

CREATING WINDOWS OF OPPORTUNITY

t RWJBarnabas Health, our mission—our passion—is to improve the health of residents in the communities we serve. But we're equally committed to ensuring that New Jerseyans have opportunities to learn, develop and pursue their goals.

You'll see that commitment come to life in many ways: in free support groups and classes, in health services delivered to senior citizens at home, in housing and employment assistance provided to local residents, and more.

In this issue, we spotlight two ways in which RWJBarnabas Health is making a difference. Children's Specialized Hospital, an RWJBarnabas Health facility, has joined forces with Opportunity Project, an organization that helps adults living with the effects of traumatic brain injury. Together, the two organizations create a continuum of care and learning opportunities for patients with brain injuries, from childhood through adulthood. And in the state-of-the-art RWJBarnabas Health Athletic Performance Center, we're partnering with Rutgers University to provide spaces designed to optimize health-sciences learning and to give athletes the resources they need to reach their full potential.

Community Medical Center has a long history of offering health education and outreach programs designed to keep our community members healthy, and we are doing so in unique ways. We're collaborating with the Toms River Fire Department on a program that focuses on the health of these crucial first responders. Our firefighters put their lives on the line each and every day to protect us. It is our privilege to help them identify their own health risks and show them ways they can improve their health status. This is our ultimate goal for all who choose to call Ocean County home.

We're honored by the trust people place in us to care for their health. In return, we're continually working to increase opportunities for all New Jersey residents to live their best lives.

Yours in good health,

BARRY H. OSTROWSKY PRESIDENT AND CHIEF EXECUTIVE OFFICER RWJBARNABAS HEALTH



PATRICK AHEARN CHIEF EXECUTIVE OFFICER COMMUNITY MEDICAL CENTER

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HEALTH NEWS

A LEADER IN HEALTHCARE **EQUALITY**

Community Medical Center (CMC) has been recognized as a "Leader in LGBTQ Healthcare Equality" by the Human Rights Campaign Foundation. The distinguished honor of being selected as a healthcare equality leader is based on an annual comprehensive assessment identifying healthcare institutions that are leaders in efforts to offer equitable care to LGBTQ patients. The Foundation evaluates inclusive policies and practices related to LGBTQ patients, visitors and employees. CMC is one of eight RWJBarnabas Health facilities to be recognized.

A COMMITMENT TO THE COMMUNITY



committed to ensuring the health and well-being of community members. In June, CMC employees and medical staff

members donated more than 22,500 pounds of food to local pantries through Healthcare Harvest, the hospital's annual summer food drive. The CMC medical staff also gave a generous \$5,000 donation. Over the past 13 years, the hospital has donated 217,423 pounds of food to area food banks. The drive coincides with the end of the school year, when free meal programs are no longer available.

To ensure that children have what they need for a successful school year, CMC staff members donated 108 backpacks stuffed with supplies to the annual Tools 4 Schools Supply Drive. The supplies are distributed to area children through the Salvation Army Ocean County Citadel and Ocean Health Initiatives, Inc. These local organizations share CMC's and RWJBarnabas Health's commitment to improving the health and well-being of the community.

Community Medical Center



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heresa Blumberg was playing college rugby in October 2017 when she twisted to avoid falling on a teammate and heard a pop in her left knee. Theresa. a 21-year-old senior at Moravian College in Bethlehem, Pa., went to the nearest urgent care

facility. "I was told the injury was just a sprain," she says. But the pain in her left knee interfered with her daily activities. Theresa had trouble walking, sleeping, exercising and standing. "As a chemistry major, I was in the lab four to five times per week," she says. "Standing on my left leg was impossible."

In addition to her responsibilities as a student athlete. Theresa was a member of the Reserve Officer Training Corps (ROTC), a college program that trains students to become commissioned officers in the military. Theresa feared the injury could compromise her long-held dream to serve her country. "I was scared I wouldn't be able to commission [become an officer in the U.S. Army]," she says.

A MORE SERIOUS DIAGNOSIS

One month later, Theresa was still in pain, and she had trouble bending her knee. She had a magnetic resonance imaging (MRI) scan at a hospital near the university, and it revealed that she had actually torn the anterior cruciate ligament (ACL) and the meniscus in her left knee. (See "Common Knee Injuries.") When she was home in Bayville over Christmas break, Theresa saw David Dickerson, MD, an orthopedic surgeon at Community Medical Center (CMC) He reviewed the MRI scan and recommended ACL reconstruction with an autograft, in which the ligament is replaced with tissue from the body. For



DAVID DICKERSON, MD

the meniscus, Theresa needed a medial meniscal repair, in which the torn meniscus is stitched back together, and a partial lateral meniscectomy, in which damaged tissue is removed.

THERESA'S INJURY HAS BEEN LIFE-CHANGING. DURING HER RECOVERY FROM SURGERY. SHE PUSHED HERSELF IN WAYS SHE HAD NOT DONE BEFORE. "I'M STRONGER BOTH PHYSICALLY AND MENTALLY," SHE SAYS.

Fortunately, all of the procedures could be done in one outpatient surgery.

Theresa was nervous because she'd never had surgery before, but she was eager to recover because she needed medical clearance to serve in the Army. In January 2018, Theresa had the surgeries. Dr. Dickerson used Theresa's hamstrings to reconstruct her ACL. "Most young people, particularly athletes with welldeveloped muscles and tendons, have enough of their own tissue for an adequate graft," he says.

BACK IN ACTION

After the surgery, Theresa wore a brace that kept her leg straight for six weeks. She participated in physical therapy, which involved strengthening her quadricep and hamstring muscles and performing balance and endurance exercises. The hard work and determination paid off. "She did great," says Dr. Dickerson. "She was essentially asymptomatic five months later and back to nearly all of her usual activities seven months later."

In June 2018, Dr. Dickerson cleared Theresa for all activities, including rugby. She cried tears of happiness. She graduated from college in May 2018 and shipped out to Colorado to start her job as a second lieutenant transportation officer in the U.S. Army. She oversees a maintenance platoon of soldiers who repair vehicles and weapons and recently deployed to Kuwait.

