

Stronger Together

he past year has been one of unprecedented challenges for our communities and for our healthcare system. The onset and spread of COVID-19 tested our hearts and minds as never before, all against a backdrop of national social, political and economic turmoil.

Each day, we've learned more about this new virus and how to treat it. We've also learned that the pandemic's impact is falling drastically harder on communities already struggling against economic and social disadvantages.

Throughout this crisis, our medical professionals and staff have been compassionate and expert while caring for patients inside our walls, and innovative in creating ways to provide virtual care. They've risen magnificently to the challenge of keeping our facilities safe and sanitized. And many throughout our system have been working hard in a wide range of programs to help our communities stay healthier and to eliminate healthcare disparities.

At RWJUH Rahway, we have donated more than a ton of healthy food, plus supplies, to Rahway Food for Friends food pantry, which provides groceries, hot meals and home delivery to area residents in need.

Because so many of our patients struggle with diabetes, we have partnered with The Gateway Family YMCA to provide free virtual diabetes education and support. We are also providing free virtual and in-person support for people who are grieving; who are caregivers; and who are challenged with substance use disorder, breast cancer, Parkinson's, fibromyalgia and, new for 2021, with lung disease. These groups are a lifeline.

At RWJBarnabas Health, we've learned something else this year: how strong and encouraging the communities we serve are. We can never thank you enough for your ongoing generosity.

While we continue to battle the COVID-19 pandemic together, we want you to be as healthy and strong as you can, and we pledge to do everything possible to help you achieve that goal.

Yours in good health,

BARRY H. OSTROWSKY PRESIDENT & CHIEF EXECUTIVE OFFICER RWJBARNABAS HEALTH



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



HEALTH NEWS





BACK AND **BFTTFR** THAN FVFR

RWJ Rahway Physical Therapy in Scotch Plains has reopened with all-new equipment and a bright, modern look.





has been newly renovated and we've taken every precaution to make sure the environment is clean and safe. We are excited to welcome everyone back through our doors and help patients return to the activities that they love to do," says Physical Therapy Manager Jennifer K. Soares, PT, DPT, CHT.

The center offers physical therapy to address a variety of conditions, including orthopedic and sports injuries, postsurgical conditions, deconditioning, balance deficits, neurologic impairments, the effects of oncologic treatment and much more.

The center is located in the RWJ Rahway Fitness & Wellness Center at 2120 Lamberts Mill Road in Scotch Plains. For an appointment, call 908.389.5400. A physician's prescription is required.

Robert Wood Johnson University Hospital Rahway

Let's be healthy together.

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

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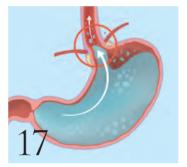
WINTER 2021













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- 8. HEROES HELP IN MANY WAYS. Giving to RWJUH Rahway supports excellent care.



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CAN EATING WELL HELP YOUR ACHING JOINTS?

THERE'S NO MIRACLE DIET, BUT FOODS THAT FIGHT INFLAMMATION CAN PROTECT JOINTS—AND ALSO WARD OFF MANY TYPES OF DISEASE.

rthritis-swelling and tenderness of a joint—is a painful daily experience for many. It can have a variety of causes and a range of treatments, including medication and physical therapy.

Now, emerging data indicates that avoiding inflammatory foods and consuming anti-inflammatory foods has benefits for arthritis sufferers.

What is an "anti-inflammatory" diet? It emphasizes foods we've long known to be beneficial to health: fruits, vegetables, lean proteins, whole grains,

healthy fats. An anti-inflammatory way of eating follows what's long been known as the Mediterranean diet, which is based on the traditional diet of people in areas bordering the Mediterranean Sea. However, an anti-inflammatory diet knows no geographical limits and can work with any culture's cuisine. (See the "Eating to Avoid Inflammation" chart, below.)

An anti-inflammatory diet protects against heart disease, diabetes and many types of cancer. It can help arthritis sufferers (whether they have osteoarthritis or rheumatoid arthritis) because it can

inhibit inflammation that attacks joint tissue and can lead to swelling, cartilage and bone damage and muscle loss.

Focusing on healthy foods also helps with weight management—another key issue for people with arthritis, since extra weight places added stress on joints.

WHAT IS INFLAMMATION?

Inflammation is the immune system's response to an irritant as chemicals from white blood cells enter the blood.

Acute inflammation is short-term an injury to the body and is characterized by one or more of these symptoms: heat, swelling, redness, pain or loss of function.

Chronic inflammation can last for months or years and occurs when the immune system fights against mistake. Diseases affected by nephritis (inflammation of kidneys), and inflammatory bowel diseases like Crohn's disease or ulcerative colitis.

A physician can diagnose a possible inflammatory disease by doing a medical history, physical exam and tests such as X-rays and blood tests.

EATING TO AVOID INFLAMMATION

Focus on whole, unprocessed foods and limit fried and high-fat foods to manage your weight and protect against a wide variety of diseases.

EAT THIS	NOT THAT
Whole-grain bread, cereals and pasta	Refined (processed) carbohydrates such as white bread and pastries
Almonds, hazelnuts, walnuts; vegetables with hummus or bean dip	Processed snacks, such as chips
Fresh fruits and vegetables, at least three times a day, as part of a meal or as a snack	Soda and other sweetened beverages
Poultry, beans or grilled fish	Red meat (burgers, steaks)
Fatty fish, such as salmon, tuna and mackerel	Processed meats (deli meats, hot dogs)
Olive oil	Margarine, shortening and lard
Low-fat dairy products, including cheese and yogurt. Eat eggs in moderation.	High-fat dairy products, whole milk

RWJUH Rahway has outpatient dietitian services to help you manage digestive issues or illnesses. For more information, call 732.499.6210.



THREE DELICIOUS ANTI-INFLAMMATORY RECIPES

"A Mediterranean eating pattern is safe, healthy and has the potential to prevent many chronic health conditions," says Diane Weeks, RDN, MS, CDE, who for over a decade has led healthy cooking classes at the RWJ Rahway Fitness & Wellness Center in Scotch Plains. "It can also be very tasty! Core foods to enjoy every day include whole grains, fruits, vegetables, beans, herbs, spices, nuts and healthy fats such as olive oil. Include twice-weekly servings of fish and seafood, moderate portions of dairy foods and eggs, occasional poultry and infrequent servings of red meats and sweets." The following recipes show just how delicious a nutritious dish can be.



ROASTED CARROT-GINGER SOUP

Makes about 8 cups

INGREDIENTS:

- 1½ pounds carrots, cut into chunks
- ½ pound fennel bulb, cut into
- 1 large onion, cut into chunks
- 3 large cloves garlic
- 2 tablespoons extra-virgin olive oil
- 1 teaspoon freshly grated ginger
- 1 teaspoon kosher salt

DIRECTIONS:

- Preheat oven to 425°F.
- On a large, rimmed, foil-lined baking sheet, toss the carrots, fennel, onion and garlic with the oil. Roast until the vegetables are brown in spots, 15-20 minutes.
- While the vegetables are roasting. bring 6 cups of water to a boil in a large, heavy pot. When the vegetables are done, add them to the pot and simmer, covered, until very tender, 10-12 minutes.
- Remove pot from heat. Puree until smooth with an immersion blender or in small batches in a blender.
- Stir in the ginger and season with up to 1 teaspoon of salt.

