relatives have had the procedure you need—or ask if they know anyone who did. Ask those who underwent your surgery what led them to their surgeon

and if they would use that doctor again. Find out what they liked (or didn’t like) about the doctor, the surgical team and the practice. Have them share what surprised them or what they learned about preparing for the procedure and recovery.

- **Ask your surgeon for numbers.** During your initial appointment, ask how often a candidate surgeon has performed the operation to treat your particular problem. No set numbers generally define a high volume of procedures, but the discussion should shed light on the doctor’s experience.

- **Check your surgeon’s credentials.** In addition to getting background on aspects of a surgeon’s training such as where the surgeon went to medical school and did his or her residency, find out whether the surgeon completed a fellowship—



SMART QUESTIONS FOR SELECTING A SURGEON

Take a list of questions to your initial appointment with each surgeon you consider. Asking the same questions of multiple candidates can provide insight into how doctors' methods, thinking and experience might differ. Start with these:

- How many times in the last year have you done this procedure?
- How do your outcomes, including complications, compare to national averages?
- What are the chances this procedure will work for me?
- Why do you recommend this procedure for me?
- Do you use minimally invasive surgery for this?
- Is there any other way to treat my problem?
- What will happen if I don't have the procedure?
- Do I have time to think about other options or get another opinion?
- Which hospital(s) are you affiliated with?

additional training in a specialized area such as joint replacement or thoracic (chest) surgery. Also learn whether the surgeon is board-certified. This indicates that a surgeon is an expert who has completed additional education and passed a rigorous test in their particular medical specialty or subspecialty.

• **Get a second opinion.** Consider speaking with another surgeon to get thoughts on your case, especially if you're having a new or complicated procedure. They may have different opinions on specific approaches to your surgery or even whether you need it.

"Once you've done your research, think about what you've learned, and then choose the surgeon you trust the most to do the procedure you need," Dr. Kaufman says.

SURGICAL EXPERTISE AT MMCSC

Monmouth Medical Center Southern Campus (MMCSC) has a highly skilled and experienced surgical team that offers expertise in a variety of surgeries, including those involving these types of procedures:

- **BREAST:** lumpectomy, mastectomy, reconstruction and cosmetic augmentation or reduction
- **DIGESTIVE:** esophagus, stomach, small intestine, large intestine and rectum
- **GENERAL:** wide range of soft tissues including skin, head and neck, limbs, vascular and endocrine systems and abdominal organs such as the colon, liver and gallbladder
- **ONCOLOGIC:** various types of cancer in addition to breast cancer
- **OPHTHALMIC:** eyes and vision
- **ORTHOPEDIC:** bones, joints, ligaments, muscles, nerves and tendons
- **PLASTIC:** skin, head and face, extremities, breasts and trunk, exterior reproductive organs
- **PODIATRIC:** feet and ankles
- **UROLOGIC:** urinary system and related organs

In addition, the hospital's board-certified, multispecialty surgeons—experts in their fields—are ready to provide emergent surgeries such as a gallbladder or appendix removal.

"Our growing team includes seasoned veterans who are performing minimally invasive surgeries as well as complex procedures," says Jarrod P. Kaufman, MD, Chair of Surgery at MMCSC. "We also have a state-of-the-art operating room, which enables us to provide the highest level of surgical care using the latest technology and equipment."



6 STEPS FOR SAFER SURGERY

- 1 Eat healthy foods in the weeks before your operation.
- 2 If you smoke, quit. Smoking increases risks for post-op problems such as breathing difficulties, infection and heart attack.
- 3 If you have diabetes, get blood sugar under control, which will help you heal and reduce the risk of infection.
- 4 Make sure your doctor knows all the medications you take, including over-the-counter drugs, supplements and herbal remedies.
- 5 Talk with your surgeon about strategies to control pain after surgery, which may entail multiple approaches.
- 6 Be as fit and active as possible before surgery. The better you function before surgery, the more likely you are to retain a higher level of function after—a concept known as prehabilitation.

Source: American College of Surgeons

To find a surgeon at MMCSC, call **888.724.7123** or visit **www.rwjbh.org/doctors**.



Stanley Lefland (center) received advanced wound care for amputated toes from (left) Johnny R. Larsen, DO, FACOEP, Medical Director of Hyperbaric Medicine, and (right) Glenn M. Aufseeser, DPM, who advocates preventive measures that can minimize amputation risks in people with diabetes.



WHEN YOUR FEET NEED SPECIAL CARE

FOOT CARE MEASURES LIKE THESE CAN BE CRITICAL IF YOU HAVE DIABETES.

Amputation is a serious risk for people with diabetes. In fact, the chance of facing this traumatic complication is 28 times higher in people who have the condition—marked by high or poorly controlled blood sugar—than it is in people who don't.

“Many patients we see have a diabetic foot ulcer,” says Glenn M. Aufseeser, DPM, a podiatrist at Monmouth Medical Center Southern Campus (MMCSC). “This type of nonhealing wound is the leading cause of hospitalization and amputation in people with diabetes.”

Wounds such as diabetic foot ulcers occur because high blood sugar can impair immunity and cause circulation problems that often reduce blood flow to the legs and feet. Diminished immunity and circulation both can hinder healing, trigger infections and cause damage to underlying structures and bones. In some cases, damage can become so severe that it's necessary to amputate a toe, foot or leg.

Stanley Lefland of Lakewood can attest to that. “My diabetes progressed to the point that two of my toes needed to be amputated,” says the volunteer EMT with Jackson Township EMS. He received surgery and treatment at MMCSC's Wound Care Center, including hyperbaric oxygen therapy. This therapy administers pure oxygen under high pressure to help blood carry more oxygen to tissues and promote healing. “My care was, in one word, excellent,” Stanley says.

REDUCING RISKS

But you may be able to curb the risk of needing drastic or specialized treatment. “It's much easier to treat a minor foot problem before it becomes serious,” says Dr. Aufseeser.



WHEN TO CALL THE WOUND CARE CENTER

Preventing foot problems and catching them early can go a long way toward helping you avoid amputation, but it's also important to know when to seek medical care.

Contact your doctor if you develop any of these potential signs of trouble:

- Ingrown toenails
- Blisters
- Plantar warts on the soles of your feet (flesh-colored bumps with dark specks)
- Athlete's foot
- Swelling
- Redness
- Discolored skin
- Warmth in one area
- Pain
- Foul odor
- An ulcer or sore that doesn't heal

Key measures to prevent or minimize complications of diabetes include controlling your blood sugar, exercising daily and taking your medications as directed.

It's also critical to take good care of your feet, especially while at home during cold winter months when people often become less active. Steps like these can help foster healthier feet.