Theresa's injury has been life-changing. During her recovery from surgery, she pushed herself in ways she had not done before. "I'm stronger both physically and mentally," she says.



COMMON KNEE INJURIES

People of all ages experience knee injuries—especially those involving the anterior cruciate ligament (ACL), which controls back and forth motion of the knee, and the meniscus, cartilage that cushions the joint. These tissues provide stability and are often torn in sports that involve sudden stops and changes in direction. Injuries can also occur as a result of aging (the tissue can deteriorate over time).

ACL injuries affect up to 250,000 people each year in the U.S., according to the Centers for Disease Control and Prevention. Meniscus tears, which often occur along with ACL injuries, affect 12 to 14 percent of the population, according to the American Academy of Physical Medicine and Rehabilitation.

Symptoms of an ACL tear include pain with swelling; loss of full range of motion; tenderness; and discomfort while walking. Signs of a meniscus tear include knee pain, stiffness, swelling, locking of the knee, and difficulty moving the knee. If you experience any of these symptoms, see a physician.

For a referral to a Community Medical Center orthopedic surgeon, call 888.724.7123 or visit www.rwjbh.org/ortho.



burning building. What may not be as obvious are the health risks associated with their bravery. For instance, firefighters are at risk of suffering a heart attack or sudden cardiac death while on the job. Over the past decade or so, nearly half of the nation's line-of-duty deaths were attributed to a heart attack, according to the United States Fire Administration. In addition, research shows that firefighters are at greater risk for developing cancer, including esophageal, colon, kidney, bladder, lung, oral and pharynx (throat). The evidence is so strong that 34 states have enacted legislation that recognizes certain cancers as occupational diseases among firefighters. What's more, firefighters are at risk for other problems, such as obesity.

Left: When Toms River firefighters participate in "live burns," or training drills, Community Medical Center staff members check their blood pressure before and afterward.

Rates of overweight and obesity among career and volunteer firefighters across the nation range from 73 to 88 percent, according to a National Volunteer Fire Council Report.

SCREENING FOR MEDICAL **PROBLEMS**

The Toms River Fire Department (TRFD) is the largest organization of its kind in Ocean County. It's composed of six fire companies and is staffed by 350 volunteers. To improve the health of these dedicated community members, Community Medical Center (CMC) recently began holding health fairs at the Toms River Fire Training Center. At the fairs, CMC physicians and healthcare professionals discuss the hospital's bariatric and smoking cessation programs. They also screen firefighters for high blood pressure and blood glucose levels (a marker of diabetes). When firefighters participate in "live burns," or training drills, CMC staff members check firefighters' blood pressure before and afterward. "At least two of our firefighters were diagnosed with high blood pressure through the CMC screenings," says Richard Tutela, a commissioner with the TRFD. "They went to their primary care doctors for treatment."

DIVERSITY TRAINING

Last year, for the first time, CMC held diversity and inclusion training sessions for the TRFD. The volunteer service is more diverse than ever, and the TRFD strives to create an inclusive organizational culture. Over the course of three sessions, CMC staff members, including the Director of Diversity and Inclusion, educated more than 100 fire department leaders about the importance of recognizing their own personal perceptions and biases. They learned how to communicate openly and model



THE LINK BETWEEN FIREFIGHTING AND CANCER

In 2018, the Centers for Disease Control and Prevention created the National Firefighter Registry to better understand the link between firefighting and cancer. Now, researchers are taking a closer look at the health risks among firefighters in New Jersey. Rutgers Cancer Institute of New Jersey has initiated a study of New Jersey firefighters, including those

from Toms River, to assess their cancer risk. "The Toms River Fire Department was very proactive," says Michael Steinberg, MD, MPH, FACP, Professor and Chief, Division of General Internal Medicine, and Vice Chair for Research in the Department of Medicine at Rutgers Robert Wood Johnson Medical School and Director of the Rutgers Tobacco Dependence Program. "They approached us to find out if we could look at cancer risks among volunteer firefighters." Brian S. Kubiel, Chief Administrator for the Toms River Board of Fire Commissioners District #1, says cancer has affected the service. "There are several volunteer firefighters who are currently being treated for cancer," he says. "Many have been treated successfully and continue to serve our township as volunteer firefighters."

In the two-year study, which will be funded by the RWJBarnabas Health Foundation and Rutgers Cancer Institute, researchers will assess cancer risk among New Jersey firefighters; create a New Jersey Firefighter Cancer Registry, which can be integrated into the national database; and study cancer risk among Toms River firefighters. "The Toms River firefighters will have biomonitors with them when they're at a fire so we can measure their exposure to toxins, and we will take samples from their equipment when they're done," says Dr. Steinberg. "We will also perform environmental monitoring in the firehouses to check for toxins. We will look at the ventilation in the buildings, for instance, as well as how the equipment is cleaned after a fire."

The researchers will also investigate lifestyle risk factors, such as diet, alcohol use, smoking, participation in cancer screenings and access to medical care. The firefighters will submit blood and urine samples for testing. "We are looking holistically at the firefighters' cancer risk," says Dr. Steinberg. "Not only are we looking at what they're breathing in when they're on the job, but we're also

looking at their tobacco and alcohol use, as well as their cancer screening rate. Our goal is to develop an effective intervention for preventing cancer."

behaviors that are accepting of differences.

The TRFD and CMC share a commitment to keep Ocean County residents safe and healthy. "We are proud to partner with the Toms River Fire Department to ensure the well-being of our community's volunteer firefighters," says Patrick Ahearn. Chief Executive Officer of CMC. "We need to take care of them, just as they take care of us. It's our mission to improve the health and wellness of everyone in the community we serve."

Institute for Prevention and Recovery's Nicotine and Tobacco Studies show that people are four times more likely to quit when they participate in a structured on their own. The program offers individual and group support and free nicotine replacement therapy, such as the nicotine patch, gum, call 833.795.QUIT or visit

HELP KICKING THE HABIT

For information about programs offered by Community Medical Center's Community Outreach Department, call 732.557.3210.