SPICED ROASTED CAULIFLOWER

Serves 4

INGREDIENTS:

- 2 tablespoons extra-virgin olive oil
- 1 tablespoon tomato paste
- ½ teaspoon paprika
- ¼ teaspoon ground cumin
- 1/4 teaspoon ground coriander
- Pinch of cayenne pepper
- ¼ teaspoon kosher salt
- 1 head cauliflower. chopped

DIRECTIONS:

- Preheat oven to 450°F.
- In a large bowl, combine the oil, tomato paste, spices and salt.
- Toss the cauliflower in the oil mixture.
- Roast on a foil-lined, rimmed baking sheet until tender, 20-25 minutes.





SPICED CHICKPEAS **AND BUTTERNUT SQUASH**

Serves 2

INGREDIENTS:

- 2 cups butternut squash, chopped
- 1 onion, chopped
- 2 tablespoons olive oil
- 1 15-ounce can no-salt-added chickpeas, drained
- 2 teaspoons curry powder
- ½ teaspoon kosher salt
- 2 tablespoons tahini (a sesame seed
- 2 tablespoons fresh lemon juice
- 1 small clove garlic, minced
- 2–4 cilantro leaves

DIRECTIONS:

- Preheat oven to 450°F.
- On a large sheet pan, toss the squash and onions with 1 tablespoon of the oil. Roast until the squash is tender. 20-25 minutes.
- On a sheet pan, toss the chickpeas with the remaining 1 tablespoon of oil, the curry powder and 1/4 teaspoon of the salt. Roast for 15 minutes.
- Make the sauce: In a medium bowl. whisk together the tahini, lemon juice, garlic, remaining 1/4 teaspoon of salt and 1 teaspoon of water.
- Divide the vegetables and chickpeas into two bowls. Drizzle with the sauce and top with cilantro.

- EXERCISES **ALMOST EVERYBODY** CAN (AND SHOULD) DO

STUCK INDOORS AND SITTING TOO MUCH? THESE SIMPLE, HIGHLY EFFECTIVE CONDITIONING EXERCISES WILL PUT YOU ON THE ROAD TO FITNESS.

xercise can be fun, but it doesn't have to be flashy," ✓ says Drew Seaver, Certified Personal Trainer and Corrective Exercise Specialist at RWJ Rahway Fitness & Wellness Center in Scotch Plains. "Every exercise we do should be straightforward and have a specific goal attached to it. For best results, keep it simple—and keep it consistent."

That's the thinking behind the four exercises Seaver recommends on these

pages, which require no equipment or special skills. These moves have tremendous benefits for people who are staying in more often these days and consequently experiencing aches and lack of flexibility due to a sedentary, screen-heavy lifestyle.

People who meet with personal trainers at the RWJ Rahway Fitness & Wellness Centers in Scotch Plains or Carteret undergo a seven-move functional movement assessment that helps trainers determine which exercises would be most beneficial for that individual, Seaver explains. "Exercises that work on breath and strengthen hip and gluteus maximus muscles are very commonly recommended," he says.

So think of this as a sneak peek at what a personal trainer might recommend for you. Caution: If you have any health issues that might impair your ability to exercise, be sure to consult with your doctor first.



BENEFIT:

Oxygen flow to lower back, hip and abdominal muscles is increased, relieving tightness and tension and enabling them to move better.



BELLY BREATHING

- · Lay on a flat surface, knees bent and feet on the ground.
- Place one hand on your stomach, one on your chest.
- · Slowly breathe in through your stomach, not your chest, then breathe out through your stomach. If you are doing the breath correctly, you will feel your stomach fill up, not your chest. (Use your hand placement as guidance.)
- Do 10 times. Take a quick break, then do two more sets of 10 repetitions.

Note: If you have problems lying on a flat surface, sit on the edge of a sturdy chair, nice and tall, with good posture (see photo above). Place one hand on your stomach and one on your chest and proceed as directed above.



BRIDGING

- Lay flat on your back, knees bent, feet flat on the floor, toes pointed straight and about hip- or shoulder-width apart.
- Squeeze your gluteus maximus muscles (buttocks). Keeping them squeezed, lift hips up into the air. Be careful not to move them too high; shoulders,

knees and hips should be in a straight line.

· Hold for a count of 5 to 10 seconds. Come back down and relax for a second or two. Do a total of 10 repetitions, then two more sets of 10 repetitions.

BENEFIT:

Improves posture and hip strength; helps to keep feet straight when walking so that walking feels easier.



STANDING HIP EXTENSION

- Press both hands against a wall, palms flat, arms extended at shoulder height or a bit lower.
- Stand with good posture (ribs lifted a bit).
- Lift one leg up to approximately a 90-degree angle, driving knee toward chest; hold for 5 to 8 seconds.
- While you are in the "up" position, squeeze the glute muscle of the leg that's on the ground.
- Put leg back down. Do a total of five times, then switch legs.
- Do a total of three sets.

BENEFIT:

Strengthens the gluteus maximus, the meaty posterior muscle that extends the hip, improving posture and back health.

SIT-TO-STAND **EXERCISE**

- Stand facing away from a stable chair, such as a kitchen chair (not a soft, cushioned chair). Feet should be shoulder-width apart and toes pointed straight.
- Push your butt back toward the chair while simultaneously reaching your arms forward.
- Move down slowly until your butt touches the chair, then stand back up slowly. Knees will bend, but put the primary focus on pushing your hip muscles back and reaching your arms forward.
- Do three times. Do a total of 10 repetitions.
- · As muscle strength improves, do squats without using a chair for support.





BENEFIT:

Squatting is a prerequisite to walking well. Strengthens leg and hip muscles. Helps with mobility in getting up from a chair, bed or toilet. Stronger muscles improve knee health and lead to better gait and posture.



TO LEARN MORE

about personal training at the RWJ Fitness & Wellness Center at 60 Cooke Avenue in Carteret, call 732.541.2333 or visit www.rwjfitnesscarteret.com.

For the RWJ Fitness & Wellness Center at 2120 Lamberts Mill Road in Scotch Plains, call 908.232.6100 or visit www.rwjrahwayfitness.com.

HEROES HELP IN MANY WAYS

THE EMPLOYEE CAMPAIGN, A NURSING SCHOLARSHIP AND HOW TO SUPPORT RWITH RAHWAY WHILF YOU SHOP



"I WANT TO GIVE BACK"

Theresa Dobbin, BSN, RN (pictured at left), who has worked at RWJUH Rahway for more than 30 vears, is a longtime supporter of the Employee Campaign, now underway. Why does she give? "I was born here, was a patient here as a child and because of that experience I decided to become a nurse," she says. "I want to give back. We are more than employees, we are a family."

