

A Publication of
MONMOUTH MEDICAL CENTER

Spring 2022

healthy *together*

**SECRETS OF
AGING WELL**

**A 'ONE-STOP SHOP'
FOR HEART AND
VASCULAR CARE**

**NEW ANKLES,
NEW LEASE ON LIFE**

**CANCER: TOMORROW'S
TREATMENTS TODAY**



MESSAGES FROM LEADERSHIP



“During the recent omicron surge, our healthcare workers went above and beyond during an extraordinarily difficult time. Their commitment to their patients and the community was incredibly gratifying and is representative of the extraordinary dedication of our RWJBarnabas Health workforce.”

BARRY H. OSTROWSKY

CHIEF EXECUTIVE OFFICER, RWJBARNABAS HEALTH



“Empowered by the challenges of the past two years, our healthcare heroes are dedicated to providing excellent care and making a true impact, no matter how challenging the times we face. I offer my profound gratitude for their unwavering commitment to our patients, our communities and each other, and for the enduring energy, optimism and compassion they bring to their roles.”

ERIC CARNEY

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

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HEALTH NEWS



Eric Carney, President and CEO of MMC and MMCSC, holds the Leapfrog Top Teaching Hospital Award with (from left) Kenneth Granet, MD, Chief Medical Officer; Joseph Jaeger, DrPH, Chief Academic Officer; Diann Johnston, MSN, RN, NEA-BC, Chief Nursing Officer; Michael Perdoni, FACHE, Vice President, Clinical Operations; and William Downs, DO, President of the Medical Staff and interim Chair of Emergency Medicine.

MMC IS NAMED A TOP TEACHING HOSPITAL

Monmouth Medical Center (MMC)—a regional medical campus of Rutgers Robert Wood Johnson Medical School—has been named for a third time as a Top Teaching Hospital by The Leapfrog Group, an independent hospital watchdog organization. The award is considered one of the most competitive honors American hospitals can receive.

MMC was one of just 72 hospitals nationwide recognized as a Top Teaching Hospital. The recognition comes on the heels of MMC's 14th consecutive "A" Hospital Safety Grade from The Leapfrog Group.

“This impressive achievement is a testament to the dedication of our highly skilled physicians, residents, nurses and staff, and their commitment to providing the highest-quality patient-centered care in the safest environment,” says Eric Carney, President and CEO of MMC and Monmouth Medical Center Southern Campus (MMCSC).



From left: Jason Cohen, MD, Chair of Orthopaedic Surgery at MMC; David Chalnack, MD, Medical Director of the Joint Replacement Surgery Program; and Nicole Wilps, RN, BSN, Program Coordinator.

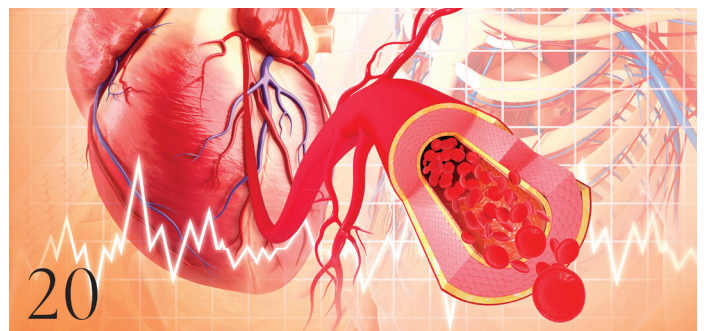
JOINT AND SPINE CENTER ACHIEVES NATIONAL RECOGNITION

The Joint Replacement and Spine Center at Monmouth Medical Center has achieved Joint Commission Disease-Specific Certification for total hip, total knee and spine surgery. The honor recognizes excellence in providing care and treatment options to patients experiencing pain and limitation of permanent and progressive damage to hips, knees, shoulders and spine.

The hospital has held the recognition for 10 years based on “evidence-based proof of clinical quality sought by patients,” says spine surgeon Jason Cohen, MD, Chair of Orthopaedic Surgery at MMC. “Whether their pain is due to osteoarthritis, rheumatoid arthritis, trauma or other joint or spine disorders, patients will find life-changing relief under the care of our highly experienced board-certified, fellowship-trained joint and spine specialists.”

healthy *together* contents

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Anne Vogel Family Care & Wellness



Donor Sheldon Vogel (left) joins MMC and MMCS President and CEO Eric Carney at the new facility named in loving memory of Anne Vogel.

HEALTH **IN** HARMONY

A FORMER MUSIC INDUSTRY EXECUTIVE'S \$10 MILLION GIFT SUPPORTS THE ANNE VOGEL FAMILY CARE AND WELLNESS CENTER, WITH INNOVATIVE PROGRAMMING NAMED FOR DOROTHEA AND JON BON JOVI.

Monmouth Medical Center (MMC) has announced that philanthropist Sheldon Vogel has donated a \$10 million naming gift in memory of his beloved wife and cherished hospital benefactor and friend, Anne Vogel, for its new, expansive outpatient center at the Monmouth Mall in Eatontown. The new center has been named the Anne Vogel Family Care and Wellness Center.

This generous gift comes on the heels of the Vogels' record-breaking \$50 million donation to the hospital

in 2020 to establish the Vogel Medical Campus in Tinton Falls, which is under development three miles away from the new Monmouth Mall center. The Vogel Medical Campus in Tinton Falls and the Anne Vogel Family Care and Wellness Center support MMC's vision to thoughtfully expand access to the hospital's outstanding programs and services.

Thanks to a different generous naming gift, the center's state-of-the-art demonstration kitchen features innovative programming

named for Dorothea and Jon Bon Jovi that focuses on disease prevention, wellness and nutrition. The four-story, 82,000-square-foot building, located near Boscov's, also enhances access to comprehensive women's, pediatric and urgent care services.

"We are so grateful to Sheldon for his continuous generosity, and we are honored to continue the transformation of Monmouth Medical Center and the future of healthcare in our region in the name of Anne Vogel," says Eric Carney, President and CEO of MMC and

Monmouth Medical Center Southern Campus (MMCSC) in Lakewood.

RELATING TO MUSIC

As a longtime chief financial officer at Atlantic Records, Vogel has seen firsthand the transformation of the music industry and draws parallels with today's ever-changing healthcare landscape.

"Healthcare innovation is crucial to our community and requires investment," Vogel says. "Anne would be so proud that this special gift in her name will ensure that Monmouth Medical Center can continue to meet the evolving healthcare needs of our community for generations to come."

A key feature of the Anne Vogel Family Care and Wellness Center is the large demonstration kitchen that the hospital likens to "the heart of a home." It is staffed by a full-time dietitian and, through the innovative programming named for Dorothea and Jon Bon Jovi, is uniquely equipped to support the community on a healthy eating journey, according to Caitlin Olson, Regional Vice President of Development for MMC and MMCSC.

The Jon Bon Jovi Soul Foundation runs JBJ Soul Kitchen, a nonprofit community restaurant in Red Bank and Toms River. "We know from working with JBJ Soul Kitchen that they are very focused on addressing food insecurity, nutrition education, mental health and homelessness, and we are so grateful to them for their partnership, as this aligns directly with our values and our mission to improve the health of our

communities," Olson says.

Since 2006, the Jon Bon Jovi Soul Foundation has worked to break the cycle of hunger, poverty and homelessness through developing partnerships, creating programs and providing grant funding to support innovative community benefit organizations.

"We are honored to partner with RWJBarnabas Health in the newly created Anne Vogel Family Care and Wellness Center in Eatontown," say Dorothea and Jon Bon Jovi. "After more than a decade of serving the community at our JBJ Soul Kitchen restaurants, we know firsthand the importance of nutritious meals. We look forward to creating programs that can teach people cooking skills and healthy eating habits."

"The new center is truly providing extraordinary care close to home and perfectly honors Anne's caring and giving nature," says Bill Arnold, President, RWJBarnabas Health Southern Region and President and CEO, Robert Wood Johnson University Hospital in New Brunswick. "We can't thank Sheldon enough for helping RWJBarnabas Health advance its mission of ensuring our communities have the means and ability to live healthier, more fulfilling lives. We are also so grateful to Dorothea and Jon Bon Jovi for helping us pair world-class healthcare with healthy eating through the exciting Dorothea and Jon Bon Jovi programs."