Targeting PROSTATE CANCER



A NEW BIOPSY TECHNIQUE CAN SAVE LIVES AND SPARE MEN FROM UNNECESSARY PROCEDURES.

his year, about 175,000 men in the U.S. will be diagnosed with cancer of the prostate, a walnutsized gland that produces fluid that carries sperm, according to the National Cancer Institute. Unfortunately, the disease can be difficult to detect, and it can be challenging to distinguish potentially deadly tumors from small, slow-growing ones that don't require treatment.

When a screening test—such as a digital-rectal exam, prostate-specific antigen (PSA) test or both—suggests a

PETER HOWARD, MD

man might have prostate cancer, the next step is usually to take a biopsy. Guided by ultrasound imaging, a standard biopsy involves randomly injecting fine needles into the gland and removing

tissue, which is tested for cancer cells. Unfortunately, this method sometimes picks up small tumors that don't require treatment—and misses potentially dangerous ones. Even if a standard biopsy doesn't reveal any tumors, physicians often recommend additional follow-up biopsies, which can cause anxiety.

A SHARPER IMAGE

resonance imaging (MRI),

To help identify the most dangerous prostate tumors, physicians at Community Medical Center (CMC) have adopted a cutting-edge technology called fusion biopsy. If a man with a negative biopsy continues to show worrisome signs (such as rising PSA levels), the next step is a fusion biopsy, says urologist Peter Howard, MD, Chair of CMC's Department of Urology. First, the man undergoes magnetic

which creates a detailed image of the prostate, causing high-risk tumors to "light up." If none appear, the man doesn't need a follow-up biopsy and can be tracked instead with digital-rectal exams and PSA testing.

If a suspicious mass is found, the patient undergoes a fusion biopsy, in which special software "blends" the MRI image with the ultrasound image in real time. This allows Dr. Howard to aim the biopsy needles only at worrisome areas of the prostate, greatly improving the identification of dangerous malignancies.

> A study published in the Journal of the American Medical Association

> > a cancer."

found that fusion biopsies detected 30 percent more high-risk prostate tumors than standard biopsies. Says Dr. Howard: "Fusion biopsy gives us a better chance of finding

Community Medical Center, in partnership with Rutgers Cancer Institute of New Jersey-the state's only NCI-Designated Comprehensive Cancer Center—provide close-tohome access to the latest treatment and clinical trials. For more

RWJBarnabas Health and

information, call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

For a referral to a highly skilled urologist on staff at Community Medical Center, call 888.724.7123 or visit www.rwjbh.org/community.

10 TIMES TO USE TELEMED

A VIRTUAL DOCTOR VISIT CAN BE THE FASTEST WAY TO FEEL BETTER.

ith the RWJBarnabas Health TeleMed service, patients can reach a U.S. boardcertified doctor at any time of day or night, including weekends and holidays. The how is simple: Download an app for iOS or Android and connect via smartphone, tablet or computer.

But why might you choose to use TeleMed rather than make an appointment with your doctor? At right are some circumstances that might make a virtual visit a good choice.

TeleMed is appropriate for common complaints such as colds, flu, fever, minor rashes, earache, sinusitis, migraine, abdominal pain, allergies, pink eye and joint pain.



CALL 911 IF...

TeleMed is not for emergencies. Call 911 or go to the nearest emergency department if you are experiencing any of the following emergency medical problems:

- Chest pain or pressure
- Uncontrolled bleeding
- Sudden or severe pain
- Coughing or vomiting blood
- Difficulty breathing or shortness of breath
- Sudden dizziness, weakness, change in vision, slurred speech, numbness or other neurological changes
- Severe or persistent vomiting or diarrhea
- Severe abdominal pain
- Changes in mental status, such as confusion
- Assault, physical or sexual abuse
- Broken bone



You get sick while on vacation.



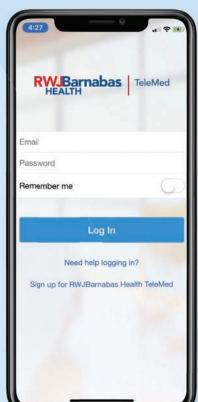
Your doctor's office is closed.



You need care for a sick child, but can't leave your other children home alone.



You can't get a sameday appointment with your doctor.





You feel too sick to leave the house.



You live in a rural area, making doctor visits and follow-up visits inconvenient.



You're out of town and realize you forgot a prescription.



You don't have time to wait in a waiting room.



It's difficult to take time off from work to go to the doctor.



You don't want to expose others to a contagious disease (or be exposed to theirs).

To learn more or to sign up for the RWJBarnabas Health TeleMed service, visit www.rwjbh.org/telemed.

















THE RWJBARNABAS HEALTH ATHLETIC PERFORMANCE CENTER AT RUTGERS UNIVERSITY KICKS OFF A NEW ERA FOR RUTGERS SPORTS.

or Rutgers student-athletes, the future is here. The state-ofthe-art RWJBarnabas Health Athletic Performance Center at Rutgers University, which opened in September, is home to new facilities for men's and women's basketball, wrestling and gymnastics, as well as a sports performance/sports medicine suite, nutrition lounge, seating area for professional scouts and more.

The 307,000-square-foot, four-story facility brings Rutgers athletic offerings to a new level. "It's a game changer for our student-athletes in clinical care," says Pat Hobbs, Director of Intercollegiate

Athletics at Rutgers University. "They are going to receive the very best in sports medicine." The facility was made possible by an investment from RWJBarnabas Health, the official healthcare provider of Rutgers Athletics.

"For far too long, we haven't produced, as a state, those facilities and resources necessary to have world-class athletes—and frankly, in New Jersey, we have world-class athletes," says Barry Ostrowsky, President and CEO of RWJBarnabas Health. "At Rutgers, we have world-class students. For us, this is a wonderful opportunity to invest in a great University."