Employees who participate, like Theresa, believe strongly in the mission of our hospital and are willing to support it above and beyond their everyday work. Donations benefit patient

care services, facilities and the Employee Assistance Fund. To support the Employee Campaign, contact the Development Department at 732.499.6135 or Foundation.Rahway@rwjbh.org.

To learn about giving to RWJUH Rahway, call 732.499.6135 or visit www.rahwaygiving.org.



A HAND FOR NURSES IN TRAINING

RWIUH Rahway, a leader in nurse training, has once again announced the annual Livia Kelemen Nursing Scholarship. The scholarship recipients chosen will receive tuition assistance toward their nursing education. Direct any questions regarding the scholarship application to Heather Hays at Heather. Hays@rwjbh.org or call 732.499.6135.

SHOP AND SUPPORT

Did you know that your purchases on Amazon can help improve the healthcare of our community through AmazonSmile? You can designate RWJUH Rahway as your charity of choice and we will receive a donation, at no cost to you. To find out how to enroll in the program, visit www.smile.amazon.com.

Think Forward

Imagine a healthier future. So much can be accomplished with your support. As we begin a new decade, let's think forward and advance the health of New Jersey together.



Give Lifesaving Care \$100

Imagine the most advanced technologies and procedures.



Fight Cancer

Imagine ensuring cancer patients get the best in early detection and treatment close to home.



Have Heart \$50

Imagine comprehensive cardiac care, from procedures to rehabilitation.



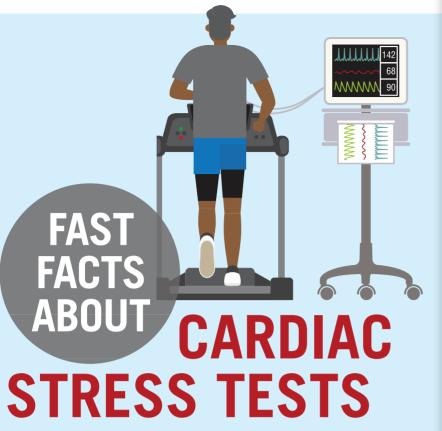
Help Patients

Imagine patient assistance programs - available for our most vulnerable on their journey to wellness.





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



MONITORING YOUR HEART WHILE YOU EXERCISE IS SAFE AND CAN GIVE YOUR DOCTORS

IMPORTANT INFORMATION.

stress test is a way to detect heart disease while the body is in motion.

"We have several noninvasive tests, such as electrocardiogram (ECT) or echocardiogram, to help detect coronary artery disease as well as heart disease," explains Sharan Mahal, MD, an interventional cardiologist at Robert Wood Johnson University Hospital Somerset and a member of RWIBarnabas Health Medical Group. "Those tests are done when the patient is sitting or lying down. However, some people are not symptomatic until they are exercising."

Think of the heart as an engine, he suggests. "You can only get so much information when the engine is at rest;



SHARAN MAHAL, MD

to really see how it's working, you have to rev it up and take it for a drive. A stress test lets us see how the heart acts and how blood flows through the body while it's moving."

WHAT HAPPENS DURING AN **EXERCISE STRESS TEST?**

- Most stress tests are done in a cardiologist's office. Patients should wear comfortable clothes and refrain from eating or smoking for four hours in advance.
- The patient is connected to heartmonitoring equipment, then walks on a treadmill under the supervision of a doctor or healthcare professional.
- At first, the pace is a gentle 1.7 miles per hour. The pace will gradually be increased to a brisk walk or light jog.
- At the same time, the incline of the treadmill is increased by two degrees every three minutes. It begins at 10 degrees and progresses to 16 degrees.
- The patient's heart rate, blood pressure and breathing are monitored throughout the test, which can last up to 15 minutes. The patient can stop at any time if needed.
- After the stress test, the patient will be observed for five minutes during cooldown.

STRESS TESTS ARE PRESCRIBED WHEN SYMPTOMS EXIST.

Unlike a colonoscopy or mammography, there's no recommended age for a person to begin having stress tests. "People need a stress test if they're having symptoms, usually chest pain or shortness of breath with activity, or unexplained passing out," says Dr. Mahal. "In the absence of symptoms, you might also want to do a stress test if a patient has a family history of cardiac disease, or as a precautionary measure if a patient who has been sedentary wants to start an exercise program."

THERE'S NO NEED TO BE AFRAID OF A STRESS TEST.

"It's a simple, cost-effective and low-risk procedure," says Dr. Mahal. "You'll be carefully monitored the whole time, and if there's any problem at all—which only about one in 10,000 patients will experience—be reassured that your cardiologist is prepared and will be able to take care of you."

THERE ARE DIFFERENT KINDS OF STRESS TESTS.

The most common is the exercise stress test as described in "What Happens During an Exercise Stress Test?" above. Depending on your risk factors, your physician may prescribe a nuclear stress test, which is the same as an exercise stress test, except that a safe radioactive dye is injected and an imaging machine is used to take pictures. If for some reason you can't handle the physical activity of a stress test, your doctor can prescribe a medication that will mimic the effects of exercise.

Your heart doesn't beat just for you. Get it checked. To connect with one of New Jersey's top cardiac specialists, call 888.724.7123 or visit www.rwjbh.org/heart.





urgery has been a mainstay of cancer treatment for millennia—in fact, the use of surgery to treat cancer appears in Egyptian papyri dating back as far as 2500 BC. Today, medical breakthroughs have opened exciting new possibilities for the successful surgical treatment of cancer.

As critical as surgical advances are,



H. RICHARD ALEXANDER JR., MD

however, they're most effective when they're part of a continuum of cancer care, savs H. Richard Alexander Jr., MD, FACS, Chief Surgical Officer and Chief, Surgical Oncology at Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-Designated Comprehensive Cancer Center.

"The best outcome for surgery doesn't just depend on what happens in the operating room," says Dr. Alexander. "The best outcome happens when surgery is integrated into a comprehensive, individualized plan of care for a patient who has a new diagnosis of cancer."

COMPLEMENTARY **TREATMENTS**

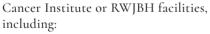
As part of the robust partnership between RWJBarnabas Health (RWJBH) and Rutgers Cancer Institute, experts from a wide range of specialties—surgical oncology, radiation oncology, medical oncology, gastroenterology, genetics

counseling and more—have weekly conferences to assess individual patient cases and make recommendations.

"These discussions aren't about deciding whether to do surgery versus some other treatment," explains Dr. Alexander. "Instead, because we understand cancer so much better now. these discussions are about finding the best ways to use surgery to complement the latest chemotherapy, immunotherapy or biologic treatments."

All treatments offered by Rutgers Cancer Institute and RWJBH are available to any patients being treated within the system, regardless of the facility at which the patient's treatment originated. Among those treatments are advanced and complex surgeries, some of which are only available at Rutgers





•Robotic surgery and laparoscopic surgery. These are minimally invasive and very precise, and are performed with the most up-to-date technology on the market.