A STRONG LEGACY

The new Eatontown center has an additional tie to Anne Vogel: She was honored posthumously by the hospital

BRINGING WORLD-CLASS CARE TO MORE OF MONMOUTH COUNTY

The Anne Vogel Family Care and Wellness Center concentrates a wide range of services for women and children, including Children's Specialized Hospital outpatient services. Among its features, the center will provide the region with convenient access to:

- Renowned pediatric subspecialists in cardiology, endocrinology, gastroenterology, pulmonology and infectious diseases through The Unterberg Children's Hospital at Monmouth Medical Center
- Outstanding programs in pediatric medical services including neurology, psychiatry and physiatry, as well as therapeutic services including audiology, psychology and physical, speech and occupational therapy through Children's Specialized Hospital
- Comprehensive women's services, including maternal-fetal medicine and a breastfeeding center
- MMC's pioneering Perinatal Mood and Anxiety Disorders (PMAD) Center
- A Bariatric Surgery and GI Disorders Center
- A wellness center and demonstration kitchen with programming named for Dorothea and Jon Bon Jovi
- A blood drawing station
- An Urgent Care Center

COMMUNITY PARTNERS: ADDITIONAL RESOURCES



To learn more about the Anne Vogel Family Care and Wellness Center, visit www.rwjbh.org/loveyourfuture. For information about the JBJ Soul Foundation, visit <https://jbjsf.org>. For more about the JBJ Soul Kitchen, visit <https://jbjsoulkitchen.org>. To learn how you can support the Monmouth Medical Center Foundation, visit www.rwjbh.org/monmouth-medical-center/giving.

foundation in October with the Judith W. Dawkins Ambassador of Excellence Award, the seal of which is enshrined in the building's structure.

"Last spring, we gathered to sign the building's final beam, which will forever bear the insignia of this important award—most recently presented to Anne Vogel," Olson said. "It is so gratifying to be able to recognize the incredible legacy of giving of both Anne and Judi at this exciting new facility."



'I WANTED TO WORK WITH A GERIATRIC SPECIALIST'

HOW ONE MAN FINDS THAT FOCUSED CARE CAN HELP OLDER ADULTS AGE SUCCESSFULLY

Gary Cahill knew that regularly seeing a geriatrician can help minimize age-related conditions and improve quality of life.

For a major part of Gary Cahill's career, he ran programs for seniors, which offered him key insights into aging with good health. So when he retired, the 73-year-old was laser-focused on seeking a doctor who specializes in caring for older adults.

Cahill followed through by teaming with Sana Riaz, MD, a geriatrician at the Geriatrics Health Center at Monmouth Medical Center (MMC) and a member of RWJBarnabas Health Medical Group, shortly after he moved to Long Branch three years ago. Far from frail, the father of one exercises regularly, volunteers with multiple organizations and socializes with a wide network of friends. Yet he feels Dr. Riaz and other clinicians at the center are essential to his proactively staving off health problems that could curtail his active life.

"Having worked with the senior population, I know that health tends to decline over time, and your lifestyle changes," Cahill says. "I wanted to work with a geriatric specialist because they are more attuned to the aging process. All seniors age differently, but we have certain things in common—and those are important things Dr. Riaz brings to my attention."

Adults in the expanding 65-and-older population face a variety of potential health challenges as more birthdays pass, Dr. Riaz notes. Seniors may cope with numerous chronic medical conditions, including mobility difficulties, frequent falls, memory loss, vision and hearing loss, incontinence, frailty and depression.

Geriatricians undergo specialized training to detect such issues, treat them and counsel seniors and their families on ways to maximize abilities and enjoyment in later years, says Dr. Riaz, who began working at the Geriatrics Health Center in 2019. "We help people navigate



SANA RIAZ, MD

through some of those inevitable circumstances that most of us eventually face," she says. "Gary is actually in really good health and not necessarily typical of many geriatric patients. He is an example of someone who is thriving and not just surviving."

OPTIMAL FUNCTION

As with all her new patients, Dr. Riaz had a lengthy first visit with Cahill to review his health history and medication use, perform baseline medical tests and set short- and long-term goals. Collaborative MMC staff members who form the cornerstone of the center's Anna Greenwall Geriatric Program include a dietitian and a social worker for patient and caregiver support and help with transportation.

"Everyone is going to age—it's not something we can prevent," Dr. Riaz says. "But we can try to age successfully, and that's our goal at the Geriatrics Health Center. We want to make sure there's an individual plan for life events that will eventually occur."

Annual assessments review where patients see themselves over the next few years. "A 90-year-old may aspire to attend a grandchild's future wedding, while someone younger like Gary wants to optimize all his functions," Dr. Riaz says.

With Dr. Riaz's guidance, Cahill sees an audiologist for progressive hearing loss and wears hearing aids. A urologist performs regular tests to ensure prostate cancer that Cahill battled in the past has not returned.

"Dr. Riaz knows when I'm due for all my tests and keeps track of that for me," Cahill says. "She asks if I got my flu or COVID-19 shots. She's always checking and making sure I'm taking care of myself. She keeps me on target."

COORDINATING CARE

Dr. Riaz also acts as a kind of healthcare quarterback, coordinating care among each patient's many possible specialists. Geriatricians typically spend more time with patients during routine office visits than many primary care physicians—

WHY ARE OLDER ADULTS AT HIGHER RISK OF COVID-19?

Having a geriatrician monitor preventive medicine activity is especially important in the age of COVID-19, as the respiratory infection has generally taken its heaviest toll among people over age 65. Researchers suggest the extra protection you get from staying up to date on COVID vaccines can be critical for reasons such as these:

- Older people are more likely to have other health conditions linked to poorer COVID outcomes such as obesity, cardiovascular disease and diabetes.
- The aging immune system becomes less able to recognize invading microorganisms and sound an alarm, increasing the value of extra protection from vaccines.
- Older bodies are more prone to systemic inflammation from infection, which can cause a variety of serious problems.
- The killer cells and cellular machinery that mount an immune response become weaker or less numerous with age.

around 30 minutes, Dr. Riaz notes.

"We're looking at the larger picture and bringing together care for the whole patient," she says. "Medication reviews are included in every visit. A big part of geriatrics can be taking away certain medications if they aren't needed because, for example, they were prescribed by more than one doctor. Many times, reviews help patients."

The Geriatrics Health Center makes MMC stand out in the region. "It's important to have that geriatric presence in this part of Central New Jersey," Dr. Riaz says. "I like being an advocate and a voice for my patients. Being involved with people for a long period of time and sharing life experiences with them are among the reasons I enjoy geriatrics so much."

To make an appointment or learn more about services offered through the Geriatrics Health Center, call **732.923.7550** or visit **www.rwjbh.org/mmcgeriatrics**.





NEW ANKLES = MORE MOBILITY

THE JOINT REPLACEMENT SURGERY FEW PEOPLE KNOW ABOUT

Ankle joints often don't get the same attention as knees and hips, but they're just as crucial for everyday mobility. Your ankles allow you to stand, walk, climb and move in most situations involving use



GLENN GABISAN, MD



ARON M. GREEN, MD

of your legs—especially those involving irregular surfaces.

“With loss of normal ankle joint function, the ability to move or traverse uneven terrain can become difficult if not impossible,” says Aron M. Green, MD, an orthopedic surgeon at Monmouth Medical Center (MMC). Breaking an ankle or developing arthritis in the joint can cause as much disability as advanced arthritis in knee and hip joints or a chronic medical condition that can affect mobility such as diabetes, he says.

Yet many patients aren't aware that joint replacement surgery is available

for ankles along with more common replacement procedures for knees and hips.

Ankle replacements may be less familiar partly because technology allowing specialized surgeons to switch natural ankle components with synthetic implants only became widely available in the 1990s. “Since then, prosthetic designs and surgical techniques have improved significantly, giving surgeons an even greater ability to relieve pain, preserve motion and improve function,” says Glenn Gabisan, MD, an orthopedic surgeon at MMC.

A CUSTOM FIT

People who need ankle replacement typically suffer from ankle arthritis, a painful loss of cushioning cartilage that normally lies between bones and helps joints move smoothly. In many cases, arthritis develops after an ankle fracture or multiple sprains. Less common causes include degenerative or rheumatoid arthritis.

Surgery can be performed as an outpatient procedure under regional anesthesia with the patient often awake. The operation entails first removing part of the shinbone (tibia) and anklebone (talus). “This process essentially removes the arthritis,” says Dr. Green.

Surgeons then install metal joint surfaces with a plastic bearing surface in between. Advanced imaging and computer technology now allow implants to be custom-made to fit each patient's individual anatomy and ensure the foot and ankle are precisely aligned.