X-RAY ROOM

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



HEART **FAILURE**

TWO RWJBARNABAS HEALTH **HEART TRANSPLANT PROGRAMS** COLLABORATE TO OFFER WORLD-**CLASS CARE, CLOSE TO HOME** FOR NEW JERSEY RESIDENTS.

n 1989, cardiologist Mark Jay Zucker, MD, relocated from Chicago to join nationally renowned cardiovascular surgeon Victor Parsonnet, MD, at Newark Beth Israel Medical Center (NBI). Both physicians saw an opportunity to build a world-class heart failure treatment and transplant program at NBI.

Toward that end, Dr. Zucker and other members of the NBI team met with cardiologists around the state, gave talks and lectures, and sent out educational mailings to introduce the medical community to the new program.

Over the course of 30 years, the goal of creating a nationally renowned heart failure and transplant center has been met, perhaps beyond the team's wildest dreams—and certainly beyond those of many patients. By 2017, the Advanced Heart Failure Treatment and Transplant Program at NBI had performed more than 1,000 transplants, one of only a dozen programs in the U.S. to reach that milestone. Today the program performs about 50 to 55 transplants each year; has roughly 70 staff members, seven physicians, three surgeons and a full complement of nurses and nurse practitioners; and follows more than 4,000 patients at five different offices.

COVERING THE STATE

The NBI program and the Advanced Heart Failure and Heart Transplant Program at Robert Wood Johnson University Hospital in New Brunswick (RWJUH) are the only two heart transplant programs in New Jersey,

"We are one of the major referral centers for heart conditions in the state, particularly in central New Jersey," says Aziz Ghaly, MD, Surgical Director, Advanced Heart Failure and Heart Transplant Program at RWJUH. "We offer the most advanced options for treatment of heart failure available. That means we

can do complete workups for patients under one roof."

As collegial members of the same health system, the two programs provide seamless treatment to any patient in need of complex cardiac care, not only from the hospitals of the RWJBarnabas Health system but from any hospital inside New Jersey or beyond. For New Jersey residents, that means advanced cardiac care is always available close to home.

The connection between the two teams further enhances patient care. "Leadership of both programs meet regularly to discuss how to coordinate care, improve safety, streamline services and sometimes just to learn from one another as well," says Dr. Ghaly.

MULTIDISCIPLINARY APPROACH

At NBI. Dr. Zucker. Director of the Cardiothoracic Transplantation Program, and Margarita Camacho, MD, Surgical Director of Heart Transplantation, are two of the most senior physicians in the field, with a combined experience of caring for more than 1,500 transplant patients. Both physicians are at the forefront of advanced heart failure treatments, and both have been at NBI for the majority of their careers. "That translates to consistency," says Dr. Zucker. "We have danced together for a long time." The RWJUH transplant program has been in place for more than 20 years, with year after year of excellent outcomes, says Dr. Ghaly.

Both programs rely on multidisciplinary teams to provide



AZIZ GHALY, MD



MARK JAY ZUCKER, MD

the highest quality of care. "Advanced cardiac care requires a tightly integrated, well-functioning team of talented and knowledgeable clinicians, paramedical professionals, social workers, pharmacists and dietitians," says Dr. Zucker.

"Heart transplantation is not maintenance-free after surgery," explains Dr. Ghaly. "Our heart failure cardiologists and nurse coordinators monitor patients very closely afterward, becoming like part of the patient's family. The role is crucial to the patient's survival post-transplant, and they are the heart and soul of our program."

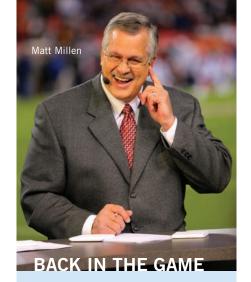
FUTURE-FACING

Both programs are national leaders in treatment for advanced heart failure, including the use of ventricular assist devices (VADs). These surgically implanted mechanical pumps can keep patients alive as they wait for a heart transplant or when other medical conditions have rendered them ineligible for transplantation.

The NBI and RWJUH programs also participate in multiple research trials that offer patients access to new investigational medications and devices prior to commercial availability. Most recently, the teams have been studying medications to treat advanced congestive heart failure, amyloid and lamin A/C cardiomyopathy.

The transplant center at NBI is currently undergoing a \$4.3 million renovation. "The transplant suite will soon integrate the mechanical support, heart and lung transplant programs all under one roof," says Dr. Zucker. "The ability to interact on a moment-to-moment basis provides an ability to exchange ideas and ensure that all team members are up to date with new and emerging technologies."

This type of interaction is crucial when it comes to caring for such critically ill patients, says Dr. Zucker. "After all, the management of heart failure is a 24/7 operation that only works when you have a team of truly committed individuals."



During Matt Millen's storied career as a football player, observers often said he showed "a lot of heart." That description resonated with many when they learned he was waiting for a life-saving heart transplant at Newark Beth Israel Medical Center (NBI).

An All-American linebacker at Penn State, Millen had a 12-year NFL career, including four Super Bowl wins. He served as president and CEO of the Detroit Lions, followed by a successful career as a football commentator.

As the years went on, he began to feel weaker and increasingly short of breath. It became hard to navigate the few stairs to his basement wood shop.

Ultimately, Millen was diagnosed with the rare disease amyloidosis. Abnormal proteins called amyloids had been deposited in his heart muscle, rendering it stiff and unable to function properly.

In the fall of 2018. Millen spent three months at NBI, under the care of Mark Jay Zucker, MD, Director of the Cardiothoracic Transplantation Program, and his team. On December 24, 2018, Millen underwent heart transplant surgery performed by Margarita Camacho, MD, Surgical Director of Heart Transplantation, and Mark Russo, MD.

The surgery was a success. With a new heart and a new lease on life, Millen is back in the broadcasting booth for the 2019 football season.

Your heart doesn't beat just for you. Get it checked. To reach an RWJBarnabas Health cardiac specialist near you, call 888.724.7123 or visit www.rwjbh.org/heart.