•HIPEC (hyperthermic intraperitoneal chemotherapy) surgery, used for cancers that have spread to the abdominal cavity. This treatment strategy involves the surgical removal of metastatic cancer, followed by heated chemotherapy given within the



CANCER CAN'T WAIT

Because of the pandemic, cancer patients may have concerns about scheduling surgery. However, cancer care shouldn't be delayed. Rutgers Cancer Institute and RWJBarnabas Health facilities have taken every precaution to keep patients, visitors and care-team members safe, including:

- COVID-19 screening and testing of all patients and staff prior to working in an operating room or being involved in a surgical procedure
- Rigorous cleaning and disinfecting practices in recovery room spaces, frequently touched surfaces, exam rooms and terminals.

abdominal cavity, which is designed to obliterate the remaining invisible cancer cells that may be present in the tissues.

•Preventive, or prophylactic, surgery, in which sophisticated testing and analysis is used to identify high-risk patients and remove an organ or gland before cancer can develop. This may be recommended for people at risk of developing breast, colon, endometrial, gastric, ovarian, thyroid and many other types of cancer.

Experience counts when it comes to cancer surgery. "There's a large body of literature showing a relationship between the volume of operative procedures done and how successful the outcomes are," says Dr. Alexander. "The more experience surgeons and hospitals have, the better patients do in terms of a shorter length of stay, fewer complications and the return to a normal life more quickly.

"That's something we do especially well at Rutgers Cancer Institute and

RWJBarnabas Health," he says. "We have the experience and technology to recognize potential complications early on and intervene as necessary."

NEXT STEPS

When a patient is told that cancer surgery is needed, how should he or she decide what to do next?

The first step, says Dr. Alexander, is to do further research. "Every doctor wants the best outcome for their patients, and no doctor should object to a patient asking for a referral for another opinion," he says.

Patients also have the option of calling the RWJBH Oncology Access Center at 844.CANCERNI (844.226.2376). "The call will be taken by a specialist who is trained to gather information about the patient and identify the appropriate experts to evaluate and potentially provide treatment for them," explains Dr. Alexander.

Be sure to consider the continuum of care in the place where you will receive treatment. "Treatment that is fragmented, or administered in different locations without proper coordination, becomes more challenging," he says. "To me, it's always best for a patient to get cancer treatment from a multidisciplinary team of specialists who have good communication and coordination, from diagnosis through treatment, discharge and survivorship."

To help keep communication flowing smoothly among all experts treating a cancer patient at RWJBH facilities and Rutgers Cancer Institute, an oncology nurse navigator assists each patient throughout the cancer journey.

"When it comes to cancer treatment, patients shouldn't move forward until they're absolutely certain the best care plan has been presented to them," says Dr. Alexander. "We're uniquely positioned to provide that plan through the partnership between Rutgers Cancer Institute and RWJBarnabas Health."

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





THIS DOCTOR'S SPECIALIZED SKILLS CAN GET YOU FEELING BETTER FASTER AND HOME SOONER.

f you're admitted to a hospital, you'll be cared for by a specialist physician known as a hospitalist. Though the specialty has been growing

MANINDER ABRAHAM, MD

fast for more than 20 years, many patients and family members may not be familiar with what a hospitalist does.

Maninder "Dolly" Abraham, MD, has been a

hospitalist for 18 years and was recently named Chief of Hospitalist Medicine at RWJBarnabas Health. Here, she explains what patients should know.

What is a hospitalist?

A hospitalist is usually an internal medicine-trained physician who has undergone a residency training and is dedicated to and skilled at inpatient care.

Whether a patient is admitted to the hospital from the Emergency Department or as part of a planned admission, the hospitalist will manage that patient's care during the time the patient is in the hospital.

How does the hospitalist manage a patient's care?

The hospitalist will see the patient every day during the hospital stay, sometimes more than once. In addition to evaluating the patient, they will spend a large amount of time coordinating their care. This means making sure all consultants and specialists are on the same page, keeping the primary care physician in the loop and

FAST FACTS ABOUT HOSPITALISTS



IT'S A RELATIVELY NEW FIELD

The term "hospitalist" was coined in 1996.



IT'S GROWING FAST

More than 60,000 physicians practice hospital medicine, up from just a few hundred 20 years ago.



THEY SAVE TIME AND MONEY

Studies show that hospitalists can reduce patient lengths of stay by up to 30 percent and reduce hospital costs by up to 20 percent.



NATIONAL HOSPITALIST DAY

is held on the first Thursday in March every year (this year, March 4).

Sources: Staffcare.com, Society of Hospital Medicine

"A HOSPITALIST IS LIKE A STAR QUARTERBACK WHO KNOWS HOW TO **CALL THE PLAYS** AND NAVIGATE YOU THROUGH THE SYSTEM TO GET YOU **HOME AS QUICKLY AS** POSSIBLE."

communicating with nurses, social workers, case managers and discharge planners, as well as the patient's family.

Schedules are usually in blocks of days to ensure continuity of care for patients.

Why doesn't a patient's "regular doctor" see him or her in the hospital?

As medicine has evolved, primary care doctors need to dedicate more time to seeing patients in an outpatient setting. In addition, as treatments have become more sophisticated, doctors are able to treat more patients on an outpatient basis.

As a result, patients who are admitted to the hospital these days tend

to be those who are very sick. They require a lot of time and attention, which hospitalists are able to provide. Primary care providers entrust their patients to us. We become an extension of that primary care physician.

How does a hospitalist get up to speed on a patient's history and condition?

There is a steep learning curve on day one. The primary care or referring physician sends over a patient's file and has a phone conversation with the hospitalist. At the first encounter with the patient, the hospitalist will do a detailed history and physical exam on the patient, getting to know him or her as well as possible.

Electronic sharing of medical records has made this process much easier and faster. We have access to the patient's history and to all the doctors involved. In addition, we have HIPAAcompliant, secure text messaging, so we can communicate with other physicians efficiently.

How does a hospitalist communicate with the patient's family members?

Hospitalists spend a lot of time talking with patients and family members. We

train new hospitalists on how to talk with them in layman's terms and not use medical jargon.

We ask families to designate one person to be our contact, and we make every effort to communicate with the patient's family every day.

What advantages does a hospitalist have when it comes to treating a patient?

Hospitalists have broad knowledge of most illnesses and how to manage cases, including surgery patients, diabetes and cancer patients and more.