Many patients are able to return home the day of surgery, although they should rest and elevate the leg for at least two weeks. Pain medications may be given and should be taken as directed by the physician.

The best candidates for ankle replacement surgery aren't excessively overweight or prone to high-impact activity, as too much force on the joint may cause the implant to wear out faster than desired. “Ankle pain, stiffness and swelling exacerbated by walking are signs of ankle arthritis,” Dr. Gabisan says. “If you have these symptoms, you may want to seek an evaluation by a physician.”

To learn more about joint surgery services at Monmouth Medical Center, visit www.rwjbh.org/ortho.



3 FAST FACTS ABOUT CANCER CLINICAL TRIALS

HOW RWJBARNABAS HEALTH AND RUTGERS CANCER INSTITUTE OF NEW JERSEY OFFER TOMORROW'S TREATMENTS TODAY

Cancer clinical trials often save lives. If you or a loved one needs treatment for cancer, here's what you should know:

FACT #1 You don't have to travel to a nearby city, such as New York or Philadelphia, to access a clinical trial.

As New Jersey's only National Cancer Institute-Designated Comprehensive Cancer Center, Rutgers Cancer Institute of New Jersey, together with RWJBarnabas Health (RWJBH), offers a wide range of clinical trials, many of which aren't available



HOWARD HOCHSTER, MD

elsewhere.

Patients may participate in a clinical trial either at an RWJBH hospital near where they live or at Rutgers Cancer Institute.

"We've integrated cancer care so that we're putting the standards and expertise of an NCI-Designated Comprehensive Cancer Center, as well as clinical trials, in all 12 hospitals in the RWJBH system," says Howard Hochster, MD, FACP, Director, Oncology Research for RWJBH, and Associate Director, Clinical Research, for Rutgers Cancer Institute.

FACT #2 Clinical trials have led to significant advances in treatment.

Treatments developed through these trials have helped tens of thousands of patients.

For example, Rutgers Cancer Institute:

- Was the first to offer trials with specific immunotherapy drugs that worked for many skin cancers, especially Merkel cell carcinoma.
- Participated in a trial for a first-line colon cancer treatment that led to excellent responses for a number of patients, making them eligible for potentially curative surgery.
- Has pioneered immunotherapy treatments resulting in better management of many cancers, including renal cell cancer and bladder cancer.

"When I started out treating colon cancer 25 years ago, we had only one drug available, and it dated back to the 1960s," says Dr. Hochster. "Since that time, we've developed three new chemotherapy drugs and five new targeted drugs for colon cancer, and all of them were developed through clinical trials. Now people are living with colon cancer, on average, four times as long as they used to."

FACT #3 Clinical trials are not a last resort.

"It's important for people to understand that enrolling in a clinical trial is often an option for a first-line or early treatment," says Dr. Hochster. "These trials are a way for us to give patients the latest treatments before they're widely available. They offer tomorrow's treatments today."

To determine whether a patient would be best suited for a clinical trial or for standard care, each individual case is evaluated by a multidisciplinary team of cancer experts from throughout RWJBH and Rutgers Cancer Institute.

Rutgers Cancer Institute and RWJBH currently offer approximately 270 different clinical trials.

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

To learn more about clinical trials at RWJBarnabas Health and Rutgers Cancer Institute of New Jersey, call 844.CANCERNJ or visit www.cinj.org/clinical_trials.



LISTENING TO YOUR HEART

WHAT CAN A DIGITAL CARDIAC DEVICE
TELL YOU ABOUT YOUR HEART'S RHYTHM?



“Call your doctor,” said the message on the 87-year-old woman’s Apple Watch.

A regular walker and exerciser, the woman wasn’t feeling right, so she’d



PARTHO SENGUPTA, MD



GARY ROGAL, MD

checked the Heart Rate app. It showed that her heart rate was significantly slower than normal.

Her son took her to the emergency department, where an electrocardiogram determined that there was a problem with the electrical signals in her heart. The next morning, doctors implanted a pacemaker.

“Her diagnosis was clearly aided by her having an Apple Watch,” says the woman’s cardiologist, Gary Rogal, MD, Medical Director for RWJBarnabas Health Cardiovascular Services and a member of RWJBarnabas Health Medical Group. “I believe wearable digital devices

that measure heart rhythm will become a major addition to the diagnostic tool kit for cardiologists.”

Who should wear one of these devices? The short answer: people whose doctors recommend it.

“Wearable cardiac devices are very handy tools, but you have to be selective about how you use them,” says Dr. Rogal.

THE HEART’S RHYTHM

The main value of wearable cardiac technology lies in its ability to detect cardiac arrhythmias, or irregular heartbeats, Dr. Rogal explains. These

condition that's anywhere from harmless to life-threatening.

"If I'm concerned about arrhythmia based on what the patient is telling me, but just can't nail down the diagnosis, I might suggest that a patient use a wearable cardiac device," says Dr. Rogal. "The decision should be made along with a physical exam and a knowledge of the patient's medical history and symptoms. If there's no real reason to have one, wearing the device could do nothing more than make a patient anxious."

NEW TOOLS

An early form of wearable cardiac technology, the Holter monitor, has been around for decades. This device uses electrodes (small, plastic patches on the skin) to record the electrical activity of the heart.

"A patient can wear a Holter monitor for 24 to 48 hours or even longer," Dr. Rogal explains.

"The reality is, though, that some patients have arrhythmias once every few weeks or even every few months, and a Holter monitor could miss that," he says. "That's the type of thing a smartwatch would pick up."

Dozens of wearable devices are on the market today. Examples include:

KardiaMobile, a pocket-sized portable EKG machine that allows patients to put their fingers on sensors and share the results with their doctor.

The MCOT Patch System, which monitors the heart rhythm for two weeks via a sensor on the patient's chest.

Other digital cardiac devices, which must be implanted by a physician, are also coming into wider use. Examples include:

A device called **CardioMEMS**, which monitors pulmonary artery pressure and sends the results to a team of clinicians.

A loop recorder, a device smaller than a USB flash drive, that's placed just

underneath the skin near the breastbone. It can continuously record a patient's heart rhythm for up to three years. "If a patient calls me and says, 'Hey, I'm feeling funny, a little lightheaded,' I can interrogate the loop recorder and see what the heart rhythm was during that symptom," says Dr. Rogal.

ARTIFICIAL INTELLIGENCE

The key to the success of these technologies lies in artificial intelligence (AI)—the ability of a computer to compare an individual's data against that of thousands of other patients and flag information that may be significant.

"AI allows information to be provided to the care team in a very nuanced way," says Partho Sengupta, MD, Chief of the Cardiology Service Line at Robert Wood Johnson University Hospital (RWJUH) and Chief of the Division of Cardiology at Robert Wood Johnson Medical School. "The device will only send an alert if it thinks the data is moving in the wrong direction and the patient is not doing well, as opposed to a steady stream of data, which can be overwhelming."

The cardiology team at RWJUH meets regularly with doctors in the community to discuss the digital transformation of cardiology and consider innovations for treatment. Dr. Sengupta and his colleagues are conducting several clinical trials, including one for an armband that can monitor multiple physiological signals and offer personalized recommendations for a patient's care.

"For the future of cardiology, our overall concept is that care starts in the patient's home and ends at home, with the hospital and the clinic only points along the way," Dr. Sengupta says. "In order for us to connect the whole journey, we need to have the ability to continuously monitor a patient's health."

"It's like how we use a GPS to help us on a road journey," he says. "Now it's time to take that approach and apply it to our health journeys."



"FOR THE FUTURE OF CARDIOLOGY, OUR OVERALL CONCEPT IS THAT CARE STARTS IN THE PATIENT'S HOME AND ENDS AT HOME, WITH THE HOSPITAL AND THE CLINIC ONLY POINTS ALONG THE WAY."

Partho Sengupta, MD

occur when the electrical signals that coordinate the heart's beats don't work properly. In turn, the heart can't pump blood effectively.

Symptoms of arrhythmia include a fluttering in the chest, shortness of breath, fainting, dizziness or a feeling that the heart is racing or beating too slowly. The symptoms may be brief or long-lasting, and they can indicate a

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**.



Two decades after 9/11, double lung transplant recipient Tony Moyet visits the NY Waterway ferry.



THE FREEDOM TO BREATHE

WITH A DOUBLE LUNG TRANSPLANT, A BLOOMFIELD MAN IS REBORN ON THE FOURTH OF JULY.

On Sept. 11, 2001, Tony Moyet began his workday the same way as he had for the previous five years, by transporting about 300 commuters per trip from Hoboken to the World Financial Center in Manhattan on a NY Waterway ferry.