WHERE TO CALL FOR HELP

NOW THERE'S A SINGLE PHONE NUMBER FOR CLEAR AND COMPASSIONATE ANSWERS ABOUT CANCER TREATMENT.

hen a person is diagnosed with cancer, he or she has a lot to learn—and many decisions to make. What's the best course of treatment? Where is the best place for treatment? Who is the best doctor to treat my cancer? How can I get a second opinion?

That's why RWJBarnabas Health (RWJBH), in partnership with Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-Designated Comprehensive Cancer Center, has created an Oncology Access Center. This concierge-like service for cancer patients has an easy-to-remember number: 844-CANCERNJ. At that number, specialized oncology access representatives and oncology access nurse navigators stand ready to direct patients to the expert care they need. The Oncology Access Center creates one point of contact for all oncologists and hospitals in the RWJBH system and at Rutgers Cancer Institute.



STEVEN K. LIBUTTI. MD

"We are well aware that people who are newly diagnosed or seeking a second opinion are dealing with an extremely stressful personal situation," says Steven K. Libutti, MD, Senior Vice President of Oncology Services, RWJBH and Director of Rutgers Cancer Institute of New Jersey. "We want to make the process of finding care as stress-free and efficient as possible."

In the past, Dr. Libutti explains, patients and caregivers needed to do extensive research on their own to figure out what location and what physician would be most appropriate for their care. "Now they can more easily access NCI-designated cancer care across the state," he says.

NAVIGATING THE JOURNEY

"We're especially excited to have nurse navigators located right at the contact center if a person has a clinical question," says Bryan Soltes, System Vice President, Network Development, Oncology Services for RWJBH. "That aspect of our system makes it uniquely helpful to patients."

When a caller is referred to a specific hospital, he or she is immediately linked to the nurse navigator platform at the hospital, Soltes says. "Nurse navigators guide patients through their entire journey of diagnosis, treatment and recovery, not only making appointments but connecting the patient with oncology support services," he explains.

"Our system is making a very big commitment to nurse navigation in general," Soltes says. "Our goal is to be the largest nurse navigation system for oncology in the country."

Experts at RWJBH recognize that oncology healthcare calls are different from other kinds of calls. "They are often from people dealing with potentially serious situations," Soltes says. "With our Oncology Access Center and nurse navigator programs, we're able to put our arms around the patient, so to speak, and say, 'We'll help you take it from here."





Opposite page and this page, clockwise: For the first time, a roller coaster was wrapped in support of cancer awareness for the Coasters for Cancer campaign. Survivors and their families joined a special survivors celebration at Six Flags Great Adventure, which partnered with RWJBarnabas Health and Rutgers Cancer Institute of New Jersey to bring greater awareness to the disease and efforts to fight it.



The Oncology Access Center is open from 8 a.m. to 5 p.m., Monday through Friday, Call 844.CANCERNJ (844.226.2376).



RAISE YOUR HANDS FOR SURVIVORS

Life can be a roller coaster. especially when a person is coping with cancer. That made it especially fitting for three iconic New Jersey brands—RWJBarnabas Health (RWJBH), Rutgers Cancer Institute of New Jersey and Six Flags Great Adventure—to create the Coasters for Cancer campaign.

Brightly colored handprints were collected from cancer survivors and supporters. Those handprints were wrapped into a design to adorn the Runaway Mine Train roller coaster at Six Flags Great Adventure in Jackson Township. When park visitors take the ride. they're reminded of how many people cancer touches in the state of New Jersey.

The campaign was unveiled during a National Cancer Survivors Day Celebration at Six Flags Great Adventure on June 9. "More people need to know about the disease and about the research that's being done right in our own backyard," says John DeSimone, a patient at Rutgers Cancer Institute.

"What I hope people get out of this display is that cancer doesn't discriminate," says cancer survivor Johnny Volpe, 17, who was diagnosed when he was just 7. "Cancer goes for anyone and everyone, and it's great that people are aware."

"The Coasters for Cancer campaign is an incredible opportunity to shine the spotlight on cancer survivorship, education and prevention," says Justin Edelman, Senior Vice President, Corporate Partnerships, RWJBH. "If this campaign helps just one person, it's all worth it."



BRAIN INJURY

A NEW PARTNERSHIP BRINGS ADDITIONAL RESOURCES TO THOSE LIVING WITH TRAUMATIC BRAIN INJURY.





bout every 13 seconds in the U.S., someone suffers traumatic brain injury (TBI)—a blow or penetrating injury to the head that's severe enough to disrupt normal brain function.

Children with TBI are often treated at Children's Specialized Hospital (CSH), the leading provider of inpatient and outpatient care for children and young adults facing special healthcare challenges. Until recently, however, CSH had no way to help these patients as they grappled with the lingering effects of TBI in adulthood.

To remedy that situation, CSH has begun a new partnership with the nonprofit Opportunity Project, founded by parents whose sons were dealing with TBI. The

program offers a wide range of services to help adults with TBI reach their full potential.

The organization's mission and services make it a natural fit for CSH. "Opportunity Project has a long, rich history of serving the critical needs of adults with brain injury," says Warren E. Moore, FACHE, President and CEO, CSH, and Senior Vice President, Pediatric Services, RWJBarnabas Health. "We are thrilled to partner and learn from one another, ensuring a bright future for the communities we serve."

MOVING FORWARD

Mild TBI, the most common kind, affects the brain only temporarily. However, symptoms of moderate to severe TBI may

be long-term, even lifelong. These symptoms can include difficulty thinking clearly, headaches, moodiness, sensitivity to light, physical impairment and sleep problems. Up to 90,000 people experience the onset of long-term disability from TBI each year.

The only program of its kind in New Jersey, Opportunity Project has served more than 600 individuals affected by TBI, along with their families, since its inception in 1993. The organization is housed in a 14,000-square-foot facility in Millburn that's accessible to the center of town and to public transportation, and is open five days a week.

Here, members can meet to receive occupational therapy, to confer with social workers who can help them access community resources, or to practice skills in reading, writing, planning and more. Opportunity Project also trains members who wish to become part of its Speakers Bureau, enabling them to use their firsthand knowledge of living with a brain injury to deliver inspiring and educational presentations.