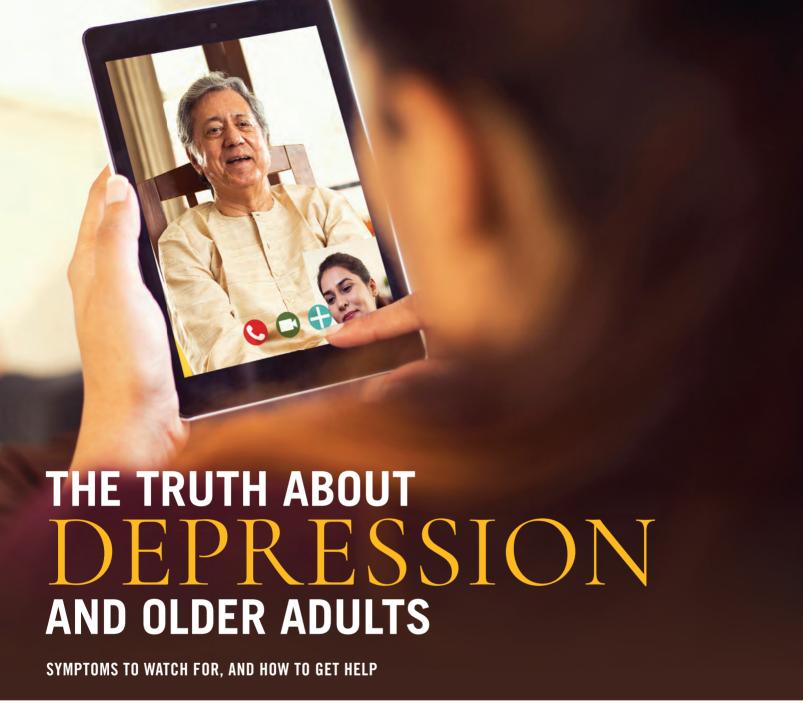
We are specialists in inpatient care. We organize care throughout the hospital. We're there to order tests, track the results and order follow-up tests promptly. We can clear a patient for surgery and manage him or her postoperatively.

We're also available to explain test results to patients and family members and respond to any medical crises. Then, at discharge time, we have all the tools needed for a smooth handoff to the next step of the healthcare plan.

A hospitalist is like a star quarterback who knows how to call the plays and navigate you through the system to get you home as quickly as possible.

To find a physician at an RWJBarnabas Health facility, call 888.724.7123 or visit www.rwjbh.org/doctors.





o old age and depression go together-especially in a pandemic? We asked two people who know: Jessica Israel, MD, Senior Vice President, Geriatrics



FRANK GHINASSI, PHD



JESSICA ISRAEL, MD

and Palliative Care, at RWIBarnabas Health, and Frank Ghinassi, PhD. ABPP. Senior Vice President of Behavioral Health and Addictions at RWJBarnabas Health and President and Chief Executive Officer of Rutgers University Behavioral Health Care.

Many people expect older adults to be depressed, or at least unhappy. Is that fair?

DR. GHINASSI: Seniors get a bad rap about that. In fact, the age 40 to age 58 group is more likely to be prone to depression. For every older person who is struggling, there are probably seven

or eight who are doing very well as they transition to the later stages of their career and life.

DR. ISRAEL: That expectation is a stereotype and needs to change. In fact, chances are that someone who has had 80 years to develop strategies to deal with stresses in life is, in many ways, better at coping than a younger person.

How does social isolation affect seniors?

DR. ISRAEL: In my experience, people of any age who were already prone to depression have seen their symptoms magnified since the pandemic began. Of course, COVID-19 struck older adults in disproportionate ways. I would say that a significant number of my patients were able to stay safe at home and find new resources to help them stay connected, although some of them needed extra help to find those connections and services. DR. GHINASSI: The folks we worry most about have a troubling package of circumstances—for example, they live alone, their children have moved away or they never had children, friends are beginning to die off, or they've moved to a community where they don't have an existing network. Some may begin to show cognitive decline. If that's combined with a history of depression or anxiety, that's when we get most concerned.

What are signs of depression?

DR. GHINASSI: At any age, changes in baseline behavior are concerning: somebody who had a good sense of humor no longer laughs, somebody who had a healthy appetite isn't eating, somebody who was a good sleeper now has sleep disturbances. Have they stopped doing things they enjoy? Are they saying things like, "What's the point of going on?" DR. ISRAEL: These days, it may be harder to pinpoint these changes because people have less contact with other people—they haven't been going to the gym, or they no longer get together with their knitting circle.

How can loved ones help?

DR. ISRAEL: It's so important to reach out to someone who may be isolated and depressed—to learn more about the situation surrounding the person, and what's happening inside that situation. If you see signs of depression, know that it's treatable. The first step, the critical one, is to reach out.

DR. GHINASSI: This is the time to connect with seniors more frequently than usual. Options range from phone and video calls to screen porch visits and talking through windows—even providing iPads. Visual contact can be a godsend for both the senior and his or her family.



HOW TO THRIVE WHILE SOCIAL DISTANCING

Seven research-backed ideas to promote physical and mental health.



• **KEEP TO A CONSISTENT ROUTINE.** Studies show that a regular daily routine, especially a consistent pattern of sleeping and waking, has distinct benefits for mental health. Create new routines for daily and weekly activities, including time for self-care, such as exercise or meditation.



• SPEND TIME WITH CRAFTS AND HOBBIES. People who take part in creative activities feel higher levels of positive emotion, according to recent studies. Creativity includes not only hobbies such as drawing, knitting or woodworking, but even simple activities like coloring or keeping a diary.



• TAKE A DAILY WALK. Walking helps maintain a healthy weight, improves heart health and elevates your mood by increasing your body's levels of endorphins, the feel-good hormones. If you can get outside, so much the better: Numerous studies have shown that time in nature is an antidote for stress. If weather or slippery conditions prevent going outside, put on your sneakers, put on some music and walk in place at home.



• READ BOOKS. Reading books reduces stress, decreases blood pressure and lowers heart rate. Reading actually strengthens the brain by promoting the development of neurons. Moreover, studies show that reading fiction books increases the ability to empathize. If you use an e-reader, turn to a print book at bedtime. The blue light from screens can interfere with sleep.



• LISTEN TO PODCASTS. Podcasts are mini-radio shows created on every topic you can imagine, and they're available free online or through apps for iPhone or Android. A 2016 study found that listening to podcasts activates multiple parts of the brain and can soothe, excite or make you laugh.



• LISTEN TO YOUR FAVORITE MUSIC. Music is an effective form of mood regulation, helping us to calm down, feel pleasure or even indulge in a good cry. One study found that adults with chronic osteoarthritis who listened to music daily for two weeks reported less pain.



• KEEP AND BUILD YOUR SOCIAL NETWORK. A range of studies has shown that meaningful social connections increase longevity and feelings of well-being. Stay connected by reaching out to friends and family, whether it's via your phone or laptop, or the "oldfashioned" pen-and-paper way.

To reach the physician referral service at RWJBarnabas Health, call **888.724.7123**. To learn about mental health services, call the RWJBarnabas Health Behavioral Health hotline at 800.300.0628.







ONE STEP A **A TIME**

INTENSIVE PHYSICAL THERAPY **ALLOWS A LITTLE BOY TO** OVERCOME A RARE CONDITION.

ennifer Fecowycz was only 13 weeks pregnant when she learned her baby wasn't developing normally in utero. Doctors could see that he wasn't bending at his wrists, knees, ankles or elbows, and diagnosed a rare condition called arthrogryposis—a congenital joint contracture (stiffness) in two or more areas of the body.

When Jen's baby, Oscar, was born he faced a myriad of complications: club feet, hyperextended knees and elbows, and wrists that hooked under the wrong way. All necessary healthcare services, including surgery and casting, began right after birth. Then, when he was just six weeks old, he began weekly physical therapy sessions at Children's Specialized Hospital (CSH) in Mountainside.