“That morning, though, when I dropped off a set of passengers, I saw the gaping hole in the North Tower, with flames coming out of it,” Moyet recalls. “I radioed [then NY Waterway port captain] Michael McPhillips and told him to send boats down in case we

needed to help people evacuate.”

That was after the first plane hit the World Trade Center. When the second one hit, crowds of people looked frantically for a way out of lower Manhattan. “We were the first boat to start evacuating,” Moyet recalls. “We were facing a stampede.”

He worked until 3 a.m. the next day, transporting people away from danger. For the next year and a half, he continued to work in the Ground Zero area, shuttling federal agents, policemen, firemen and workers from throughout the country to lower Manhattan.

Some two decades later, Moyet himself needed help. In January 2018, he sought care for what he thought was a severe cold with a cough that wouldn't stop. “My doctor told me it was COPD [chronic obstructive pulmonary disease],” he says. Long-term lung problems are an unfortunate reality for many 9/11 first responders, who breathed in massive amounts of smoke, dust and fumes.



THIRUVENGADAM
ANANDARAGAM, MD



JESUS GOMEZ-ABRAHAM,
MD

FINDING A MATCH

Once Moyet received his COPD diagnosis, his lung function deteriorated rapidly. By spring 2020, he had developed end-stage COPD/emphysema and end-stage advanced pulmonary disease. He needed inhaled oxygen 24 hours a day; he couldn't climb stairs or sleep without it.

"He told me, 'Doc, I just need two more years to see my daughter graduate from high school,'" says pulmonologist Thiruvengadam Anandarangam, MD, Division Chief, Pulmonary and Critical Care Medicine at Newark Beth Israel Medical Center (NBI). "I told him that we're hoping we can give him enough time to see her graduate and also to walk her down the aisle someday."

Moyet's best hope to extend his life was a double lung transplant. "At the time, he was on 17 medications and medical management wasn't providing any more relief," says transplant surgeon Jesus Gomez-Abraham, MD, Associate Surgical Director of Lung Transplantation at NBI and a member of RWJBarnabas Health Medical Group.

Dr. Gomez-Abraham added Moyet to the lung transplant database on Friday, July 2. While the average lung transplant patient waits four months for a match, and even longer when a double lung transplant is required, Moyet's care team found his match the very next day. "That was amazing—very unusual," Dr. Anandarangam says. "He was listed on Friday. On Saturday, we found a donor in a neighboring state. I traveled there to look at the organs, and they matched Tony's size and blood type perfectly."

On Sunday, July 4, Dr. Gomez-Abraham performed the double lung transplant. Eighteen days later, Moyet returned home.

BREATHING EASIER

His fast recovery, say his doctors, was driven by his determination to get better. "When I saw him just before the transplant, he was already in better shape than the last time I had seen him," Dr. Gomez-Abraham says. "He had done what he needed to do to improve his nutrition, and was doing pulmonary rehabilitation and physical therapy to increase his chance of better results."

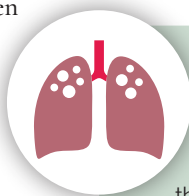
Moyet credits his caregivers at NBI for their guidance and persistence. "After the transplant, I had to learn to walk and move all over again," he says. "My nurses pushed me to keep going, even on days I didn't want to walk. They were dressed in blue; I called them my Blue Angels. They're the sweetest people in the world."

Just two months after his double lung transplant, Moyet, 65, was taking walks again with his wife, Arlene, and 15-year-old daughter, Sophia. "I don't need oxygen, and my lungs are working great," he says. He commemorated the 20th anniversary of 9/11 by joining a group chat hosted by the World Trade Center Health Program. And he's planning for a bright future, including a possible trip to Europe.

"My doctors are great people—miracle workers," Moyet says. "They cared so much and saw me in the hospital every day. It was a great team that put me all back together again."



Tony Moyet with his family at NBI's cardiothoracic ICU, several days after his lifesaving lung transplant surgery.



SPECIAL CARE FOR SERIOUS LUNG PROBLEMS

People with the most complex lung conditions rely on the Advanced Lung Disease and Transplant Program at Newark Beth Israel Medical Center (NBI), the only lung transplant program in New Jersey.

Who is a candidate for a lung transplant?

"The majority of patients have end-stage COPD and emphysema," says Jesus Gomez-Abraham, MD. "Other possible candidates are those with cystic fibrosis or pulmonary fibrosis as well as those with certain congenital cardiac diseases."

Candidates at NBI are evaluated through a multidisciplinary approach that includes surgeons, pulmonologists, cardiologists, gastroenterologists and others.

What is life like after a lung transplant?

"Patients will increase their lung function capacity up to 60 to 90 percent," says Dr. Gomez-Abraham. "Once the transplant has settled in, the majority of patients do not need oxygen. They can go to the mall, go to the beach, go to the family reunion, go back to work. The lung transplantation gives them the freedom to develop a normal life."

To learn more about transplant services at Newark Beth Israel Medical Center, call **888.724.7123** or visit **www.rwjbh.org/lungtransplant**.



COPING WITH EATING DISORDERS: TIPS FOR FAMILIES

- Express honest affection, verbally and physically.
- Teach children to communicate with assertiveness so they can resist inappropriate messages from their peers, the media and others about weight.
- Do not demand weight gain or berate a family member.
- Develop a dialogue about personal issues other than food and weight.
- Get support and educate yourself through books, professional help and talking with other families.

OVERCOMING EATING DISORDERS

CASES HAVE BEEN ON THE RISE DURING THE PANDEMIC, ESPECIALLY AMONG TEENS.

Being quarantined at home, not being in school for extended periods, not seeing friends or playing organized sports: The restrictions of the pandemic have been keenly felt by adolescents.

Pandemic-related stressors seem to be behind a recent dramatic increase in reported symptoms of eating disorders—binging, purging, drastically reduced caloric intake—as well as a doubling of hospitalizations for those issues.

“The kids we’re seeing are much more medically compromised and much more entrenched in the behaviors than we’ve seen in the past,” says Lynn Corey, LCSW, CEDS/S, CETP, Clinical Manager of Behavioral Health Outpatient Services at Robert Wood Johnson University Hospital (RWJUH) Somerset.

“The pandemic has made the eating disorders worse, because so much of teens’ lives feels out of their control,”

explains Corey, who works with the RWJUH Somerset Eating Disorders Program. “An eating disorder is really not about food; it’s a maladapted coping mechanism. Food becomes used as a means of giving themselves power over their lives.

“Moreover,” Corey continues, “when teens aren’t in school, there are fewer eyes on them—school nurses, guidance counselors and teachers—to notice changes and collaborate with parents.”

GETTING HELP

If a parent is worried about a child’s eating habits, a trip to the primary care provider is a good first step, Corey says. “If the pediatrician feels things aren’t looking good, that can open the door for parents to set up an evaluation with our program.”

Thanks to its hospital affiliation, the RWJUH Somerset program is

equipped to assess potential medical complications in a patient—a critical point, because eating disorders can cause harm to every organ system in the body. Initial tests may include blood work, an electrocardiogram and more.

The patient will also undergo a psychiatric evaluation to determine whether he or she is a candidate for one of the program’s levels of treatment:

- Inpatient treatment in a 14-bed unit that offers psychological, medical, nursing and nutritional care.
- Partial hospitalization, up to five days a week, with three hours of therapy per day.
- Intensive outpatient services, up to three days a week, with three hours of therapy per day.

The program offers weekly support groups for patients and for family and friends. “Our programs are in-person, not virtual, because that human interaction is so important in connecting with patients,” Corey says. “So many people tell us, ‘I just don’t want to talk to a computer screen.’”

To learn more about RWJUH Somerset’s nationally recognized Eating Disorders Program, call **800.300.0628** or visit www.rwjbh.org/eatingdisorders.



Professional third baseman Todd Frazier—a local hero since his role on the Toms River 1998 Little League World Series Championship team—and his wife, Jackie, have stepped up to the plate for CSH. Above, the Fraziers with Mark Montenero and Ed McKenna, co-chairs of the Transforming Lives 2.0 campaign.

A BOLD VISION FOR CHILDREN



Children's Specialized Hospital®

An RWJBarnabas Health facility

AN AMBITIOUS CAPITAL CAMPAIGN AIMS TO ENSURE THAT ALL CHILDREN CAN REACH THEIR FULL POTENTIAL.

When the youngest son of Todd and Jackie Frazier was hospitalized briefly, his parents got a window into what parents of patients at Children's Specialized Hospital (CSH) go through.