For more information about Opportunity Project, visit www.opportunityproject.org. For more information about Children's Specialized Hospital, call 888.244.5373 or visit www.childrens-specialized.org.

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



THANKS TO THERAPY, A YOUNG CHILD IS OVERCOMING A SPEECH DISORDER.

hree years ago, Jennifer Hubiak became concerned when she noticed her youngest child, Zoey, who was 3 at the time, was having trouble speaking. "She would only say the beginning parts of words, so 'milk' would be 'mil," says Jennifer. "I could usually figure out what she was saying, but she would get very frustrated at nursery school when she played with friends who didn't understand her."

Jennifer took Zoey to her pediatrician and asked for a referral to a speech therapist. A few weeks later, Zoey had an evaluation at Community Medical Center (CMC). She was diagnosed with a language delay and an articulation disorder.

MASTERING SOUNDS

Zoey was assigned to work with Nicole Henry, MS, CCC/SLP, a speech-language pathologist who helps her improve her articulation—for example, making a K sound. Once Zoey has mastered a letter, Henry has her practice it as part of a

word, then in a sentence. "What impresses me about Zoey is that she's so motivated she always tries her hardest," says Henry.

Henry makes the sessions fun by playing board games or games on an iPad with Zoey. "If therapy is play-based, the child will go the extra mile to follow through," says Henry. Zoey enjoys the sessions so much that she looks forward to them. "If I ever have to cancel, she gets upset," says Jennifer.

Zoey has made enormous progress. "She can pronounce whole words now, even when she's talking in sentences," says Jennifer. "This year, she's had no issues at all."

Zoey still sees Henry twice a week and receives twice-weekly speech therapy at school. (Henry sends the school speech therapist Zoey's progress reports and updates her periodically.) Zoey's latest goal? Mastering the G sound. Says Jennifer: "Nicole and CMC have not only gotten her speech on track, but they've given her the confidence to tackle anything that's difficult in her life."

THERAPY FOR ALL AGES

Speech therapy is beneficial for patients with a variety of problems—everything from developmental delays and traumatic injury to serious medical conditions. At Community Medical Center, licensed speech-language pathologists work with patients who have language, swallowing, articulation and voice disorders, as well as stuttering, stroke, ALS (amyotrophic lateral sclerosis, also known as Lou Gehrig's disease) and Parkinson's disease.

For more information or to schedule an appointment, call **732.557.8046**.

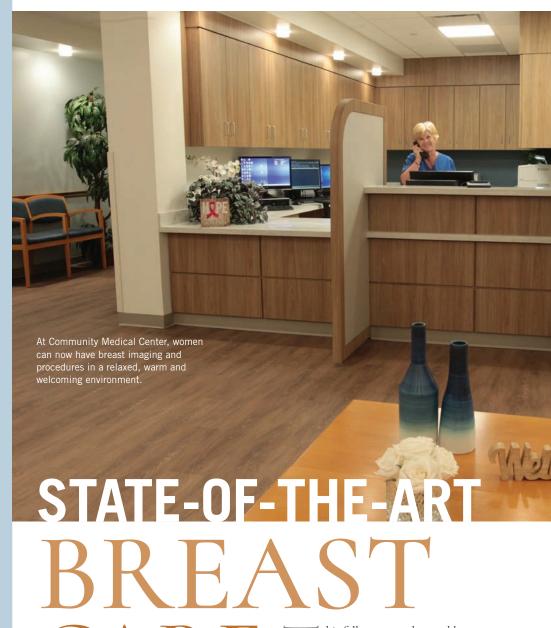
A COMMITMENT TO QUALITY

Women can be confident that they're receiving the highest quality breast care at the Women's Imaging Center. The Center is a Breast Imaging Center of Excellence, a national designation from the American College of Radiology (ACR), meaning it's accredited by the ACR in mammography, stereotactic breast biopsy, breast ultrasound and breast MRI. In June, the Center was reaccredited by the National Accreditation Program for Breast Centers from the American College of Surgeons. "We're constantly looking at quality standards and improving our technology," says William R. Goodman, Director of Imaging and Radiation Oncology Services at Community Medical Center (CMC).

The healthcare professionals who perform ultrasound at CMC are registered diagnostic medical sonographers, and the mammography technologists are specialty trained to perform breast imaging and interventional breast biopsy procedures. Many of the technologists and sonographers have been performing mammography and ultrasound for more than 20 years, says Cynthia Barone, DO, Regional Director of Breast Imaging. In addition, the radiologists and breast surgeons at CMC are board-certified and fellowship-trained.



RWJBarnabas Health and Community Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provide close-tohome access to the latest treatment and clinical trials. For more information, call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.



THE ALL-NEW WOMEN'S IMAGING CENTER OFFERS THE LATEST TECHNOLOGY IN CANCER SCREENING. **BIOPSIES AND MORE.**

For more information, visit www.rwjbh.org/mammo and select Toms River or call 732.557.8150, prompt 3.

his fall, women who need breast imaging services—such as screening or diagnostic mammography, ultrasound or interventional procedures can get the care they need at one location: the new Women's Imaging Center at 368 Lakehurst Road in Toms River. "We have relocated our breast services so they're under one roof in a relaxed, warm and welcoming environment," says William R. Goodman, Director of Imaging and Radiation Oncology Services at Community Medical Center (CMC). Women can also have bone density testing and other ultrasound imaging services at the new Center. Laboratory services are conveniently located on-site.

The newly renovated space has two mammography units (a traditional, two-dimensional machine and a new



three-dimensional one). If a woman's mammogram results indicate that she needs follow-up testing, she can often have an ultrasound or biopsy the same day. Patients can remain in their gowns in the comfort of a private waiting room. Clinical breast navigators are available to provide guidance for patients who are diagnosed with cancer.