► **Inspect your feet:** Check feet daily for sores, redness, blisters, calluses, ingrown toenails, numbness, open sores or any temperature changes or hair loss. If you can't see the bottom of your feet easily, use a mirror to get a better view.

► **Wash your feet:** Use a mild soap and warm (not hot) water. Dry your feet well, especially between your toes. Apply a nonalcoholic lotion to keep skin soft and prevent cracks that can allow bacteria to penetrate skin and potentially trigger an infection. Don't put lotion between toes as it can cause blisters, and don't soak your feet because it can dry your skin and leave it more prone to cracking.

► **Trim toenails with care:** Cut toenails straight across with straight clippers, and file down sharp edges. If desired, dust feet with a foot powder such as talcum or cornstarch.

► **Wear socks:** Choose soft, seamless, padded socks to avoid sores and blisters. Make sure they don't pinch or rub. Socks should be loose enough

around the top that they don't cut off circulation. Choose white socks made of fabrics that pull sweat away from your skin such as cotton or special acrylic. Avoid nylon.

► **Pay attention to shoes:** Change shoes at least once daily to sidestep pressure points. Check shoes regularly for pebbles or sharp objects, and make sure they have enough cushioning for the heel, arch and ball of your foot. Select shoes with enough room for your toes, and if your feet are two different sizes, buy the larger shoes. Don't wear sandals or flip-flops, and don't go barefoot even at home.

► **Leave calluses alone:** Don't attempt to remove calluses or foot lesions by yourself. Avoid using nail files, nail clippers or scissors, and don't apply chemical wart removers. Instead, see a podiatrist for expert care.

► **Quit smoking:** Smoking constricts your blood vessels and limits oxygen to your extremities. Poor circulation is a large contributing factor to amputation risk.

"Following these steps and seeking care when needed can improve your long-term mobility, improve your quality of life and potentially increase your life expectancy," Dr. Aufseeser says.

DO YOU HAVE NERVE DAMAGE?

Not being able to feel pain sounds like a good thing. But lack of pain due to nerve damage from diabetes makes it hard to detect foot sores, wounds or injuries. About half of people with diabetes develop some form of nerve damage, which can occur in any part of the body but most often affects feet and other extremities. Be especially alert to nerve damage if you:



Have hard-to-manage blood sugar levels



Have had diabetes a long time, especially if blood sugar levels often soar beyond your target



Are older than 40



Have high blood pressure



Have high cholesterol

Source: Centers for Disease Control and Prevention

To learn more about treatment at MMCSC's Wound Care Center or to make an appointment, call **732.886.4100**.



Hidden Treasures



At the Hidden Treasures Thrift Shop ribbon-cutting ceremony are, from left, Sandra Lazzaro, Director, Ocean County Business Development and Tourism; Teri Kubiak, DNP, NE-BC, Vice President of Community Affairs; Toms River Mayor Maurice Hill; Denice Gaffney, Vice President, MMCSC Foundation; Eric Carney, President and CEO, Monmouth Medical Center and Monmouth Medical Center Southern Campus; and Olga Zayas-Ortiz, Hidden Treasures Volunteer Manager.

WHERE SHOPPING MEETS SUPPORT

NEWLY OPENED VOLUNTEER-RUN THRIFT STORE RAISES FUNDS FOR MMCSC.

You can shop for bargains and support Monmouth Medical Center Southern Campus (MMCSC) at the same time at the newly opened Hidden Treasures Thrift Shop. The shop is run exclusively by volunteers, and all donations raise funds that directly support programs and services at MMCSC. The MMCSC Foundation recently celebrated a grand opening ribbon-cutting ceremony at Hidden Treasures, which is located at the Tri-City Plaza, 2360 Route 9, Toms River.

“We welcomed Toms River officials today, including Mayor Maurice Hill and Sandra Lazzaro, Ocean County Business Development and Tourism, to commemorate this wonderful store,” said Eric Carney, President and CEO

of MMCSC and Monmouth Medical Center, at the grand opening. “Our new thrift shop allows residents of Toms River and the surrounding community to purchase new and gently used items, not only benefiting our hospital programs and services, but providing much-needed goods to our community at an affordable price. We are so thankful to all of our volunteers who donate their time to staff the shop and the community members who donate their items to benefit our patients.”

Hidden Treasures Thrift Shop is open 10 a.m. to 4 p.m. Monday through Saturday and one Sunday per month. Volunteers are always needed. For more information, call the MMCSC Foundation at 732.886.4438 or visit www.monmouthsouthgiving.org.



WOMEN EXPRESS GRATITUDE FOR CANCER CARE

“Grateful” is defined as “feeling or showing an appreciation of kindness, being thankful for benefits received, expressing gratitude.”

Speaking to the theme of “Grateful,” four cancer survivors now share their experiences and stories on a special website. Their accounts highlight how exceptional, trusted cancer care begins at Monmouth Medical Center Southern Campus (MMCSC) in partnership with Rutgers Cancer Institute of New Jersey, the state’s only National Cancer Institute-Designated Comprehensive Cancer Center.

MMCSC brings a whole team to fight alongside you, providing close-to-home access to cutting-edge cancer treatment options and exceptional cancer specialists. What sets us apart? Each patient is treated like family at MMCSC. Visit www.rwjbh.org/grateful for more information and to watch the moving stories of grateful cancer survivors. Become a part of our family by supporting these essential programs and services that MMCSC provides to the community each and every day.

To support the Monmouth Medical Center Southern Campus Foundation, visit www.monmouthsouthgiving.org.





FAST ANSWERS FOR VERY SICK BABIES

ADVANCED GENOMIC TESTING RESULTS ALLOW DOCTORS TO BEGIN TARGETED TREATMENT WITHIN DAYS.

Baby girl Frankie was born early—at 35 weeks—but all seemed well, except for some minor health complications that kept her in the Neonatal Intensive Care Unit (NICU) at Cooperman Barnabas Medical Center (CBMC).

However, within a few days of birth, Frankie had developed severe blisters on her feet and was losing skin.



KAMTORN VANGVANICHYAKORN, MD

Even routine screenings now posed a risk, and the baby was vulnerable to life-threatening bacteria entering her body. Her family was afraid to

hold her. A diagnosis was needed, right away.

Not long ago, genetic testing for infants could test just a few genes at a time, and results took weeks or months to come back. But thanks to a collaboration between Rady Children's Institute for Genomic Medicine and RWJBarnabas Health (RWJBH), Level III and Level IV NICUs in the RWJBH system can offer rapid Whole Genome Sequencing (rWGS). For medically urgent cases, preliminary diagnoses are available in three to five days.

Using a blood sample, rWGS can scan a child's entire genetic makeup for thousands of anomalies. The test results provide vital information that leads to individualized care and fewer costly, invasive procedures.