"We understand that every day your child is not well, you're waiting for that bit of good news, for your child to make progress from the day before," says Todd, a local Toms River legend and Major League Baseball All-Star. "When we visited Children's Specialized, we were able to see that everyone on the staff at the hospital is so passionate about caring for these children."

"The whole vibe was so loving and positive," says Jackie Frazier. "Everyone

needs to know that this place provides the absolute best care for kids living with special needs."

So when the Fraziers were asked to team with the CSH Foundation to help raise \$45 million in support of the Transforming Lives 2.0 capital campaign, they readily stepped up. "We want everyone to know that each and every one of us can make a difference for kids living with special needs right here in New Jersey by supporting the expansion of Children's Specialized through this campaign," says Todd.

MAJOR INVESTMENTS

The Transforming Lives 2.0 campaign aims to do nothing less than design the next generation of care through major investments in both inpatient and outpatient resources. Improvements

will include new technologies, such as artificial intelligence, and expansion to new locations. A particular focus is on care for patients with autism, including sophisticated new technologies for screening, assessment, intervention and caretaker training.

The Transforming Lives 2.0 campaign is co-led by community leaders and members of the CSH Foundation Board of Trustees Mark Montenero, President of Autoland Toyota, Jeep, Chrysler, Dodge, and Ram Trucks in Springfield, and Ed McKenna, Esq., Senior Partner at McKenna, Dupont, Stone and Washburne, and former mayor of Red Bank.

"This campaign will enable us to increase access to CSH's essential and innovative programs and services," says Matthew B. McDonald III, MD, President and CEO of CSH. "With every new patient we meet through this period of expansion and enhancement, we get one step closer to realizing our vision of a world where every child can reach their full potential. Having the Fraziers on board, as well as the other esteemed cabinet members, makes me confident that we will reach our goal."

To learn more or make a donation to enhance the future for New Jersey's children living with special healthcare needs, visit www.childrens-specialized.org/transforminglives or write to foundation@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 a full scope of developmental, behavioral and mental health concerns. We have convenient locations throughout the state: Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Monmouth, New Brunswick, Newark, Somerset, Toms River, Union and West Orange.

TOBACCO RECOVERY AT YOUR FINGERTIPS



A NEW SERVICE PROVIDES CUSTOMIZED SUPPORT.

You're trying to quit smoking. You really want a cigarette. What do you do?

Pills, medications and patches can help a person overcome a nicotine addiction. But equally important is to have support from the people in your life—loved ones, colleagues, healthcare providers—and from trained counselors who understand just how challenging the journey can be.

The free Nicotine and Tobacco Recovery Program offered by the RWJBarnabas Health Institute for Prevention and Recovery (IFPR) employs a full range of tools to quit smoking, including counseling and support groups. Last summer, the program unveiled a new support option: a text-based service known as the Tobacco Recovery Concierge. The service offers real-time support via texting for moments when triggers or cravings are strong.

“In these cases, we can offer tips for a behavior change that they can make to help the craving subside, such as going

for a walk, having a drink of water or doing breathing and relaxation exercises,” explains Monica Hanna, MPH, CHES, NCTTP, Assistant Director of the Nicotine and Tobacco Recovery Program.

“Research has shown that cessation counseling and support can double a person’s chances of success when quitting nicotine,” she says. “This new service allows us to tailor messages to patients for whatever they’re going through at the moment.”

NOT JUST A HABIT

Powered by GoMo Health, the Tobacco Recovery Concierge provides regular motivational and educational messages based on where a person is in his or her quit journey. These scheduled messages might include a link to a website where people share their stories, or to a calculator for figuring out exactly how much a person will save by quitting nicotine.

For times when participants need immediate support, they can text one of

a number of keywords such as “craving,” “mood,” “relax” or “meet.” Responses might include motivational messaging or a link to login information for IFPR Zoom meetings. A chat feature is also available through a HIPAA-secure portal.

The program, which began in July 2021, has served more than 200 people so far and gets about 30 new signups each month, Hanna says.

Quitting nicotine can be as hard as quitting heroin or cocaine, research shows. On average, people try to quit smoking five to seven times before they quit for good.

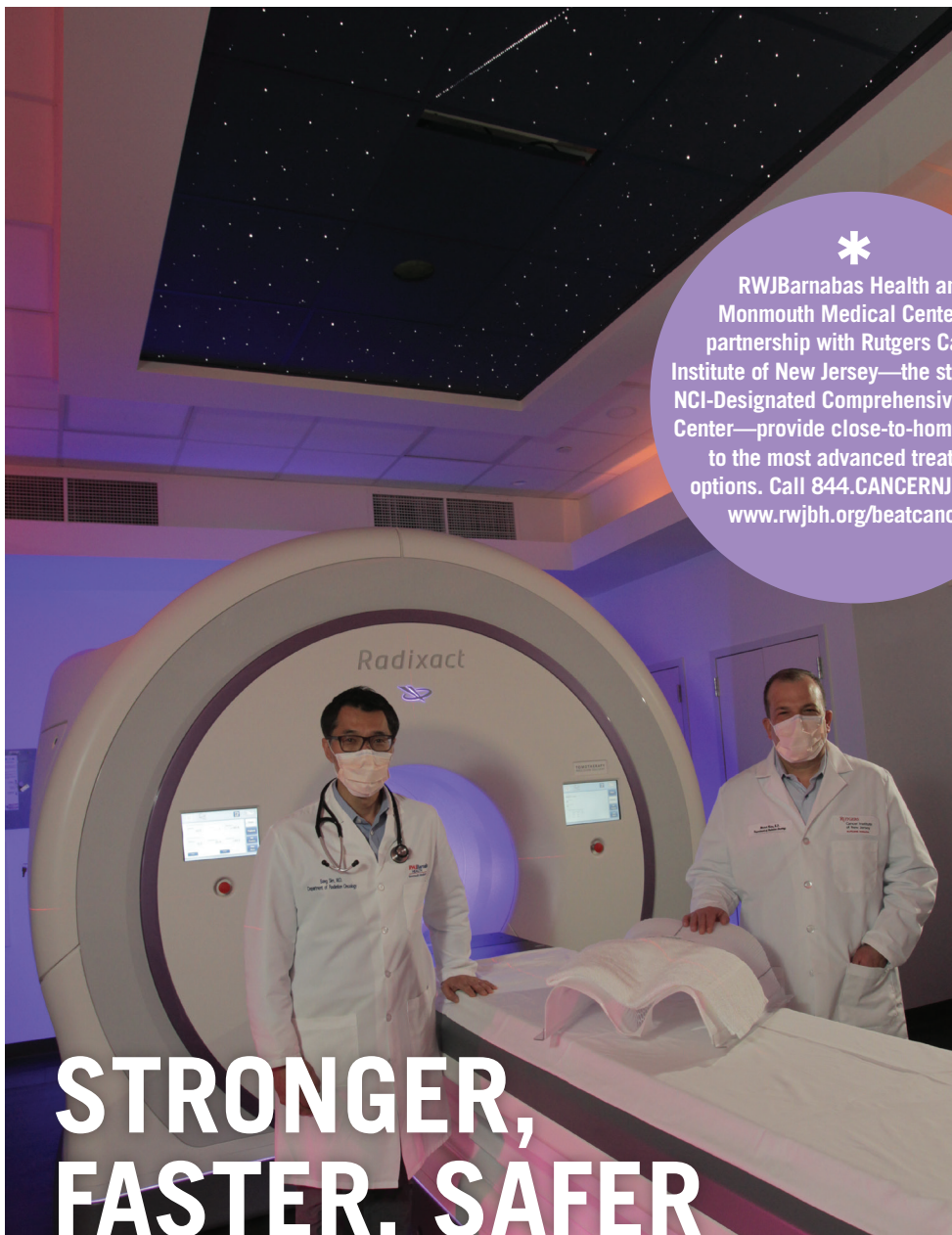
“Our goal is to break down the stigma of nicotine addiction. Even healthcare providers too often regard it as a bad habit,” Hanna says. “Instead, we approach it the same way we would treat a chronic disease such as diabetes or heart failure. We help patients deal with the physiological effects. And we know that when we combine that approach with counseling, a person’s chances of success are much greater. No one should feel like they have to make this journey alone.”



