# In Good HECALTh

A publication of **Community Medical Center** 



Dear Friends,

Many of us welcomed the New Year with great enthusiasm and the resolve to live healthier in 2015. We hope that you are having success as you work to find the right balance to achieve your goals.

As part of Barnabas Health, Community Medical Center is here to help you when you are sick or injured, and we are equally committed to helping you make healthy lifestyle choices. From diabetes education and nutritional counseling to cardiac rehabilitation, our clinical programs are designed to help improve your quality of life. We invite you to join us throughout the year at our community education programs as well. These programs are great opportunities to learn new ways to achieve better health in a relaxed environment.

In this issue of *In Good Health*, you will read about two new programs in the J. Phillip Citta Regional Cancer Center – the Breast and Ovarian Cancer Risk Evaluation Program and the Lung Cancer Program. These programs are helping individuals identify their risk factors for cancer at an early stage, when treatment options can be the most beneficial. Also take time to read about a little girl who was coping with undiagnosed epilepsy. After meeting Dr. Amor Mehta, Medical Director of the Epilepsy Program at the Jay and Linda Grunin Neuroscience Institute, and following an accurate diagnosis, she is now enjoying life to the fullest. These programs demonstrate the highly specialized care available right here in Ocean County.

Elevating the quality of care and the services we provide is our commitment to you. We will also continue to pursue innovative outreach programs to encourage healthier choices to avert illness.

Wishing you good health!

Barry H. Ostrowsky President and Chief Executive Officer Barnabas Health



Stephanie L. Bloom, FACHE President and Chief Executive Officer Community Medical Center



## It's a Safari Baby Fair

Sunday, April 26 12:30 – 3:30 pm

**Community Medical Center Auditorium** 



Tour Community Medical Center's First Moments Maternity Unit and Pediatric Unit and meet the staff.

Area organizations and agencies will provide information on services available in the community.

- Fun activities for all!
- Free drawings for wonderful prizes!
- Refreshments and giveaways!
- Barnabas Health Fire Safety House
- Car seat safety check with the Toms River Police Department

# Lifesaving Technology Elevates Care for Stroke Patients

he next generation of technology to remove stroke-causing blood clots in a matter of minutes is now available at the Jay and Linda Grunin Neuroscience Institute at Community Medical Center. Interventional Stroke treatment is an advanced rescue procedure to improve the lives of individuals experiencing a stroke. Community Medical Center is the first hospital in Ocean County to offer this sophisticated lifesaving treatment.

Stroke is the fourth-leading cause of death in the nation and a leading cause of long-term disability. It occurs when blood flow to the brain is disrupted – either when a blood clot blocks an artery or when a blood vessel in the brain bursts.

Advanced rescue procedures like interventional stroke treatment and emergency angioplasty for people suffering a heart attack are state-of-the-art treatment modalities. Community Medical Center has treated an average of 120 patients per year through emergency angioplasty for the last 12 years and is now offering a similar intervention for the brain.

Previously, the gold standard treatment for strokes was tPA, a "clot-buster" drug that must be administered within three hours of the onset of stroke symptoms. However, many stroke victims don't get to the hospital in time for tPA treatment.

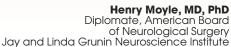
Interventional Stroke procedures allows for treatment up to eight hours after the onset of stroke, greatly improving many patients' outcomes by minimizing long-term effects of a stroke and even preventing death. Patients who aren't eligible for tPA treatment, including those who have undergone recent surgery and are on blood thinners, may be candidates for Interventional Stroke treatment.

Community Medical Center has been designated a Primary Stroke Center by The Joint Commission since 2007, a testament to the highly skilled interdisciplinary team of specialists providing care to area residents – including boardcertified neurologist Gerald Ferencz, MD, who leads the program as Medical Director of the Primary Stroke Center at Community Medical Center. Henry Moyle, MD, PhD, Diplomate, American Board of Neurological Surgery, has joined the medical staff to provide this potentially lifesaving procedure for patients at risk for a stroke. Dr. Moyle, a highly experienced board-certified neurosurgeon specializing in interventional endovascular neurosurgery, joined the hospital's medical staff after practicing neurosurgery and interventional neuroradiology at The Mount Sinai Hospital in New York City. Previously, Dr. Moyle was a neurosurgeon at Moore Regional Hospital in Pinehurst, N.C. and other renowned hospitals.

"The rapid diagnosis and effective treatment of neurological disease at Community Medical Center will enter a new dimension as Dr. Movle applies his skills in Interventional Stroke treatment. These procedures performed in the Institute's Neurointerventional Suite bring the best options for stroke care to our community," said Richard C. Hartwell, MD, PhD, board-certified neurosurgeon, Community Medical Center.

Interventional Stroke treatment, as evidenced in a recent clinical trial called Multicenter Randomized Clinical trial of Endovascular treatment for Acute ischemic stroke in the Netherlands (MR CLEAN), supports this treatment modality as the next generation in stroke care.

"Working with the neurologists and emergency medicine physicians at Community Medical Center, we will raise the level of care available to patients," said Dr. Moyle. "Stroke is a devastating illness, and the ability to prevent someone from losing the ability to walk or read a book to their grandchild is why we are committed to making this lifesaving procedure available."





For referral to a neurologist or neurosurgeon on staff at Community Medical Center, please call **1-888-724-7123.** 

### 5-Year-Old Girl Reclaims Childhood

Seizures reduced from 215 to 5 per day

lexa Haberbush often stopped what she was doing and stared into space, seemingly lost in a daydream. But when mom Jamie couldn't "snap her out of it," she knew something was wrong.