NEW TECHNOLOGY

To help detect breast cancer at its earliest stage, the Center is offering patients the latest imaging technology—tomosynthesis, which improves radiologists' ability to



CYNTHIA BARONE, DO



SUMY CHANG, MD



identify a potential cancer by eliminating overlapping breast tissue. With this technique, the breast is positioned and compressed just as it is for a conventional mammogram, but the X-ray tube moves in an arc around the breast. Several low-dose X-rays are taken from different angles. Computer processing builds these "slices" of the breast into a three-dimensional image that radiologists can manipulate. They are able to examine each slice individually, helping them to distinguish harmless structures from tumors—even in dense breast tissue. This leads to fewer call-back examinations and less anxiety for patients.

The tomosynthesis unit at the Center features "curved paddle technology," making the mammogram more comfortable for the patient, says Cynthia Barone, DO, Regional Director of Breast Imaging for CMC, Monmouth Medical Center and Monmouth Medical Center Southern Campus.

The Center is also introducing the use of wireless technology for breast surgical procedures. Typically, a surgical wire is placed in the breast with the guidance of mammography or ultrasound on the day of a procedure. The surgeon then uses the wire as a "road map" to remove the area of concern in the breast. With the new wireless technology, called Magseed, a radiofrequency clip is placed in the breast to mark the area of concern that needs to be removed by a breast surgeon. On the day of surgery, the surgeon uses a handheld transducer to locate the clip. The clip can be placed at any time prior to surgery, making the process more convenient and reducing stress on the day of the procedure.

"I'm excited about the new Women's

Imaging Center because we have newer technologies and more precise ways of detecting cancer, and the tests are more comfortable," says Sumy Chang, MD, a fellowship-trained breast surgeon at CMC. The result? A better patient experience.

THE MOST ADVANCED **TREATMENT**

Patients who are diagnosed with breast cancer can be treated at the J. Phillip Citta Regional Cancer Center at Community Medical Center (CMC), which partners with Rutgers Cancer Institute of New Jersey, the state's only NCI-Designated Comprehensive Cancer Center, to offer the most advanced care, including access and precision medicine.

If a patient is having breastconserving surgery, CMC surgeons strive to maintain the natural contour of the breast. "We perform breast cancer surgery and plastic surgery at the same time," says Sumy Chang, MD, a fellowshiptrained breast surgeon at CMC. "We try to place the incision in an aesthetically pleasing location and reshape the breast so that it looks as natural as possible." Dr. Chang also tries to keep the breasts symmetrical. "When we're reconstructing the breast, we can use a patient's own fat," she says. "We can often shift fat tissue from the belly to the breast."



STRONGER THAN EVER

HOW A LACROSSE REFEREE GOT BACK TO HIS ACTIVE LIFESTYLE AFTER A CARDIAC ARREST.

n May 4, 2018, Patrick Kane of Toms River was in the kitchen preparing peanut butter and jelly sandwiches for a high school lacrosse game he was refereeing the following day. Suddenly, he collapsed. His wife, Cindy, called 911 and started performing CPR. When the police officer and paramedics arrived, "they shocked me with a defibrillator nine times to get my heart started before they took me to Community Medical Center (CMC)," he recalls. "They didn't think I was going to make it."

Patrick, 61, a retired sales manager, had experienced a cardiac arrest due to an abnormal heart rhythm disorder called ventricular fibrillation, in which the lower chambers of the heart quiver instead of pumping blood. He was treated with therapeutic hypothermia, in which the body



By participating in the Cardiac Rehabilitation Program at Community Medical Center, Patrick Kane has made a complete recovery from a cardiac arrest.

HIGH-QUALITY REHAB

The Cardiac Rehabilitation Program at Community Medical Center is certified by the American Association of Cardiovascular and Pulmonary Rehabilitation, meaning it provides the highest quality of care. The program is led by nurses who are trained in cardiac rehabilitation and are supervised by board-certified cardiologists.

temperature is reduced to protect the brain from damage due to lack of blood flow.

REBUILDING STRENGTH

Fortunately, Patrick pulled through. He received a biventricular defibrillator, a device that helps synchronize the contractions of the two lower chambers of the heart. Then, after he was discharged, Patrick began the Cardiac Rehabilitation Program at CMC, which consists of 36 one-hour, medically supervised sessions over the course of 12 weeks. "Patients start with a low level of exercise, and every time they return, it increases slightly," says Samir Jain, MD, FAAC, Chair of Cardiology at CMC and Patrick's cardiologist. "This gradually increases the workload on the heart, making it stronger and helping to regulate blood pressure." Each patient wears a cardiac telemetry monitor while exercising so staff members can check his or her heart rate, heart rhythm and blood pressure.

When Patrick first started rehab, he was very weak. "I couldn't walk on the treadmill for five minutes at 2 miles per hour—which is very slow walking—because I was dizzy and couldn't breathe," he says.



SAMIR JAIN, MD

During rehab, staff members paid close attention to Patrick. "They seemed like they cared," he recalls. "They would ask questions. If my monitor had a little blip in it, they would check me."

After two months, Patrick had made progress. He was able to walk on the treadmill at a 16-minute mile pace. In that same period of time, he went from taking only 200 steps on the step machine to 2,000 steps. He was also able to ride four miles on a stationary bike.

In late August, nearly four months after his cardiac arrest, Patrick was able to return to refereeing one game a week, but only with young children—third and fourth graders. "I couldn't run; I could only walk up and down the field," he recalls. "I was really shaky."

When Patrick's rehab was completed, he continued with the optional maintenance program. "Patients use our facility as a gym," explains Amy Stratton, RN, BSN, CCRN, a nurse with the program. "We're available to help cardiac patients make positive lifestyle changes so they can continue to improve their health. We review patients' diets and discuss ways to relieve stress, and we answer any questions about medications. We also monitor their vital signs during workouts."

Cindy was comfortable with this approach. "If Patrick had gone to a regular gym, he would not have been monitored," she says. "I feel more at ease that he's working out in a hospital setting."

A LIFE TRANSFORMED

By the end of the fall, Patrick was feeling like himself again—only much stronger.

"When I had a treadmill stress test the other day, the nurse couldn't believe I got my heart rate up to 130 and I wasn't even sweating or breathing heavily," says Patrick. "She said that even athletic people are short of breath once their heart rate reaches 130."