"Rapid genome sequencing is a game changer," says Kamtorn Vangvanichyakorn, MD, Director of Neonatology at CBMC. "It allows us to provide critical answers and targeted treatment at a time when the therapeutic window is often narrow."

"A SENSE OF RELIEF"

The testing revealed that Frankie has a type of epidermolysis bullosa (EB), a rare group of diseases that are most often caused by a genetic mutation. Frankie's mother, Jeri Berinato, knew that her own mother lived with a severe form of EB, leading to constant blistering and pain, difficulty swallowing, loss of her fingernails and dental problems.

"As soon as we received the results, I felt a huge sense of relief," Jeri says. "Not knowing what was wrong with my beautiful newborn baby was the worst feeling I've ever had. Now I know that, with proper care from the beginning, Frankie will have a much better quality of life than my mom has."

In addition to CBMC, rWGS is available to critically ill infants at Bristol-Myers Squibb Children's Hospital at Robert Wood Johnson University Hospital; the Unterberg Children's Hospital at Monmouth Medical Center; Children's Hospital of New Jersey at Newark Beth Israel Medical Center; and Jersey City Medical Center.

The use of rWGS at RWJBH came about through a long-standing partnership between Rady Children's Hospital in San Diego, the parent organization of Rady Children's Institute for Genomic Medicine, and Children's Specialized Hospital, an RWJBH facility.

"We're proud to be the only health system in New Jersey to partner with Rady Children's to offer rapid genetic testing," says William Faverzani, Senior Vice President of Children's Services at RWJBH. "With this test, our physicians have access to cutting-edge technology, enabling them to intervene quickly to improve the lives of our tiniest patients and their loved ones."

To learn more about rapid Whole Genome Sequencing at RWJBarnabas Health, visit www.rwjbh.org/pediatricgeneticstesting.



HOW COVID-19 IS RESHAPING HEALTHCARE

A CRISIS HAS LED TO SOME BIG CHANGES FOR THE BETTER.

COVID-19 created challenges that healthcare providers had never experienced in their careers. But the pandemic, while taking a toll on providers and patients alike, has also



ANDY ANDERSON, MD



JOHN BONAMO, MD

enabled the discovery of deep reserves of resilience and innovation. “Many of the changes we’re seeing in healthcare,” says John Bonamo, MD, Chief Medical and Quality Officer at RWJBarnabas Health, “are good things that came out of a terrible situation.” Here are six examples:

1 The rise of telehealth.

The technology for video healthcare visits has existed for decades, but providers as well as patients resisted virtual care—until the onset of

COVID-19 and social distancing.

“Before the pandemic, we were doing some virtual urgent care visits, but not routinely doing scheduled visits,” says Andy Anderson, MD, President and CEO, Combined Medical Group of RWJBarnabas Health and

Rutgers Health. “However, at the peak of the pandemic we were doing 10,000 scheduled visits weekly, and even today we continue to do thousands each week.”

The increased





2 Increased awareness of preventing the spread of disease. In response to the pandemic, healthcare providers have redoubled their efforts to sanitize spaces and even filter the air, and the use of hand sanitizer and disinfectant wipes has become commonplace.

“We’ve always been committed to infection control through our system-wide journey to become a high reliability organization,” says Dr. Bonamo. “We amplified those principles to keep our facilities even safer, such as using new ventilation techniques, employing UV-C lights to clean rooms, paying continued attention to visitation policies and more.”



3 Enhanced teamwork. “At the peak of the pandemic, the needs were so great that our people began working together much more collaboratively,” says Dr. Bonamo.

“Instead of staying in their own lane and handing off a patient or a procedure to a specialist, providers worked together—respiratory therapists teamed with nurses, primary care doctors worked in intensive care units at the elbow of intensivists, and so on. We learned how professionals can be ‘skilled up’ and trained to help in a crisis, and that has broken down levels of hierarchy and increased esprit de corps.”



4 An emphasis on mental well-being. “Mental health has become a bigger issue due to the pandemic. People are afraid of becoming ill, they may have greater financial burdens and they’re missing social interaction,” says Dr. Anderson. “Our behavioral health providers have been very busy.”

All kinds of healthcare providers are tuning in to their patients’ state of mind. “As doctors, we realize the importance of reaching out to people and asking them how they’ve been doing during the

pandemic,” he says. “Everybody has a story, and it’s important for us to take the time to listen and, if necessary, become an advocate or a resource for the patient.”

That kind of outreach is equally important for people who work in healthcare, Dr. Anderson says: “In the RWJBarnabas Health Medical Group, we set aside time each week to text or call people we work with to see if they’re doing OK, and provide help or a note of encouragement as needed.”



5 A brighter spotlight on healthcare disparities. “At RWJBarnabas Health, we’ve had an ongoing and important system-wide effort in regard to social justice and anti-racism,” says Dr. Bonamo. “However, the

disparity in the rates of COVID-19 sickness and death among people of color was so blatant that it brought many things to the surface and made us, as well as the healthcare industry as a whole, take a closer look. We’ve realized that saying ‘we treat everybody the same’ isn’t enough because some populations have many more resources than others.” To learn more about RWJBarnabas Health’s Ending Racism Together initiative, visit www.rwjbh.org/endingracism.



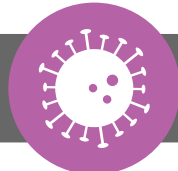
6 A new flexibility. “Healthcare is intensely regulated, and because of that we have a tendency to be very prescriptive about what we can do and how we do it,” says Dr.

Bonamo. “The COVID-19 need was so intense that we had to learn to be more flexible. For example, medical-surgical floors were turned into ICUs and we learned, OK, it may not be the ICU we would have built, but we can make this work. A lot of the old regulations were lifted during COVID-19, which enabled us to be flexible, but some of what we had been doing was just a result of old habits. Now we’ve expanded our horizons and have become much more nimble.”

demand led to technology upgrades, he says, such as making it easier to have visits that include multiple attendees—patient, family members, other providers or an interpreter if needed.

“Telemedicine has opened up access for patients, who can stay in a home environment to get the healthcare they need, whether it’s acute, chronic or preventive, and that will continue,” Dr. Anderson says. “We’re moving toward a good balance of in-person and remote appointments so patients can receive care more efficiently and effectively.”

For resources and information about COVID-19, visit www.rwjbh.org/covid19.



CHILDHOOD CANCER: FINDING THE BEST CARE

WORLD-CLASS PEDIATRIC
HEMATOLOGY/ONCOLOGY
SERVICES ARE CLOSE TO
HOME FOR NEW JERSEYANS.