**YOU CAN QUIT.
WE CAN HELP.**

The Nicotine and Tobacco Recovery Program includes nicotine replacement therapies, recommendations on prescription smoking medication, and individual and group counseling. The program, funded by the New Jersey Department of Health Office of Tobacco Control, Nutrition and Fitness, is offered free of charge by the RWJBarnabas Health Institute for Prevention and Recovery in Essex, Mercer, Middlesex, Monmouth, Ocean, Somerset and Union counties.

To learn more, call **833.795.QUIT (7848)**, email quitcenter@rwjbh.org or visit www.rwjbh.org/nicotinerecovery.



STRONGER, FASTER, SAFER

AN UPGRADED RADIATION THERAPY UNIT ALLOWS EVEN MORE PRECISE CANCER TREATMENT.

When Monmouth Medical Center (MMC) began offering tomotherapy—image-guided radiation therapy—more than a decade ago, it reflected the hospital’s leadership in advanced cancer treatment. Now MMC is continuing its longtime innovation with a significant equipment upgrade and renovation of the tomotherapy suite.

Tomotherapy combines radiation treatment with computed tomography (CT) scans that provide 3D images showing the exact location of a tumor. During

treatment, the tomotherapy unit can rotate 360 degrees, allowing it to direct cancer-destroying radiation beams from nearly any angle. Beams can be shaped and controlled to precisely target the tumor.

“Utilizing tomotherapy, we can optimally deliver tumoricidal doses to the cancer but minimal radiation to normal

Sang Sim, MD (left), and Mitchell Weiss, MD, Chair of Radiation Oncology (right), can now perform more precise radiation therapy with the Radixact tomotherapy system in a renovated unit that includes calming ceiling lights resembling a starry sky.

RWJBarnabas Health and Monmouth 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. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

tissues around it,” says radiation oncologist Sang Sim, MD, a member of RWJBarnabas Health Medical Group. “Each patient has their own individualized treatment plan that defines how the machine delivers radiation to treat their cancer.”

REAL-TIME VIEW

The new unit, called the Radixact tomotherapy system, adds a level of advancement to existing capabilities. “It provides better imaging that allows us to view the tumor in real time,” Dr. Sim says. This allows unprecedented flexibility in tailoring treatment.

“Normally, we make a plan and treat the patient with that plan,” says Mitchell Weiss, MD, Chair of Radiation Oncology, MMC, and a member of RWJBarnabas Health Medical Group. “The new unit now allows us to also review the anatomy—both healthy tissue and tumor—while the patient is on the table and in minutes adjust the plan if the anatomy has changed in any way.”

Small changes in tissue positions can occur due to factors such as normal organ shifts, fullness or emptiness of the bladder or rectum, or tumor shrinkage after previous radiation sessions. “Being able to fine-tune in real time allows us to better target cancer, avoid normal tissue and minimize both short- and long-term side effects,” Dr. Weiss says.

Such precision allows radiation oncologists to deliver stronger, higher doses in fewer sessions without increasing damage to healthy tissue.

The renovated tomotherapy unit also features a calming décor that includes an array of small ceiling lights. “It almost looks like a starry sky,” Dr. Weiss says. “Our new unit not only allows us to provide the latest highly advanced radiation therapy but also helps patients relax while they receive it.”

To learn more about advanced radiation treatment options at Monmouth Medical Center, call **844.CANCERNJ**.





SURVIVING AND THRIVING

*
RWJBarnabas Health and Monmouth 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. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

WITH TODAY’S THERAPIES, MANY WOMEN CAN LIVE FULLER LIVES DURING CANCER TREATMENT AND BEYOND.

Hearing you have breast cancer is never easy. “It’s a difficult diagnosis,” says Trishala Meghal, MD, a medical oncologist at Monmouth Medical Center (MMC) and a member of RWJBarnabas Health Medical Group. “It’s especially hard for women with young children, whose first thought is about their young family.”

But as breast cancer treatments increase, women have more reason for hope—and greater flexibility, Dr. Meghal says. Many women can tailor therapies to maintain a sense of normalcy or control. For example, a medical oncologist may offer a patient facing multiple courses of chemotherapy the choice to receive a milder one first if it fits her schedule better, or adjust treatment to avoid hair loss during a child’s graduation or wedding.

“We’ve made a lot of breakthroughs,”



TRISHALA MEGHAL, MD

Dr. Meghal says. “Overall prospects for breast cancer patients are good.” Here’s how three women have not only survived but thrived.



EXPLAINING TO THE CHILDREN

Shondilla Edgerson, 51, a home nurse in Neptune, didn’t expect a breast cancer diagnosis despite having a BRCA1 gene mutation, which increases risk for the disease. “There’s no breast cancer in my family,” Edgerson says. “Instead, women in my family have passed away from ovarian, cervical or uterine cancer.” She’d even had a hysterectomy—surgical removal of the uterus—to help prevent such gynecologic cancers.

When screening discovered breast cancer, the tumor in her right breast was diagnosed as stage one: small, confined to her breast and less threatening than a more advanced cancer would be. But it was also triple negative, a type of breast cancer susceptible to fewer treatment options.

“I appreciated how Dr. Meghal included me in the plan,” Edgerson says. “She would say, ‘What do you think?’ about a suggested treatment, or ‘Take time to think about it.’” They settled on a course of chemotherapy and a double mastectomy to prevent the cancer from recurring.

A major concern was helping Edgerson’s 10- and 11-year-old daughters process her diagnosis. She knew her husband, Bryan, would be a tremendous support, as would family and friends. For additional ideas, Edgerson turned to the cancer center’s psychosocial support services to assist her.

“The oncology social workers are skilled in explaining to children and help them deal with a parent’s diagnosis,” Edgerson says. “I knew I would probably be too emotional trying to tell them what’s happening with Mommy.”

Edgerson decided not to hide side effects like hair loss from her girls. “I had to start letting them see that this was something serious,” she says. “As women, we need to let our kids know we’re very strong. I also wanted my daughters to know that I needed their help through my treatment and healing.”



THE POWER OF POSITIVITY

Cara Yakey, 55, a yoga teacher who lives in Monmouth Beach, was doing a pose on her stomach when she felt something hard on her chest. “It felt like there was a piece of gravel under my mat,” she says.

The hardness was a lump in her right breast. After a mammogram discovered abnormal cells and a biopsy was performed, Yakey was shocked to receive a diagnosis of triple negative breast cancer. But she quickly shifted focus. “There was no reason to cry or be mad,” she says. “I just concentrated on healing.”

Keeping a positive attitude helped sustain her as she went on to receive a lengthy course of chemotherapy. “I received phenomenal care from the nurses who provided my infusions,” she says.

But genetic testing revealed she was positive for the BRCA1 gene mutation, which made a recurrence more likely. With input from a multidisciplinary team that also included a breast surgeon and a genetic counselor, Yakey decided to undergo a bilateral mastectomy to remove both her breasts.

Yakey was grateful for her partner, Joe, “who was with me every step of the way,” she says. Her grown son, Lucas, lives in California, but she viewed the distance almost as another blessing, as she didn’t want him to worry. He eventually flew East to celebrate her completing chemotherapy. “We kept things light with simple normalcy,” she says—“going out to breakfast, walking the dog, enjoying mojitos in the backyard.”

She’s now well on the road to recovery. “It’s all about the team you surround yourself with,” says Yakey. “Dr. Meghal was among the first providers I met, and she said, ‘You’re going to be okay.’ I really needed someone to say that.”



THE ADDED BENEFITS OF CLINICAL TRIALS

If you are diagnosed with cancer, participating in a cancer clinical trial may offer you a number of advantages in addition to the standard treatment. Through MMC’s partnership with Rutgers Cancer Institute of New Jersey, the state’s only NCI-Designated Comprehensive Cancer Center, patients have access to the latest clinical trials. Potential benefits include:

- Working with top specialists who conduct research and are highly knowledgeable about the latest treatments.
- Being offered cutting-edge treatments not yet available to the general population that may help you live longer and/or improve your quality of life.
- Playing a meaningful role in a study that could help other patients in the future.