Patrick attributes his complete recovery to cardiac rehab. "When new people come to rehab, I point to others who have been coming for many years and say, 'See those people? They're here because of this place. So when you finish your sessions, I recommend that you come back," he says.

Today, Patrick is refereeing multiple lacrosse games and works out at the rehab facility twice a week. He also takes a fivemile bike ride on the boardwalk three times a week and goes for frequent walks with his 4-month-old grandson, daughter, Mary Kate, and son, Kyle. "I'm so proud of him," says Mary Kate. "He has taken his health into his own hands."

Cindy marvels at the progress Patrick has made. "It's a miracle," she says. "He's so committed to his workouts at the rehab facility that if he misses one day, he will make it up."

Patrick is also amazed by how far he's come. "I feel I'm in the best shape of my life now, thanks to cardiac rehab," he says. "I will keep going as long as I can get up and go to the hospital."

Your heart doesn't beat just for you. Get it checked. To reach a Community Medical Center cardiac specialist, call 888.724.7123 or visit www.rwjbh.org/heart.

DELIVERING THE BEST INPATIENT CARE

TWO PHYSICIANS EXPLAIN HOW THEIR SPECIALTIES BENEFIT PATIENTS.

HOSPITALIST

PAYAM BENSON, MD

Medical Director of the Hospitalist Program at CMC

What is a hospitalist?

A hospitalist orders tests, makes diagnoses and prescribes treatments in the hospital. Hospitalists help manage a patient's care when his or her primary care physician (PCP) isn't at the hospital. They are available 24/7 to order blood work and imaging tests and prescribe medications.

Why is your specialty becoming more common?

Without hospitalists, follow-up tests and treatments would be delayed until a patient's PCP, who typically "rounds" once a day at the hospital, returned.

What are the credentials and training of a hospitalist?

Hospitalists are board-certified in internal medicine. Five of the 10 hospitalists at CMC also have training in specialties such as nephrology, pulmonology, infectious disease and sleep medicine, so they're experienced in

> treating conditions such as kidney disease, diabetes and pneumonia.



PAYAM BENSON, MD

How do patients benefit from hospitalists?

Patients have access to a provider at any time, since hospitalists typically work 12-hour shifts and care for the same patients. Hospitalists collaborate with a patient's PCP to ensure continuity of care.

For more information about Community Medical Center, visit www.rwjbh.org/community.

INTENSIVIST

FARIBORZ REZAI, MD

Interim Medical Director of the Intensive Care Unit

What is an intensivist?

Also known as a critical care physician, an intensivist cares for critically ill patients in the Intensive Care

Why is your specialty becoming more common?

Patients in the ICU are sicker than others and should be cared for by physicians who have the training to manage patients with life-threatening conditions. They may have complications from surgery, serious infections and breathing problems that require the use of a ventilator.

What are the credentials and training of an intensivist?

Intensivists are often trained in internal medicine and have completed a fellowship in critical care medicine and pulmonary medicine. Some may also be boardcertified in other specialties, such as neurocritical care, cardiology or nephrology.

How do patients benefit from intensivists?

Research has shown that intensivists deliver care that leads to better patient outcomes. In the ICU, a patient's condition may change rapidly, so it's important to have a dedicated critical care physician and team on-site to deal with such circumstances.



FARIBORZ REZAI, MD

Will I see my own PCP when I'm in the hospital?

Chances are, you will. We keep a patient's PCP informed of his or her condition. This communication, combined with the fact that PCPs know their patients well, contributes to the delivery of excellent care.



A LASTING I.E.G.A.C.Y

A GENEROUS GIFT IS SUPPORTING ONCOLOGY EDUCATION FOR HEALTHCARE PROFESSIONALS. From left: Tania Larkin with her aunt, Mary Marano, and uncle, Mario A. Marano, a longtime Toms River resident who made a bequest to Community Medical Center.

atients who are being treated at the J. Phillip Citta Regional Cancer Center will benefit from the generosity of Mario A. Marano, who passed away on August 16, 2017. He made a bequest to Community Medical Center (CMC) to further oncology education and patient care. "He had a generous heart," says his niece, Tania Larkin, of Freehold. "He wanted to do as much as he could for as many people as he could."

Mario, who had been a resident of Toms River since 1976 and was married to Mary for 26 years, was passionate about all things Italian (he was born in Italy and emigrated to the U.S. in 1962). He served as a Commissioner for the New Jersey Italian Heritage Commission and was a charter member and past president of the Italian American Cultural Society of Ocean County. In 2009, he was inducted into the Italian-American National Hall of Fame and was named "Cavaliere" (knight) by the president of Italy for his support of Italian culture.

Mario, who was the principal buyer for the Purchasing Department of Ocean County, was also dedicated to his community. He was Chair of the Toms River Township Board of Health; Organizations and Groups Chairman for the Ocean County Columbus Day Parade Committee; and a member of the Ocean County Cultural Planning Task Force.

IMPROVING CANCER CARE

CMC is using the funds to send oncology nurses to seminars and conferences, which will ultimately improve patient care. Recently, three nurse navigators who work at the J. Phillip Citta Regional Cancer Center attended a "Navigator Summit" in Philadelphia, which was sponsored by the Oncology Nursing Society. Another navigator responsible for quality improvement will attend a conference in Washington, D.C. It will focus on topics such as clinical trials, quality standards and national accreditations.

"When generous individuals like Mr. Marano include CMC in their estate plans, it's like we're family," says Richard J. Pallamary, Vice President for Development at CMC. "This wonderful gesture creates a lasting legacy and will touch so many lives. We are extremely grateful for his generosity."



Estate planning isn't just for the wealthy or the elderly. Everyone should do it to properly ensure their intentions. For more information or to donate to the CMC Foundation, call 732.557.8131 or visit www.cmcgiving.org.



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For simple bequest language or further information, please contact Rick Pallamary at **732.557.8131** or **Rick.Pallamary@rwjbh.org**. Information is also available online by visiting **cmcgiving.org**