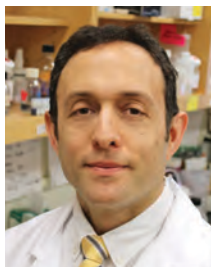


JODI CRANDELL PHOTOGRAPHY



RWJBarnabas Health and Rutgers Cancer Institute of New Jersey, the state's only NCI-Designated Comprehensive Cancer Center, provide close-to-home access to the latest treatment options. For more information, call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

“Cancer doesn’t travel well—especially cancer in children,” says Peter Cole, MD, Chief of the Division of Pediatric Hematology/



PETER COLE, MD

Oncology at Rutgers Cancer Institute, the state’s only National Cancer Institute-Designated Comprehensive Cancer Center. “New Jersey families dealing with a

diagnosis as significant as cancer shouldn’t have to leave their neighborhood and support systems to travel to another state for treatment.”

The Pediatric Cancer Center at Rutgers Cancer Institute partners with RWJBarnabas Health (RWJBH) facilities throughout the state to provide the most advanced treatments for children with cancer and blood disorders.

“I tell my friends and family and anyone who asks that whenever you get an unexpected diagnosis, it’s always good to get a second opinion,” Dr. Cole says.

◀ The \$10 million in state funding was championed by Grace Eline, a 12-year-old survivor of brain cancer and a childhood cancer awareness advocate, and her mother, Aubrey Eline, in collaboration with the American Childhood Cancer Organization. Grace was treated at Rutgers Cancer Institute and Children's Hospital of New Jersey at Newark Beth Israel Medical Center.

“But when you have the option to get cutting-edge care close to home, where you have access to your support system, you should do it. At Rutgers Cancer Institute and RWJBarnabas Health, your child will get the highest level of expertise and treatment, right here in New Jersey.”

The pediatric hematology/oncology team takes a multidisciplinary approach to providing the most advanced treatments for pediatric cancer and blood disorders, such as complex surgical techniques, precision medicine, immunotherapy and innovative radiation therapy procedures, including the state's only hospital-based proton therapy center. In addition, as New Jersey's only NCI-Designated Comprehensive Cancer Center, Rutgers Cancer Institute offers access to cutting-edge clinical trials and cellular therapies that may not be available at other programs.

A HOLISTIC APPROACH

The specialists at Rutgers Cancer Institute and RWJBH know that, in addition to treating the body, it's important to pay close attention to the emotional and social challenges of the patient and family. “A diagnosis of cancer turns a family's life upside down, so we have a robust psychosocial support team to address the needs not just of the patient, but of parents and siblings as well,” says Dr. Cole. That team includes psychiatrists, psychologists, counselors, social workers, nutritionists and educators.

“We're committed to keeping kids on top of their studies,” says Dr. Cole. “At Rutgers Cancer Institute, we have a full-time teacher on staff in the building on school days. I'll often sit with our patients and do math problems with them, though I suspect I may enjoy that much more than they do,” he says with a laugh.

He recalls a teenage patient who had acute lymphoblastic leukemia, the most common cancer in children but also one of the most curable. “He had to spend the first month of treatment in the hospital, away from his support network of friends and coaches,” says Dr. Cole. “Some of the side effects of his treatment, such as vomiting, were



CENTERS FOR EXCEPTIONAL CARE

RWJBarnabas Health and Rutgers Cancer Institute of New Jersey partner to provide world-class care to New Jersey cancer patients. Specialists from the Pediatric Cancer Center at Rutgers Cancer Institute work with experts to provide care at the following RWJBarnabas Health facilities:

- Bristol-Myers Squibb Children's Hospital at Robert Wood Johnson University Hospital, New Brunswick, under the direction of Peter Cole, MD, Chief, Division of Pediatric Hematology/Oncology
- The Valerie Fund Children's Center for Cancer and Blood Disorders at Children's Hospital of New Jersey at Newark Beth Israel Medical Center, under the direction of Teena Bhatla, MD, Director, Pediatric Hematology/Oncology
- The Valerie Fund Children's Center for Cancer and Blood Disorders at the Unterberg Children's Hospital at Monmouth Medical Center, Long Branch, under the direction of Richard Drachtman, MD, Section Chief, Clinical Pediatric Hematology/Oncology

Children with cancer or blood disorders are also seen for consultations at Cooperman Barnabas Medical Center in Livingston.

miserable, and he was embarrassed to lose his hair. He was depressed, but he received the support he needed from our psychosocial team.

“I'm happy to report that he's doing much better now. He's back in school on a modified schedule and if he needs any continued support from our team as he fully reenters his routine, we'll be there for him.”



AN INFUSION OF FUNDS FOR RESEARCH

Survival rates for children with cancer have improved significantly in the past 50 years, but pediatric cancer remains the leading cause of death from disease among children. It is among the least funded areas of cancer research.

Advocates cheered when a \$10 million appropriation to support pediatric cancer research at Rutgers Cancer Institute was included in the New Jersey 2022 state budget.

“The funding allows us to expand our ongoing efforts. One of our areas of focus is research in children that will help reduce acute side effects of treatment and the risk of it resulting in long-term organ damage,” explains Peter Cole, MD, Chief of the Division of Pediatric Hematology/Oncology and Embrace Kids Foundation Endowed Chair at Rutgers Cancer Institute, who is also Director, Pediatric Hematology, Oncology and Cellular Therapies at Bristol-Myers Squibb Children's Hospital and Professor of Pediatrics at Rutgers Robert Wood Johnson Medical School. Dr. Cole's laboratory is also supported by the Hugs for Brady Foundation.

“Another area of focus is bringing innovative treatment modalities to children with cancer and blood disorders,” Dr. Cole says, “including cellular therapies like CAR T-cell therapy, blood and marrow transplants and immunotherapies, which use the patient's own immune cells to fight cancer.”

A man wearing a grey knit beanie, a white puffer jacket with a fur-lined hood, and dark gloves is shoveling snow. He is smiling and looking towards the camera. The background shows a snowy residential street with a house and trees.

HEADING OFF WINTER HEART ATTACKS

READ THIS BEFORE YOU SHOVEL SNOW.