TRUSTING THE PROCESS

Because Oscar couldn't bend his elbows. "tummy time" to strengthen the neck was very difficult. Nighttime splints

Children's Specialized Hospital®

An RWJBarnabas Health facility

were needed to increase the ability of his arms to bend. He had casts on his legs from the age of five weeks to six months, which made rolling over a big challenge.

Oscar and his therapist Diana Deshefy, PT, DPT, PCS, worked on exercise modifications. When the leg casts were removed, Deshefy taught him how to roll over. Deshefy also served as a friend and confidant to Jen and made sure Oscar's entire care team had the most up-to-date information on his case.

"When Oscar was born, we were told that the only way he'd ever walk would be if we amputated his legs at his knees," says Jen. "Children's Specialized made sure that was a decision we never had to make." Because Oscar couldn't bend his knees, physical therapists began by having him stand and put pressure on his legs. "The team at Children's continued to work with us each week, figuring out

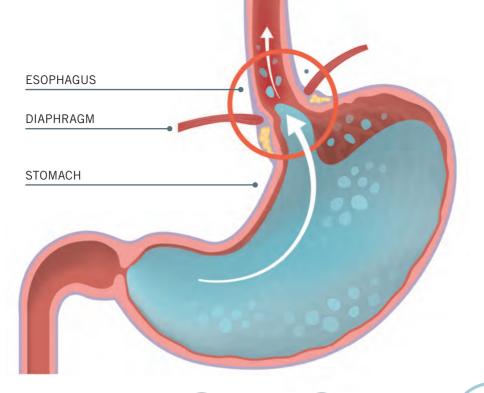
where his legs needed the most support and creating bracing options for his unique needs," Jen says. Just before Oscar's second birthday, Deshefy helped him take his first independent steps.

Today, Oscar is a typical 5-year-old boy who loves to spend time outside hiking, swimming and throwing rocks into the creek. He also enjoys coloring, building with Legos and playing with trucks, cars and dinosaurs. Oscar continues to see Deshefy weekly and interact with all of his friends at CSH.

"My advice for parents going through a similar situation is to take a deep breath, be patient and trust your therapists and the process," Jen says. "It can be overwhelming to hear the therapists set goals for three, six and 12 months and worry that your child isn't going to hit them. But your therapists work with you and your child, adjusting the plan as needed. I'm so grateful to Children's Specialized for all they've done for Oscar and our entire family."

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

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



GUT CHECK

DON'T SUFFER NEEDLESSLY WITH THESE TWO COMMON TYPES OF GASTROINTESTINAL DISTRESS.

tomachaches, constipation and diarrhea are common discomforts that usually pass fairly quickly. "When they don't, unfortunately, people will often suffer with them for a long time, sometimes for years, before they seek help," says Gregory Lesser, MD, a gastroenterologist with Robert Wood Johnson University Hospital (RWJUH) Rahway.

Two of the most prevalent and most treatable types of



GREGORY LESSER, MD

gastrointestinal distress, says Dr. Lesser, are gastroesophageal reflux disease (GERD) and Irritable Bowel Syndrome (IBS). "If you have a pattern of either

of these conditions and it's having a negative impact on your quality of life, you should see a doctor," he says. "In my experience, we are able to help 80 to 90 percent of the patients we see." Here, Dr. Lesser gives guidelines for assessing your situation.

> **GASTROESOPHAGEAL REFLUX DISEASE** (GERD)

WHAT IT IS: Irritation of the esophagus (the tube that connects the mouth and stomach) caused by stomach acid. Chronic GERD

can cause damage to the esophagus. **SYMPTOMS:** A burning sensation in the chest after eating, a sour taste in the back of the throat, difficulty swallowing, hoarseness

WHAT CAUSES IT: Aggravating factors include stress, obesity and hiatal hernia Stomach acid moving up into the esophagus causes acid reflux symptoms. GERD is a severe form of acid reflux.

(bulging of the top of the stomach up into the diaphragm). Certain foods and beverages worsen GERD, especially if eaten before bedtime, including spicy foods, tomato-based sauces, chocolate and caffeinated drinks. Aging is also a

WHEN TO SEE A DOCTOR: If you have the condition three or more times a week for several weeks. "We'll usually try prescription medications first," says Dr. Lesser. "If a patient has had GERD for longer than a month, we will consider an upper endoscopy—a 10-minute test done with a flexible camera, under IV sedation in a hospital or surgical center,

> so we can assess any damage to the esophagus."

IRRITABLE BOWEL SYNDROME (IBS)

WHAT IT IS: A chronic

disorder in which the contents of the colon can't move along smoothly **SYMPTOMS:** Cramping, abdominal pain, bloating, gas, diarrhea or constipation WHAT CAUSES IT: Severe infection and changes in gut microbes are suspected. Stress also seems to play a role. "Since the pandemic began, our office has been seeing a lot more people with IBS," says Dr. Lesser.

WHEN TO SEE A DOCTOR: If you have experienced the symptoms for more than two months. "The first thing we do is exclude easily treatable causes for the symptoms," says Dr. Lesser. "We look for markers of celiac disease, and we check for bacteria or parasitic viral infections in the stool. Finally, we might do a colonoscopy to check for signs of inflammation."

IBS should not be confused with inflammatory bowel disease (IBD), which is an umbrella term used to describe debilitating and sometimes lifethreatening disorders such as Crohn's disease and ulcerative colitis.

Dietary changes can ease the symptoms of GERD and IBS. To work with an Outpatient Dietitian at RWJUH Rahway, call 732.499.6210. To find a gastroenterologist at RWJUH Rahway, call 888.724.7123 or visit www.rwjbh.org/doctors.





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.

of the disease has declined by 70 percent since the Pap test for screening began to be widely used in the 1960s.

Even with the decrease in cases. however, the American Cancer Society estimated that 13,800 new cases would be diagnosed in 2020. "Fortunately, medical advances have given women the ability to strongly protect themselves against

Robert Wood Johnson University Hospital (RWJUH) Rahway. "And if cervical cancer is found at an early stage, the cure rates are quite high. That means regular screening is very important."

On the following page, find the steps every woman can take to protect herself from getting cervical cancer.



Cervical cancer starts in the cervix. The cervix is a "neck" of tissue located at the opening point of the uterus (womb), which connects to the vagina (birth canal).

IF YOU ARE ELIGIBLE. GET THE **HPV VACCINE.**

HPV, the human papillomavirus, can cause cervical and other forms of cancer in the genital regions of both males and female, as well as genital warts. The Centers for Disease Control and Prevention recommends that the following age groups get the vaccine, which is given in two or three doses:

- Routine vaccination at age 11 or 12 years to protect a child before he or she has sexual contact and is exposed to HPV
- · Vaccination for everyone through age 26 if not adequately vaccinated previously
- If you are between ages 27 and 45 and have not been vaccinated, discuss with your doctor.