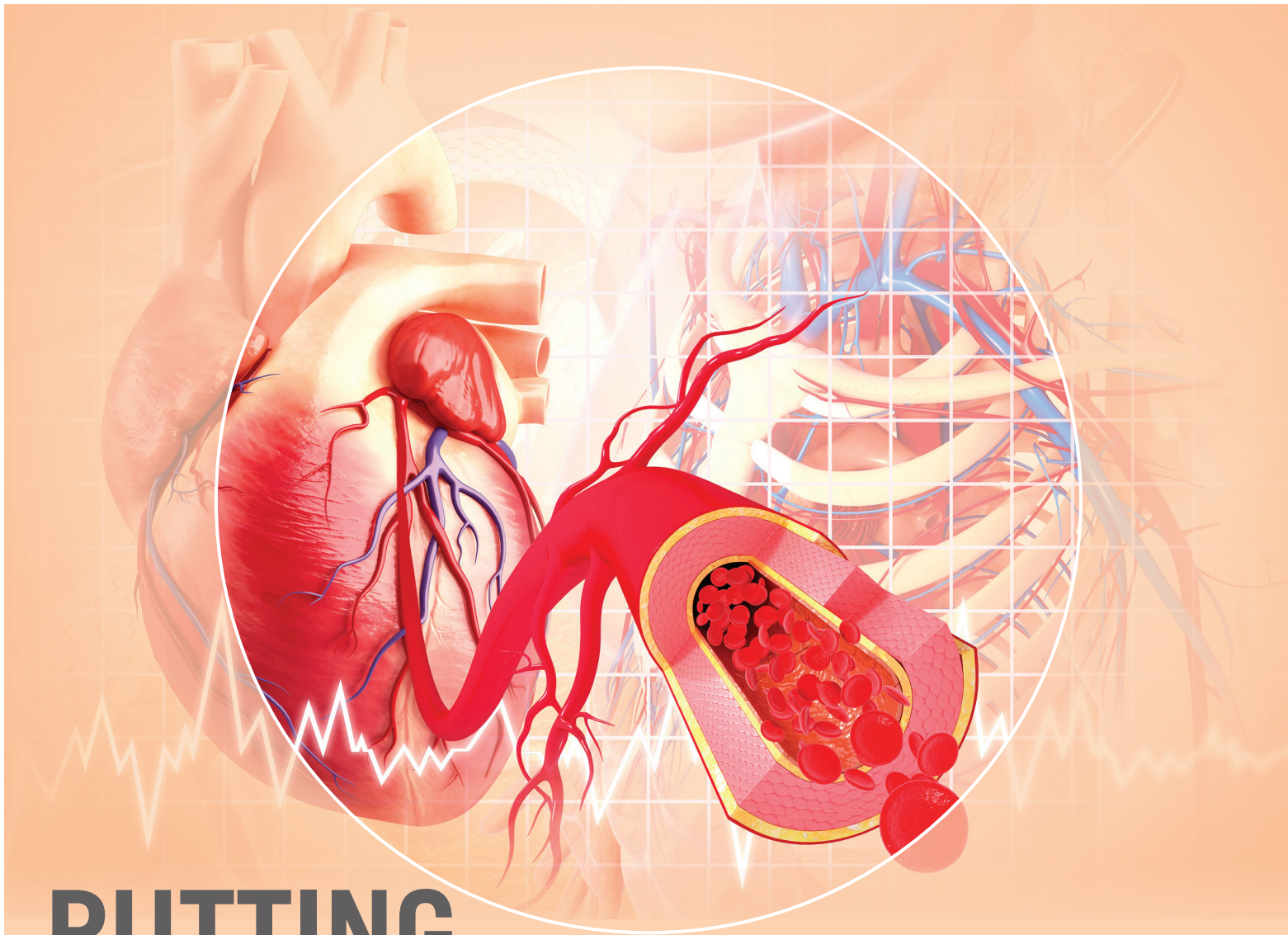
CARE AND SUPPORT

When Marcella Crowe, 63, a retired eighth-grade teacher in Freehold, was diagnosed with breast cancer in April 2021, she knew she could rely on her large family for support. The eighth of 10 children, Crowe especially looked to her mother and sister, Joanne. “They both survived breast cancer and were great role models,” Crowe says.

Joanne, a nurse, researched the area to find the best medical team for her sister. When they met Dr. Meghal and the cancer team at MMC, they knew they had made the right choice. “I felt like they treated me as an individual, not just a patient,” Crowe says. “Dr. Meghal even gave me her personal phone number in case I had questions.”

Doctors hoped a lumpectomy would eliminate the cancer from Crowe’s body. But cancer cells were found in three lymph nodes, indicating it had spread. She needed chemotherapy and radiation to destroy any remaining malignancy.

The regimen was challenging, but Crowe got through it thanks to what she calls her four-leaf clover during treatment. “My oncologist, surgeon and radiologist were each one of the leaves,” she says. “My family was the fourth.”



PUTTING CARDIO AND VASCULAR TOGETHER

**MONMOUTH HEART AND
VASCULAR OFFERS
COORDINATED CARE IN
ONE LOCATION.**

Many people think of cardiovascular medicine as one specialty. In reality, cardiology and vascular care are often practiced separately. But at Monmouth Heart and Vascular, an RWJBarnabas Health Medical Group practice affiliated with Monmouth Medical Center (MMC), the two disciplines are brought together by a complete medical team that puts all cardiovascular care in one place.

“Very often, people who have heart disease also have problems with blood vessels elsewhere in the body such as veins or carotid, renal or peripheral arteries,” says Randy Shafritz, MD, RPVI, FACS, Director of Vascular Surgery Services, Southern Region, a member of RWJBarnabas Health Medical Group and Clinical Associate Professor of Surgery at Rutgers Robert Wood Johnson Medical School. “Many patients

need crossover care, yet it's unusual to have a large cardiology practice that includes vascular specialists."

"We wanted to build a collaborative environment where we work as colleagues," says Isaac Tawfik, MD, Chief, Section of Cardiology, and Medical Director, Cardiac Catheterization Lab at MMC, Clinical Assistant Professor of Medicine, Rutgers Robert Wood Johnson Medical School, and a member of RWJBarnabas Health Medical Group. "That helps us practice better medicine and fosters the best possible outcomes for patients."

Here are five key ways you can benefit from combined cardiovascular services.

SEAMLESS CARE

At Monmouth Heart and Vascular, you can see a cardiologist, get tests, see a vascular specialist and receive treatments at the same location instead of going to different places for each of those services.

"We're a one-stop shop where everyone works together," Dr. Shafritz says. "That's more convenient for patients, expedites care and allows better communication between providers." Tests often used for both cardiac and vascular care can easily be shared along with provider notes. "We consult each other for questions that may be better addressed by a physician from the other specialty while staying in close touch with our patients," Dr. Tawfik says.

STATE-OF-THE-ART TESTS

The practice offers comprehensive, noninvasive diagnostic testing including the latest, most advanced platform and software for ultrasound imaging, which provides color and reveals flow dynamics as blood courses through vessels.



RANDY SHAFRITZ, MD



ISAAC TAWFIK, MD

Vascular tests can screen and monitor conditions such as abdominal aneurysm, endovascular repairs, peripheral artery disease and venous conditions such as varicose veins. "Many of our tests are highly specialized and not commonly available," Dr. Shafritz says.

Advanced cardiology tests include nuclear stress tests and 3D echocardiography that can identify subtle changes in heart function. "One way this can be useful is indicating whether a chemotherapy agent is affecting the heart's ability to contract," Dr. Tawfik says. "That's fueled development of a relatively new discipline called cardio-oncology where cardiologists and oncologists work in close collaboration to help certain cancer patients."

The practice has also launched a program in which cardiac MRIs help evaluate the heart's strength and answer crucial questions that can guide treatments. "Cardiac MRIs have also become an important way to identify an inflammation of the heart called myocarditis, which we're seeing a lot of with COVID-19," Dr. Tawfik says.

SPECIALIZED TECHNOLOGISTS

Highly trained providers called registered vascular technologists (RVTs) conduct and evaluate tests with a high level of expertise right on-site. "We have multiple RVTs, and that's important for obtaining high-quality studies," Dr. Shafritz says.

Doing tests where doctors practice further enhances communication about care. "If technologists have questions, they can go straight to the physician, and we are often able to intervene while the study is being performed to obtain the data we're looking for so the patient doesn't waste time getting a test that may have little clinical value," Dr. Tawfik says.

COMPREHENSIVE TREATMENTS

Monmouth Heart and Vascular offers a wide variety of interventional cardiology and vascular treatments, including



DO YOU NEED VASCULAR CARE?

You may be familiar with signs of heart disease such as chest pain or difficulty breathing with activity. But signs of vascular problems due to conditions such as diabetes are less well known. Consider seeing a vascular specialist if you experience key symptoms such as:

- Unexplained leg pain
- Pain with walking
- Ulcers or wounds on feet or ankles
- Recurrent infections
- Hair loss on legs
- Leg heaviness or swelling
- Visible varicose veins

minimally invasive angioplasty and stenting, pacemaker implantation and cardiac ablation. Vascular treatments also include endovascular treatment for aneurysm and peripheral arterial disease, and a variety of treatments for venous conditions such as deep vein thrombosis and varicose veins, including phlebectomy, Varithena treatment and cosmetic sclerotherapy.