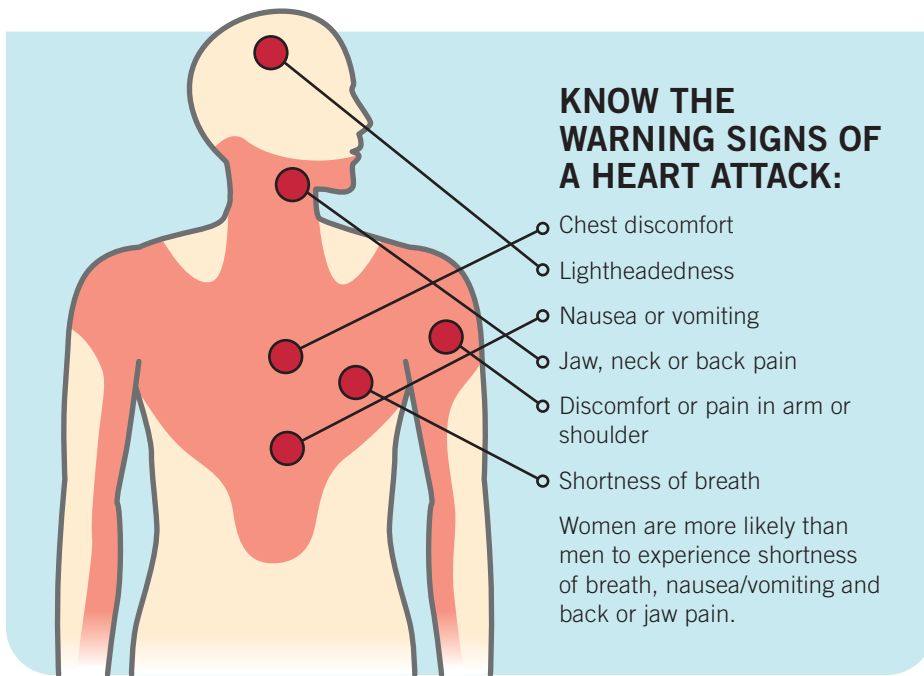
Winter is prime time for heart attacks, as research studies show and doctors know all too well. “It’s expected in the hospital community that we’ll see a bump in the number of heart attacks coming in during the winter season, especially around the holidays and during the first couple of months of the year,” says Isaac Tawfik, MD, Chief of Cardiology at Monmouth Medical Center and a member of RWJBarnabas Health Medical Group.

“It’s been theorized that if your core temperature is lower because you’re outside and not really bundled up, the body’s natural response is for arteries to vasoconstrict, or to narrow,” Dr. Tawfik explains. “If somebody already has a narrowing or blockage in the artery, it’s going to interfere with normal blood flow, and that’s the definition of a heart attack.”



ISAAC TAWFIK, MD

Ruptured plaque is another main culprit for heart attacks in cold weather, he says. “Any exertional work that’s heavy and not gradual, like



KNOW THE WARNING SIGNS OF A HEART ATTACK:

- Chest discomfort
- Lightheadedness
- Nausea or vomiting
- Jaw, neck or back pain
- Discomfort or pain in arm or shoulder
- Shortness of breath

Women are more likely than men to experience shortness of breath, nausea/vomiting and back or jaw pain.

shoveling snow, puts stress on coronary arteries. If those arteries have plaque, it may crack or rupture, which can lead to a whole cascade of platelet aggregation and other inflammatory mediators that eventually lead to a heart attack.”

In winter, middle-aged patients—people in their 40s, 50s, 60s—may be more prone to heart attacks than seniors. “They feel that they’re healthy enough for shoveling snow and other types of outdoor exertion, so they don’t warm up first and may not wear warm enough clothing,” Dr. Tawfik says.

Unlike older patients, they may be unaware of their limitations, he notes, and may not understand the possible consequences of existing conditions, such as hypertension, uncontrolled diabetes or tobacco use. The risk of a heart attack increases with every additional risk factor a person has.

“All of this is not to say that shoveling snow is automatically going to give you a heart attack,” says Dr. Tawfik. “What we are saying is that if you have known heart disease, or one or more risk factors for heart disease, you should think carefully before going out to shovel snow.”

SAFEGUARD YOUR HEART

How can people protect themselves against heart attacks in cold weather? “Number one, make sure you speak to your doctor so that any risk factors you have are addressed—if you have hypertension, that your blood pressure is well controlled, if you are diabetic, that your blood sugar is under control, if you are a smoker, that you are working on a cessation plan,” says Dr. Tawfik.

Stay warm when you’re outside and take frequent breaks to go inside and assess how you feel. “If you’re breathing in cold air, it cools your chest a little bit. You don’t necessarily have the burning in the chest that can be a symptom until you go inside,” he says. “Do the work in short intervals so you’re not outside for hours at a time.”

Be aware of anything different in the way you feel. “A heart attack symptom doesn’t have to be chest pain, because not everybody gets that. If you’re nauseous, or if you’re more fatigued or breathless than you expected to be, those can be red flags,” he says.

Dr. Tawfik shows his patients images that illustrate their cardiovascular condition—an X-ray, an ultrasound, a



HOW COLD WEATHER AFFECTS THE HEART

- Low temperatures cause blood vessels and arteries to narrow.
- Blood flow is restricted and the delivery of oxygen to the heart is reduced.
- The heart must pump harder to circulate blood through the constricted blood vessels.
- As a result, blood pressure and heart rate increase.
- A sudden spike in blood pressure, especially when combined with exertion such as shoveling, can lead to heart attack or stroke.
- Narrowing of or stress on coronary arteries may lead to plaque rupture and blood clots that block blood flow to the heart.
- Hypothermia—when body temperature drops below 95 degrees Fahrenheit—affects the workings of the heart, nervous system and other organs.

CT scan—as a means of helping them grasp their risks. “If I have a patient who’s 60 years old and I can tell him his risk for heart disease in the next 10 years is X versus someone who didn’t have those risk factors, they tend to be more compliant,” he says.

Dr. Tawfik advises his patients to consult their primary care physician or cardiologist before undertaking any high-effort physical activity in cold weather. “It’s like driving your car and putting a seat belt on,” he says. “It’s always best to err on the side of safety.”

Whoever your heart beats for, our hearts beat for you. To connect with a top cardiovascular specialist at RWJBarnabas Health, call **888.724.7123** or visit **www.rwjbh.org/heart**.





SPECIAL NEEDS, SPECIAL TREATMENT

NEW LOCATIONS PROVIDE MORE WAYS TO HELP CHILDREN FULFILL THEIR POTENTIAL.

For more than a century, children or adolescents who face special health challenges—from chronic illnesses to complex physical disabilities to developmental or behavioral issues—have been able to turn to Children’s Specialized Hospital (CSH) for inpatient and outpatient care.

Since its 1892 origin as a “summer haven” in Westfield for city children, CSH continued to grow until it became the largest provider of pediatric rehabilitation services in the United States, with locations throughout New Jersey.

Now, in response to an increasing number of outpatient visits and the rising rates of emotional, developmental and behavioral disorders in children and adolescents, CSH is expanding access to the highest level of care. Four new CSH locations, each with state-of-the-art facilities and located close to major highways and bus



routes, have opened or soon will open:
WEST ORANGE: CSH is now managing the Pediatric Rehabilitation Services of its affiliate hospital, Cooperman Barnabas Medical Center, at 375 Mt. Pleasant Avenue.

UNION: All outpatient services offered at CSH’s Mountainside and Warren locations have transitioned to this new, advanced facility at 2840 Morris Avenue.

EATONTOWN: In the spring, Monmouth Medical Center and CSH will open RWJBarnabas Health Family Care & Wellness, located at the Monmouth Mall.