The vaccine has been approved by the Food and Drug Administration. All vaccines can have side effects, but research has shown that the benefits of



KENNETH TREADWELL JR., MD

HPV vaccination far outweigh the potential risks.

GET REGULAR PAP TESTS.

A Pap test (named after its inventor, Georgios Papanikolaou)

should be part of routine gynecologic care. In general, doctors recommend that women between the ages of 21 and 65 get a Pap test every three years.

For a Pap test, a healthcare professional places a speculum (a plastic instrument) into the vagina

to keep it open so that the cervix can be seen clearly. The healthcare professional takes a small sample of cells and mucus from the cervix, which are sent to a lab for analysis to see whether they indicate the presence of cancer or pre-cancer.

To ensure accuracy, a woman should not use tampons, birth control foams or jellies, vaginal creams or douches for two to three days before the test, as well as abstain from vaginal sex. The best time for a test is five days after a woman's menstrual period stops.

BE AWARE OF YOUR RISK FACTORS.

Cervical cancer is most frequently diagnosed in women between the ages of 35 and 44. More than 20 percent of cases of cervical cancer are found in women over 65, and those almost always occur in women who have not had regular screenings earlier in life.

- Any new sex partner is a potential risk factor for getting HPV. Proper use of condoms may help prevent the spread of the virus.
- · People who have weakened immune systems, such as those taking immunosuppressant drugs or who have HIV/AIDS, are more at risk.
- Smoking increases the risk of getting cervical cancer.
- A diet low in fruits and vegetables may increase the risk for cervical cancer.

PAY ATTENTION TO POSSIBLE SYMPTOMS.

In its earliest stages, cervical cancer does not have symptoms, which is why doctors stress the importance of regular screenings.

If the cancer grows larger and



WHAT IS HPV?

The human papillomavirus, or HPV, is the most common sexually transmitted infection and can spread through vaginal, anal or oral sex with someone who has the virus. It is estimated that 79 million Americans, most in their late teens and early 20s, are infected with HPV. Both men and women are vulnerable to HPV infection.

What conditions can HPV lead to?

In most cases, HPV goes away without causing health problems. However, in other cases it can cause genital warts or cancer of the cervix, vulva, vagina, penis, anus or back of the throat. The HPV vaccine can save lives.

Symptoms can develop years after infection, making it hard to know when the infection was transmitted.

What are the risk factors for HPV?

Any new sex partner is a potential risk factor. People who have weakened immune systems, such as those taking immunosuppressant drugs or who have HIV/AIDS, are more at risk, as are smokers.

spreads into nearby tissues, these symptoms may occur:

- · Abnormal vaginal bleeding, such as bleeding after vaginal sex, bleeding after menopause, bleeding and spotting between periods or having menstrual periods that are longer or heavier than usual. This type of bleeding occurs because cancer begins to erode tissues and blood vessels.
- An unusual discharge from the vagina, which may contain blood
- Pain during sex, resulting from a mass in the region
 - Pain in the pelvic region.

To find an OB/GYN at RWJUH Rahway, call 888.724.7123 or visit www.rwjbh.org/doctors.





WHAT REALLY WORKS?

WEIGHT LOSS SURGERY IS AN IMPORTANT FIRST STEP. BUT LASTING SUCCESS IS A LONG JOURNEY.

(bariatric) surgery—and anyone who's considering it knows that the surgery isn't a magic bullet for obesity. It is, however, a powerful tool for helping people lose weight and keep it off.

"After surgery, long-term weight loss success comes from a combination of things: nutrition, fitness and support," says Dianne Errichetti, RN, Surgical Weight Loss Program Coordinator at Robert Wood Johnson University Hospital (RWJUH) Rahway. Here are strategies for getting where you want to go.

BE MINDFUL ABOUT YOUR MOTIVATION.

There will be times when it's tempting to give in to cravings or revert to former behaviors. Lee Feeney, 70, who attends the bariatric support group at RWJUH Rahway, keeps her motivation up by looking at an inspirational quote on her dresser each day. It says: "If I quit now, I will soon be back to where I started. When I started, I was desperate to get to where I am now."

Many people have found that psychological issues have been at play in their weight gain. "Food has become a friend for many of our patients," says Errichetti. "They go to food when they're happy, sad, alone, going through the darkest times in their lives. After the surgery, when they can't concentrate on the food as much, they may feel a sense of loss. We try to shift that focus."

GET ORGANIZED.

Make a list before grocery shopping so you're less likely to buy unhealthy foods. Pack your lunch for work so you're less likely to succumb to unhealthy takeout options. Routine helps, too. "I always have a protein shake for breakfast," says Lee. "And I always have canned tuna in the cabinet, and yogurt, cheese and fruit in the fridge." Many people find it helpful to keep a food diary or journal.

EAT MORE SLOWLY.

This has been the biggest challenge for Kathy Curran, 63, who had her surgery last summer and attends ongoing support groups at RWJUH Rahway. "I always used to eat fast, and I still do," she says. Because bariatric surgery reduces the size of the stomach, food entering it too quickly can lead to vomiting, gas or dizziness. People in Kathy's support group have advised she chew her food at least 20 times before swallowing, and try setting an alarm for 30 minutes and spreading her meal out across that time.

"We encourage people to focus on the experience of eating and the

FAST FACTS ABOUT BARIATRIC SURGERY



- To qualify for bariatric surgery, a person should have a BMI (body mass index) of greater than 40, or be more than 100 pounds overweight; or have a BMI greater than 35 and at least one obesity-related disease, such
- The most widely performed type of procedure, gastric sleeve surgery, reduces the size of the stomach by about two-thirds and also alters the patient's metabolism.
- Approximately 90 percent of bariatric surgery patients lose 50 percent of their excess body weight and keep the extra weight off long-term.

socialization of family and friendsnot just on the food," says Errichetti.

MOVE MORE.

Recommended: Cardio exercise like walking or biking to burn calories, and strength training to build muscle. Strength training also helps with overall body toning—important for managing the excess skin that can come with significant weight loss. There's no one way to exercise; instead, find the type of exercise and routine you enjoy.

REROUTE WHEN NECESSARY.

It's crucial to make sure that a small slip doesn't turn into a large or permanent one. "I use the GPS analogy a lot," says Errichetti. "If you go off track, you can reroute. You'll still get to your final goal, though you may get there at a different rate."

Lee agrees. "I've learned not to beat myself up when I don't follow all the guidelines perfectly the way I did in the first two years," she says.

JOIN A SUPPORT GROUP.

"People who attend support groups have continued long-term success," says Errichetti, who runs a regular group for people who've had the surgery as well as those who are interested in having it.

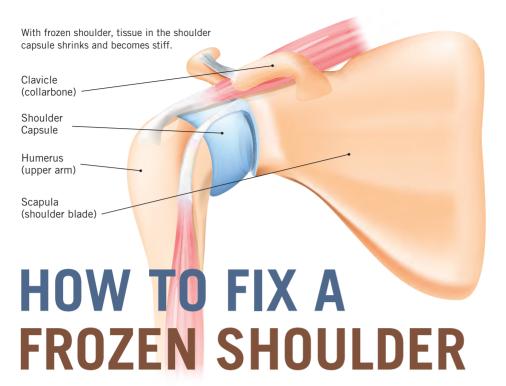
"If I quit now, I will soon be back to where I started. When I started, I was desperate to

Lee Feeney has continued to come to support groups for the 10 years since her surgery and credits the group meetings with helping her maintain her weight loss.