HIGH-LEVEL EXPERTISE

"Many of our providers have subspecialty training even beyond their specialty training in cardiology or vascular medicine, such as electrophysiology for complete care of conditions like arrhythmia," Dr. Tawfik says.

"With our expert care, advanced testing and state-of-the-art facilities, we can do many things at a community hospital level that you'll find at a university medical center," Dr. Shafritz says. "Our combination of services provides comprehensive, personalized care close to home."

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



ROBOTIC SURGERY: NOW EVEN HIGHER-TECH



ROSTER OF EXPERTS

Monmouth Medical Center has a lineup of surgeons who are highly skilled with robotic technology in a range of disciplines.

BARIATRIC/GENERAL

Steven Binenbaum, MD
Frank Borao, MD
Michael Jaronczyk, MD
Gurdeep Matharoo, MD
Dmitry Oleynikov, MD

GENERAL SURGERY

Stephen Chagares, MD
Phillip George, MD
Ernest Ginalis, MD
Mark Schwartz, MD

GYNECOLOGIC ONCOLOGY

Thomas Hackett, DO
Blerina Salman, MD

OBSTETRIC/GYNECOLOGIC

Anthony Giovine, DO
Steven Goldstein, MD
Jack Gould, MD
Robert Graebe, MD
Craig Henderson, DO
Farbod Nabizadeh, MD
Brian Rogers, MD
John Vaclavik, MD

THORACIC

Richard Lazzaro, MD
Andrew Nguyen, MD

UROGYNECOLOGIC

Manish Gopal, MD

UROLOGIC

Pierre Mendoza, MD
Ilan Waldman, MD

MMC OFFERS STATE-OF-THE-ART CAPABILITIES AND EXCEPTIONAL EXPERIENCE.

It may be called robotic surgery, but robots aren't in charge. "People sometimes think robotic procedures are automated, but they're not," says Pierre Mendoza, MD, Director of Robotic Surgery at Monmouth Medical Center (MMC). "Every motion of the robot is controlled by the surgeon."

But robotic technology greatly enhances the surgeon's capabilities. "It revolutionizes the way we do surgery—with small incisions and advanced instrumentation," Dr. Mendoza says. That's especially true with recent upgrades to MMC's program.

If you need a procedure, these aspects of minimally invasive robotic surgery at MMC can help enhance your treatment.

- **The latest technology:** "We are the only surgical program in the area with the newest, single-port system," Dr. Mendoza says. Single port means all instruments enter the body through one incision instead of several, as is done with



PIERRE MENDOZA, MD

more common multiport systems. "That translates to less pain, better post-op appearance and anticipated lower rates of infection," Dr. Mendoza says.

- **More advanced instruments:** Innovations that make single-port access possible include

narrower instruments that bend with wrist-like movements inside the body yet don't collide. "We have excellent dexterity in small areas such as the abdominal cavity," Dr. Mendoza says. Scaled movements allow the surgeon's hand motions to translate into smaller movements by the robot. "This allows intense precision," he says.

- **3D imagery:** Cameras that let surgeons see inside the body offer high-definition resolution in 3D as well as magnification. "We can view structures that would be difficult to see with the human eye alone," Dr. Mendoza says. "Enhanced vision helps us minimize blood loss and preserve essential structures."

- **Same-day surgery:** Robotic surgeries often require less recovery, and all MMC robotic systems are now located in the Cranmer Ambulatory Surgery Center. "We have a hub dedicated just to robotic surgery in the part of the hospital that facilitates patients going home, where they'll be more comfortable and recover better," Dr. Mendoza says.

- **A specialized, diverse team:** Highly trained and experienced MMC surgeons perform a wide range of robotic surgeries. "Even within each specialty, we're expanding the diversity of what we do robotically," Dr. Mendoza says. "We also have a team with experts at every level—including nurses, surgical technicians and leadership staff—playing key roles. All these elements together keep MMC at the forefront of innovation."

To learn if you're a candidate for robotic surgery at Monmouth Medical Center, call **732.923.6070**.



WELCOMING A TOP SURGEON

A NATIONALLY RECOGNIZED LEADER IN MINIMALLY INVASIVE THORACIC PROCEDURES JOINS MONMOUTH MEDICAL CENTER.

A groundbreaking minimally invasive thoracic surgeon who has built a New York City hospital program with the top 10 outcomes in lung cancer for 12 consecutive years is bringing that unparalleled expertise to the RWJBarnabas Health Southern Region hospitals.

Richard S. Lazzaro, MD, joins Community Medical Center (CMC), Monmouth Medical Center (MMC) and Monmouth Medical Center Southern Campus (MMSC) from Northwell Health, where he served as system director of robotic thoracic surgery and as chief of thoracic surgery and director of robotic thoracic surgery at Lenox Hill Hospital.

Bringing more than 30 years of specialized expertise to the hospitals' thoracic surgery programs, Dr. Lazzaro has pioneered many groundbreaking firsts in minimally invasive surgery and is recognized nationally as a leader in this field. He made medical history in 2018 when he performed the world's first robotic repair of a collapsed trachea, and his accomplishments also include performing one of the first pulmonary lobectomies for intralobar pulmonary sequestration, a congenital lung condition.

Minimally invasive surgery is associated with less pain, a shorter hospital stay and quicker recovery, with reduced risk of infection and less scarring. Dr. Lazzaro uses minimally invasive techniques such as robotic surgery and video-assisted thoracoscopic surgery



RICHARD S. LAZZARO, MD

(VATS) for more than 95 percent of his patients to treat a wide variety of thoracic conditions.

"The field of medicine is very conservative, and the fundamental science and

judgment of medicine are very important, but things do change—in particular, technology changes," he says. "In my career, I've stayed true to medicine's conservative principles—our approach never deviates from the best practice for the thoracic disease or condition."

A RENOWNED EXPERT

Board-certified in general and thoracic surgery, Dr. Lazzaro completed his surgical and thoracic surgery fellowship training at North Shore University Hospital and State University of New York Health Science Center at Brooklyn, and fellowship-trained in minimally invasive thoracic surgery at the University of Pittsburgh Medical Center.

"When I began training as a surgeon, most surgery was done as open, invasive cases, but midway through my training we saw the introduction of minimally invasive surgery, and it was a paradigm shift," he says.

In New York, Dr. Lazzaro led an award-winning thoracic surgery program, and he and his team earned recognition from the Surgical Review Corporation as America's first Robotic Surgery Network of Excellence. He has presented at international conferences regarding his outcomes and techniques, which have been adopted at major medical centers throughout the country, and surgeons travel from throughout the country to train with him in robotic surgery.

LOCAL CONNECTION

Asked why he chose to join the RWJBarnabas Health Southern Region

team, Dr. Lazzaro notes that he has lived in Monmouth County since 2005, and that he is excited to bring the same level of care he established in New York programs to his home community.

"Together with my RWJBarnabas Health colleagues in surgery, pulmonology, internal medicine, radiology, pathology, oncology and gastroenterology, we will deliver the highest level of thoracic care to patients at CMC, MMC and MMSC," he says. "The team we're building will have a singular focus—that is, on the best outcomes for our patients."

Eric Carney, President and CEO of MMC and MMSC, notes that the addition of Dr. Lazzaro to the hospital's thoracic surgery program gives patients access to additional therapies and treatment options as well as a national leader in minimally invasive surgery.

"Our Robotic Surgery Program features an experienced team of surgeons utilizing the most advanced robotic systems available," Carney says. "Dr. Lazzaro shares our vision of a unified, robust and broad-based thoracic surgery program bringing state-of-the-art treatment to our patients. He is a leader in the field of minimally invasive thoracic surgery, and we are excited that his exceptional surgical expertise will help ensure that our patients have access to the most advanced treatment options."

To learn more or to schedule an appointment with Dr. Lazzaro, call **732.818.3811**.



Monmouth Medical Center Proud to be One of the Nation's Top Teaching Hospitals



One of 72 teaching hospitals to earn national distinction for quality and safety.

Monmouth Medical Center (MMC), an RWJBarnabas Health facility, has been named to the national list of Top Teaching Hospitals by the Leapfrog Group.

MMC is one of 72 hospitals to earn this coveted national distinction for demonstrating an extraordinary commitment to delivering safe, high quality patient care.