TOMS RIVER: Next year, a brand-new, 80,000-square-foot facility on Route 37 will replace the current CSH Toms River locations. The clinical space will be shared with RWJBarnabas Health Children’s Services and Community Medical Center, which will provide an ambulatory surgery

Children with a wide range of needs receive individualized care at CSH locations throughout New Jersey.

center, imaging, preadmission testing, primary care and orthopedics.

All CSH facilities offer the most advanced technology and a full suite of therapy and physician services, including developmental and behavioral pediatrics, neurology, special needs primary care, physiatry, psychiatry, audiology, neuropsychology, neurorehabilitation, nutrition, occupational therapy, physical therapy, psychology, and speech and language therapy.

“Our vision is a world where all children can reach their full potential,” says Matthew B. McDonald III, MD, President and CEO, CSH. “In order to make that vision a reality, we must continually enhance access to our innovative and individualized therapies and medical treatments. These new sites not only serve as additional access points for our current patients and families, but as an introduction to new communities of patients and families who may need our services.”

For more information about Children’s Specialized Hospital, call **888.244.5373** or visit **www.rwjbh.org/childrensspecialized**.

At Children’s Specialized Hospital, we provide world-class care for children and young adults who face special health challenges across the state of New Jersey and beyond. We treat everything from chronic illnesses and complex physical disabilities, like brain and spinal cord injuries, to a full scope of developmental, behavioral and mental health concerns. We have convenient locations throughout the state: Bayonne, Clifton, East Brunswick, Eatontown, Egg Harbor Township, Hamilton, Jersey City, New Brunswick, Newark, Somerset, Toms River, Union and West Orange.



CONNECTED TO THE COMMUNITY

PARTNERSHIPS HELP MMCSC IMPROVE THE WELL-BEING OF COMMUNITY NEIGHBORS.

Working with local partners is a key way that Community Health and Social Impact and Community Investment teams at Monmouth Medical Center Southern Campus (MMCSC) foster stronger, healthier neighborhoods and residents. Recent efforts include initiatives like these.

‘BETTER TOGETHER’

Representatives from MMCSC were on hand as the Greater Bethel Church of God in Christ in Lakewood hosted a ribbon-cutting ceremony to commemorate a new multipurpose center annexed to the church. “This new resource center on church grounds provides a wonderful place to offer programs for the community,” says Jean McKinney, Regional Director, Community Health and Social Impact and Community Investment at MMCSC.

The MMCSC Community Health and Social Impact team has worked closely with Pastor John D. Jones and church leaders to provide health screenings, prevention information, food drives and other critical resources to neighbors in need.

The ceremony highlighted an event called Unity in the Community: We’re Better Together, which also included distribution of backpacks full of school supplies, along with blood pressure education. Backpacks and their contents were provided through an MMCSC donation drive that collected supplies from employees. More than 100 backpacks were given to children at the Unity in the Community event, which was also attended by members of the Lakewood Police and Fire Departments.

TAKING ACTION AGAINST HUNGER

Food insecurity has only become worse with strains imposed by the pandemic and natural disasters such as flooding from remnants of Hurricane Ida. That made supporting local food pantries an even greater priority for Social Impact and Community Investment (SICI) teams at MMCSC and Monmouth Medical Center (MMC) during Hunger

Kelly DeLeon, Manager, MMCSC Community Health and Social Impact and Community Investment, and Eric Carney, President and CEO, MMC and MMCSC (back row, fifth and sixth from left), join Pastor John D. Jones and his wife, Dorothea (front, center), along with other community partners and members to celebrate the opening of a new multipurpose center at the Greater Bethel Church of God in Christ in Lakewood.

Action Month in September.

Partnering with nonprofit food distributor The Common Market, SICI teams donated boxes of fresh produce, eggs, yogurt and bread to food pantries in communities served by RWJBarnabas Health. Pantries receiving donations were St. Brigid’s Food Pantry at St. James Episcopal Church, Long Branch; Ezekiel’s Wheels, West Long Branch; Catholic Charities, Lakewood; and Greater Bethel Church of God in Christ.

On Tuesdays for three weeks, MMCSC and MMC received and distributed a total of 300 boxes packed with food items including fresh produce such as green peppers, zucchini, corn, potatoes, cherry tomatoes and radishes. Food donations were made possible through grants received at the corporate level through SICI, with distribution coordinated at the local level by SICI site leads McKinney and Kelly DeLeon, Manager, Community Health and Social Impact and Community Investment.

For a complete list of Community Health Education programs, visit www.rwjbh.org/monmouthsouth and click on the calendar of events.



BREAST SURGERY: WHAT EVERY WOMAN SHOULD KNOW

**KNOWLEDGE IS POWER
IN THE FIGHT AGAINST
BREAST CANCER.**

It can be unsettling—even overwhelming—to be diagnosed with breast cancer and deal with treatment, which often includes breast surgery. But knowledge can help dispel fears. “It’s useful to know your options and why certain breast surgeries may or may not be done,” says Stephanie



STEPHANIE NG, MD

Ng, MD, a breast surgeon at Monmouth Medical Center Southern Campus (MMCSC) and a member of the RWJBarnabas Health Medical Group.

Some surgeries remove cancer or tissue, while others restore the breast after cancer is taken out. The procedures you get may be determined by factors such as the nature of your cancer and your medical history. “The more you know, the better you’ll be able to talk with your doctor about which choices are right for you,” Dr. Ng says.

Such conversations often begin with questions like these.

What are the different kinds of breast surgery?

Breast-conserving surgery (BCS) removes only the part of the breast containing cancer and some normal tissue around it but not the breast itself. (These

procedures are also called lumpectomy, quadrantectomy, partial mastectomy, or segmental mastectomy.) How much breast is removed depends on a variety of factors, including the tumor’s size and location.

Mastectomy removes the entire breast containing cancer. Various types of mastectomy may remove other tissue near the breast as well, such as lymph nodes. Some women get a double mastectomy in which the surgeon removes both breasts.

How do I know which surgery is best?

If your cancer is in its early stages, you may be able to choose between



such women tend to be similar with each surgery.

Why remove lymph nodes?

Removing one or more lymph nodes either during surgery to remove breast cancer or as a separate procedure helps doctors determine the cancer's stage and if the cancer has spread to other parts of the body. In a procedure called sentinel lymph node biopsy, the surgeon removes just one or a few lymph nodes where cancer is most likely to spread first. If no cancer is found, there may be no need to remove more lymph nodes. Keeping lymph node removal to a minimum helps avoid side effects such as arm swelling called lymphedema. If cancer cells are found, more lymph nodes may be removed.


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

What happens after breast surgery?