"The first two years after the surgery are a honeymoon period, when weight loss is pretty easy and people reach their goal," she says. "That's when many people stop going to support meetings, but then they gain weight and are embarrassed to come back.

"They shouldn't be. This is a constant, daily journey. It's not just about losing weight, but about keeping it off for good."

To learn more about weight loss surgery at RWJUH Rahway, call 732.499.6300 or visit www.rwjbh.org/weightloss.



IT'S A PAINFUL CONDITION. BUT PHYSICAL THERAPY CAN HELP.

What is frozen shoulder?

Stiffness and pain in the shoulder joint, known as adhesive capsulitis. Strong connective tissue called the shoulder capsule holds the ball end of your upper arm bone in the shoulder socket. With frozen shoulder, the capsule contracts, preventing or restricting motion.

What causes it? There's no known cause. Diabetes appears to be a risk factor, as does having a shoulder immobilized for an extended period of time due to a fracture or surgery. People over 40, particularly women, are more likely to have frozen shoulder.



MINA ABDELSHAHED, MD



HOWARD M. PECKER, MD

What are the symptoms? In the first phase, inflammation and pain increase. Then the shoulder "freezes," getting progressively stiffer. "A hallmark of this condition is loss of motion," says Howard M. Pecker, MD. an orthopedic surgeon with Robert Wood Johnson University Hospital (RWJUH) Rahway. "Typically, a person can bring his or her arm straight up into the air, 180 degrees, like a protractor in geometry. With frozen shoulder, they start to notice decreased ability, until they can only lift their arm 45 to 50 degrees."

When should you see a doctor?

"Patients who get treatment for frozen shoulder early on tend to recover a lot quicker," explains Mina Abdelshahed, MD, an orthopedic surgeon with RWJUH Rahway.

How is it diagnosed? The orthopedist will review the patient's medical history and do a physical exam that includes moving the shoulder

carefully in different directions. An X-ray can determine whether the pain could be caused by arthritis in the shoulder, and an MRI may be done.

How is it treated? "Nonsteroidal anti-inflammatory drugs such as ibuprofen are helpful," says Dr. Abdelshahed. "These and other medications help make physical therapy, which is very important, tolerable."

What does physical therapy do?

"The most fundamental component of treatment is movement under the guidance of a physical therapist," says Maria Cesari-Redondo, MSPT, a physical therapist (PT) at RWJ Rahway Fitness & Wellness Center in Scotch Plains.

"The evaluation process will identify the stage of the condition, based on a four-stage scale: Pre-freezing, Freezing, Frozen and Thawed," she explains. "The therapist will then create an individualized exercise program." Exercises will be both active (done by the patient) and passive, in which a PT will move the shoulder for the patient to improve blood flow and increase flexibility. Resistance-based exercises are an important component of the therapy, especially in the Thawed phase.

How long does therapy last?

"Patients are typically seen two to three times a week for approximately eight weeks. However, it can vary greatly depending on the patient's condition," Cesari-Redondo says. "Patients are encouraged to follow a home exercise program as directed to achieve functional levels." Very rarely, frozen shoulder can recur in the same shoulder, but it will sometimes appear in the opposite shoulder, she explains.

"Understand that near recovery may take 15 to 24 months with the continuation of a home exercise program," she says. "It is important to continue to follow up with the orthopedic physician as needed."

To find an orthopedist at RWJUH Rahway, call 888.724.7123 or visit www.rwjbh.org/ortho. To learn about physical therapy at RWJ Rahway Fitness & Wellness Centers in Scotch Plains and Carteret, visit www.rwjrahwayfitness.com or www.rwjfitnesscarteret.com.





RWJUH Rahway Is Here for You

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

ADULT BEREAVEMENT SUPPORT GROUP: First

Wednesday of each month at 1:30 p.m. at RWJ Rahway Fitness & Wellness Center, 2120 Lamberts Mill Road, Scotch Plains. Registration required. Call 732.499.6193.

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

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

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

DIABETES SUPPORT: In-person support group from 6:30 to 7:30 p.m. first Thursday of the month in Conference Room 3 at RWJUH Rahway, 865 Stone Street, Rahway. In addition, Lauren Bernstein, MS, RD, Certified Diabetes Educator at RWJUH Rahway, is providing individual education for people with diabetes, both in person and virtually. To learn more, call 732.499.6109.

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



NAMI (NATIONAL ALLIANCE ON **MENTAL ILLNESS) UNION COUNTY FAMILY SUPPORT GROUP: Virtual**

meeting on the first Tuesday of the month,

7 p.m. To receive the login, email namiunioncounty@yahoo.com with your name, town and phone number.

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

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

NEW FOR 2021

LUNG DISEASE SUPPORT: In-person support group from 3:30 to 4:30 p.m. on the first Thursday of the month at RWJUH Rahway, 865 Stone Street, Rahway. For COPD, pulmonary fibrosis and various other lung conditions. To register, call 732.499.6193.

ONLINE SUPPORT FOR NEW AND EXPECTING MOTHERS

- Breastfeeding Support, every Monday from 12 to 1 p.m. International Board Certified Lactation Consultants will provide guidance and answer questions about latch issues, breast/nipple pain, milk supply concerns, pumping, supplementation, returning to work and weaning. Register at www.rwjbh.org/breastfeedingsupport.
- Perinatal Mood and Anxiety Disorders, every Wednesday from 11 a.m. to 12 p.m. One of the most common complications of childbirth is anxiety or feelings of anger or sadness. You are not alone. Join our judgment-free and supportive virtual community, led by a perinatal mood disorder certified specialist. Register at www.rwjbh.org/ PMADsupport.

Let's Focus on Your Health

If you've put off medical care due to COVID-19, please don't delay it any longer. As a high reliability organization, we've taken every precaution and continue to provide healthcare services. We adhere to all public health guidance and regulatory policies. This means stringent cleaning and disinfection throughout our facilities, including equipment and surfaces, frequently and between patients. We're actively screening team members, patients and visitors for symptoms and temperature upon entering a facility. For your safety, all outpatient testing and therapy now require an appointment. Call us at one of the numbers below and for some services we will work to get you an appointment on the same or the

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

Learn more at www.rwjbh.org/WelcomeBack.

Let's be healthy together.

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GRAND REOPENING of RWJ Rahway Physical Therapy at the RWJ Rahway Fitness & Wellness Center in Scotch Plains

We are back & better than ever — come see us.

- Fully renovated treatment suite with ALL NEW therapy equipment
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- Same excellent service and physical therapy expertise care that consistently earns praise from our patients
- · Sanitizing, social distancing and masking

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Balance/vestibular therapy

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908-389-5400

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