Many women can undergo breast reconstruction. After mastectomy, you may be able to have the breast mound rebuilt to restore the breast's appearance. After breast-sparing surgery, you may be able to have fat grafted onto the breast to minimize any small skin deformations resulting from surgery. Which of multiple reconstructive surgeries you get is determined by your preferences and medical status. Reconstruction may be done at the same time as surgery or later on. Talk to your doctor before surgery about whether to undergo reconstructive surgery and what type of surgery you'd get so the surgical team can plan an optimal course of treatment.

What if surgery won't help?

If cancer has spread, surgery probably won't cure your breast cancer. But surgery may still help in certain situations. For instance, surgery may help slow the spread of cancer or help prevent or alleviate certain symptoms. Talk to your doctor about the value of having

ARE YOU AT RISK OF BREAST CANCER?

American women have a 1-in-8 chance of developing breast cancer. Will you be one of them? Factors like these can influence risks.

- **Family history:** Risks are higher if you have a first-degree relative (mother, sister, daughter or a similarly close male relative) or multiple family members on either side who have had breast cancer.
- **Breast makeup:** Dense breasts that contain more connective or glandular tissue than fatty tissue are more likely to develop breast cancer and can make cancer less visible on mammograms.
- **Age:** The older you are, the more likely you are to develop breast cancer, especially after age 40, when most breast cancer diagnoses are made.
- **Ethnic background:** Breast cancer is often more aggressive in African American women, who also have lower screening rates, so cancers are more often detected at relatively advanced stages. Certain inherited genetic mutations related to breast cancer are also more common in African Americans as well as Ashkenazi Jews.
- **Reproductive history:** Having your first menstrual period before 12 or starting menopause after 55 both increase your risk for breast cancer because they increase lifetime exposure to estrogen.

BCS and mastectomy. BCS allows you to keep most of your breast but often requires treatment with radiation as well. Getting a mastectomy for an early-stage cancer may allow you to skip radiation. Other factors also come into play, including the type of breast cancer, its size and whether you've previously been treated with radiation. If you're a candidate for both BCS or mastectomy after all factors have been considered, it may come down to personal preference, as outcomes for

breast surgery if you have advanced breast cancer. Also, through MMCSC's partnership with Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-Designated Comprehensive Cancer Center, patients have access to advanced treatment options including clinical trials, many of which are not available elsewhere.

To learn more about breast cancer or make an appointment at the Jacqueline M. Wilentz Breast Center at Monmouth Medical Center Southern Campus, call **732.923.7700**.



Now offering services at Aldrich Primary Care in Howell are (from left) family medicine physician Kerollos Askander, MD; internal medicine physician Mini Balaji, MD; and family medicine physician Iniobong Ukonne, MD.

8

GREAT REASONS TO SEE A PRIMARY CARE PHYSICIAN

REGULAR VISITS TO A BIG-PICTURE DOCTOR CAN HELP KEEP YOU HEALTHIER.

When was the last time you saw—or even had—a primary care physician? Research suggests the number of Americans who regularly see one is dropping. But going to a primary care doctor has important health benefits, according to Mini Balaji, MD, internal medicine physician at Aldrich Primary Care in Howell and a member of RWJBarnabas Health Medical Group.

“A primary care physician typically specializes in a discipline such as family or internal medicine and provides a first point of entry into the healthcare system,” says Dr. Balaji. “It’s important to have a go-to health professional in your corner who can assess and treat a broad variety of conditions.”

Dr. Balaji and her recently arrived

colleagues at Aldrich Primary Care—family medicine physicians and RWJBarnabas Health Medical Group members Kerollos Askander, MD, and Iniobong Ukonne, MD—say regularly seeing a primary care doctor can improve your health for reasons like these:



1 You'll be better off if you get ill.

After just one meeting, your primary care physician will know at least some of your medical history and possibly baseline results from a number of routine screening tests. When something goes wrong, your doctor will know what “normal” looks like for you, which will help in addressing both your

acute and chronic medical problems more effectively.



2 Medications will be managed more effectively.

People who use prescription drugs often take more than one, sometimes prescribed by different doctors. Many take vitamins and supplements as well. A primary care physician can monitor and track all your medications, helping to protect you from drug interactions. Your primary care doctor can also keep records of any changes in dosages that might cause unwanted side effects, and speak with your other doctors to help fine-tune your regimen.



3 You'll receive disease-prevention advice.

Seeking out a primary care physician regularly even when you're feeling fine can help prevent you from becoming seriously ill down the road. From your health profile, your doctor will be able to recommend tests that can assess your chances of developing heart disease, diabetes, cancer and other serious-but-common problems. If your medical history and tests indicate that you're prone to specific illnesses, your primary care physician can suggest healthy lifestyle changes and regular screenings to reduce your risks.



4 Remote consults may be readily available.

Baseline health information your primary care physician collects may allow your doctor to be comfortable treating certain problems over the phone, knowing you can always schedule a follow-up if your symptoms don't improve. Without a primary care doctor, you'll more likely need to take



“A PRIMARY CARE PHYSICIAN TYPICALLY SPECIALIZES IN A DISCIPLINE SUCH AS FAMILY OR INTERNAL MEDICINE AND PROVIDES A FIRST POINT OF ENTRY INTO THE HEALTHCARE SYSTEM.”

Mini Balaji, MD

From left: Kerollos Askander, MD, joins Aldrich Primary Care practice manager Taisha Perez and Iniobong Ukonne, MD, at Howell Day and Green Fair, an event held September 25 at Soldier Memorial Park.



time out of your schedule to visit a medical office.

5 You'll have an easier time finding specialists.

When you need the care of an expert in a certain specialty, your primary care physician can help you find the right person—not only someone with the proper qualifications, but a provider who will mesh well with your personality and care preferences. If you prefer aggressive treatments, for instance, you can communicate this to your primary care physician, who can recommend specialists who align with your approach.



6 You'll get help navigating the ER.

Wondering if you should head to the emergency room? If you have a relationship with a primary care physician, you can touch base with the practice office and get guidance from your doctor, potentially



sparing you a trip. If you do need to seek emergency care, your doctor may be able to call ahead and provide pertinent medical details that could shorten your wait time when appropriate.

7 You'll receive better care overall.

People with primary care physicians tend to receive significantly more high-value healthcare such as flu shots and cancer screenings. They often have better patient experiences and overall access to healthcare as well.



8 You might live longer.

Research suggests that people who live in areas where primary care physicians are readily available on average have longer life spans. But benefiting from their services depends on actually going to your primary care doctor.

A NEW PRIMARY CARE PRACTICE

For people who live in and around Howell, it's now easier than ever to find the perfect primary care physician, thanks to the recently opened Aldrich Primary Care at 4013 Route 9 North in Howell. Next door, patients will find the Jacqueline M. Wilentz Comprehensive Breast Center at Howell, which offers mammography, bone density testing services, genetic counseling and general X-rays. Women who have a primary care visit and need a mammogram can simply walk across the hall to the Center—no appointment is needed.

For more information on Aldrich Primary Care, call **732.835.7914** or visit **www.rwjbh.org/medicalgroup**.





TEAMING UP AGAINST BLOOD DISORDERS

A NEW HEMATOLOGIST/ONCOLOGIST WITH EXPERTISE IN BENIGN AND MALIGNANT BLOOD DISORDERS ENHANCES CARE AT RWJBH SOUTHERN REGION HOSPITALS.

Blood disorders can be complex. Consider blood cancers: Although they may concentrate in sites like the lymph nodes or bone marrow, they affect or develop in cells that can circulate through the body and often involve the immune system. It's the job of a hematologist/oncologist to understand the intricate nature of blood



HUSSAM ELTOUKHY, MD

disorders, find out whether problems are malignant or benign (cancer or noncancer) and treat patients accordingly.

Providing such expertise is the mission of

Hussam Eltoukhy, MD, who recently joined the multidisciplinary team that treats blood cancers and other blood-related disorders at Monmouth Medical Center (MMC), Monmouth Medical Center Southern Campus (MMCSC) and Community Medical Center (CMC). Dr. Eltoukhy also joins the medical staff at Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-Designated Comprehensive Cancer Center.

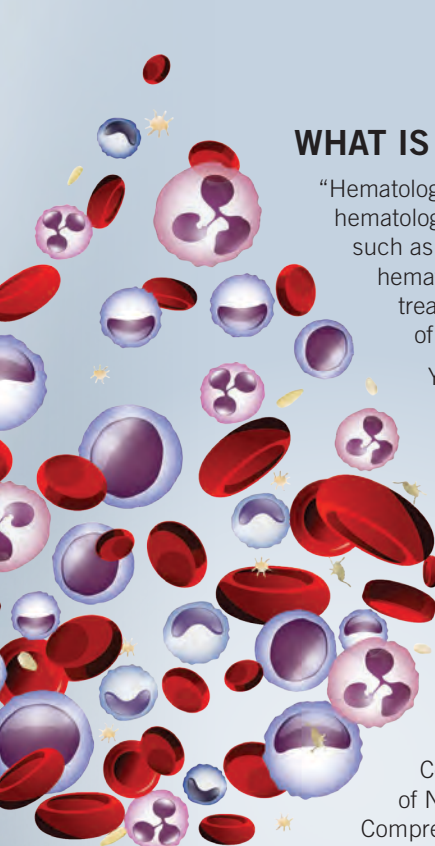
Dr. Eltoukhy's expertise is in benign and malignant blood disorders including acute and chronic leukemia, Hodgkin and non-Hodgkin lymphoma, multiple myeloma, myelodysplasia, myeloproliferative diseases and anemia. "Seeing patients at MMC, MMCSC,

CMC and Rutgers Cancer Institute gives me a unique opportunity to provide patients with close-to-home access to the most comprehensive and advanced care," Dr. Eltoukhy says. The team also includes Seth Cohen, MD, Regional Director of Oncology Services for RWJBarnabas Health's Southern Region.

ADVANCED TREATMENTS

The three hospitals' partnership with Rutgers Cancer Institute gives patients access to the full spectrum of therapeutic procedures and advanced treatment options, many of which are not available elsewhere. These include:

- **Precision medicine:** Treatments are tailored to a patient's specific form of



WHAT IS HEMATOLOGY/ONCOLOGY?

“Hematology” refers to blood. “Oncology” refers to cancer. So hematology/oncology in part refers to cancers of the blood such as leukemia, lymphoma and multiple myeloma. A hematologist/oncologist is a physician who specializes in treating not only these diseases but also a wide range of blood-related problems that are not cancer.

You might be referred to a hematologist/oncologist if a blood test comes back with an abnormality.

For example, you may have unusually high or low levels of certain blood components such as infection-fighting white blood cells, oxygen-carrying red blood cells or clot-inducing platelets. You might also have abnormal plasma, which transports nutrients, antibodies, hormones, waste and a variety of other important substances in blood.

The integrated cancer care model at Monmouth Medical Center, Monmouth Medical Center Southern Campus and Community Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated

Comprehensive Cancer Center—includes New Jersey’s largest network of cancer specialists, comprising nationally and internationally recognized hematologists/oncologists, radiation oncologists, nurses with expertise in blood cancers, nurse navigators and oncology support professionals.

Seeing a hematologist/oncologist can help you get to the bottom of blood-related problems. Whether an abnormality turns out to be cancer or a different kind of blood disorder, a hematologist/oncologist can help.

cancer through measures such as tumor profiling, in which tests determining the cancer’s genetic makeup can guide doctors to the most effective therapies.

- **Clinical trials:** Patients have access to cutting-edge therapies that may be available only at an NCI-Designated Comprehensive Cancer Center, where the necessary expertise, resources and equipment allow advanced research.
- **Immunotherapy:** Therapies enlist and strengthen the power of a patient’s immune system cells and boost their ability to attack a malignancy.
- **CAR T-cell therapy:** Immune system cells called T-cells are taken from a

*

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

patient’s blood, engineered in the lab to attack a specific cancer-cell protein and infused back into the patient. CAR T-cell therapy is especially effective against certain blood cancers. Other advanced cellular therapies are also available.

- **Blood and marrow transplantation:** Procedures replace unhealthy blood or bone marrow (where blood-forming cells are found) with healthier cells from either the patient or a donor.

- **Proton beam and other sophisticated radiation therapies:** These therapies direct high-energy radiation such as X-rays against malignant cells. Proton beam therapy can precisely deliver energy to blood-related tissues such as lymph nodes while avoiding damage to healthy cells.

“I am committed to bringing exceptional care to all my patients and strive to provide the most comprehensive and up-to-date, evidence-based care,” Dr. Eltoukhy says. “I strongly believe in close collaboration with other providers and utilizing all available resources to help achieve the most optimum outcomes, all while respecting my patients’ needs and wishes.”



TREATING A RANGE OF CONDITIONS

Monmouth Medical Center, Monmouth Medical Center Southern Campus and Community Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options for benign and malignant blood disorders such as these:

- **Acute and chronic leukemia:** Cancers that affect blood-forming tissues such as lymph nodes.
- **Hodgkin and non-Hodgkin lymphoma:** Cancers that affect different types of white blood cells called lymphocytes.
- **Multiple myeloma:** Cancers that affect blood plasma.
- **Myelodysplasia:** Cancers that affect bone marrow.
- **Myeloproliferative diseases:** Rare cancers involving overproduction of specific blood cells.
- **Other blood disorders:** Wide-ranging disorders including anemia and clotting or bleeding disorders.

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