"Other people started seeing it, including teachers," recalls Jamie. "I knew in my mind she was having seizures."

The Bayville mother tried to get an appointment with several neurologists, but was told there was a four- to sixmonth wait.

She called Alexa's pediatrician, who referred her to board-certified neurologist and board-certified epileptologist Amor Mehta, MD. Jamie got an appointment right away with Dr. Mehta, medical director of Community Medical Center's Epilepsy Center at the Jay and Linda Grunin Neuroscience Institute.

During the office visit, Dr. Mehta monitored Alexa through a simple hyperventilation provocation test (she had to breathe in and out quickly for several minutes) and then confirmed that she was likely having absence seizures, as hyperventilation is known to possibly trigger seizures. Based on the initial office visit, Dr. Mehta advised Jamie to have Alexa undergo a Video-EEG monitoring study in the Pediatric Department at Community Medical Center so that her diagnosis could be confirmed and to get a baseline idea of how many seizures Alexa was having in a 24-hour period before medication treatment was to commence.

Video-EEG is a state-of-the-art tool that captures real-time video of the patient and correlates it with a continuously running EEG – a record of the brain's electrical activity.

"EEG is the gold-standard means for diagnosing seizure disorders," said Dr. Mehta. "Not all seizures present with convulsions, but many seizures present in unusual ways clinically and Video-EEG helps to correlate these clinical changes with electrical seizure activity so that an accurate diagnosis of a seizure disorder can be made prior to starting treatment."

Within the test's first 24 hours, Alexa had 215 seizures, each lasting from 5 to 25 seconds. Her Video-EEG results indicated she was having "absence seizures" – brief disturbances of brain function due to abnormal electrical activity in the brain. The seizures typically cause a person

to stop what they're doing and stare for several seconds while being totally disconnected from the world around them during the seizure.

"Even though absence seizures don't affect a person's vital signs, they can interfere with their ability to grow and learn academically, as well as affect them socially," says Dr. Mehta. "Alexa cumulatively lost about an hour each day from her seizures."





Alexa, now 5, will likely stay on medication until she's an early teen, at which point most children outgrow the condition, according to Dr. Mehta. The best news – she's down to just five seizures a day.

"It's very important to use a Video-EEG not to just diagnose but to quantify how much of the day is spent seizing and to gauge how well the treatment is working," continues Dr. Mehta. "By the time Alexa is in her late preteen years, we'll conduct another Video-EEG study and if results are normal, we'll consider stopping the medication."

While the medicine makes Alexa a bit tired – she's back to taking a daily nap – the kindergartner is paying attention more and is very active.

"She just needs to use caution when swimming or doing gymnastics," explains Jamie.

"Dr. Mehta is such a great guy," says the grateful parent. "He's compassionate and has a wonderful bedside manner."

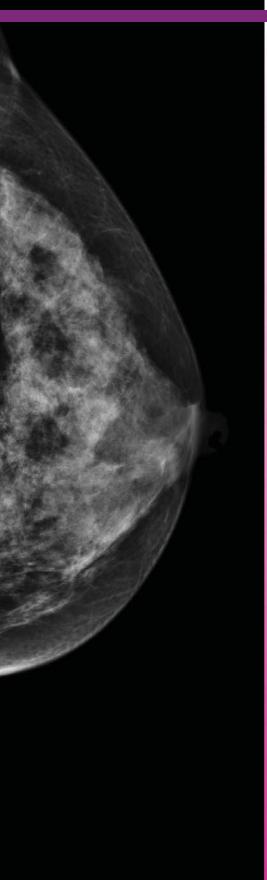
Most important, though, is her daughter's improved health. "We're very happy that Alexa isn't having so many seizures," says Jamie, "and is getting the treatment she needs."

"It's very important to use a Video-EEG not to just diagnose but to quantify how much of the day is spent seizing and to gauge how well the treatment is working," continues Dr. Mehta. "By the time Alexa is in her late preteen years, we'll conduct another Video-EEG study and if results are normal, we'll consider stopping the medication."

Amor Mehta, MD
Board Certified in Neurology and Epileptology
Medical Director, Jay and Linda Grunin
Neuroscience Institute
Level 3 Epilepsy Center



For information on the Jay and Linda Grunin Neuroscience Institute or for a referral to a neurologist, call **1.888.724.7123** or visit **barnabashealth.org/community.** 



# The Art of Interpretation:

### Expert Readers Decode Breast Images

Mammography is widely recognized as the gold standard in detecting breast cancer – but the accurate interpretation of a breast image relies upon the expertise of the person viewing it.

At Community Medical Center, the Women's Imaging Center offers an expert team of trained breast imagers who skillfully read mammogram screenings. Highly trained in their field, these professionals are able to detect abnormalities and know the best methods to go about decoding suspicious readings.

The technologist will compress your breast and take two views of each breast. "The idea is that if you thin out the breast by compression, it's easier to visualize hard-to-see areas like calcifications. It also helps to limit patient movement so images are clear, not blurred," says board-certified diagnostic radiologist Jorge Pardes, MD, Director of Breast Imaging at the Women's Imaging Center at Community Medical Center in Toms River.

Despite being the gold standard in prevention, the National Cancer Institute reports that screening mammograms miss about 20 percent of breast cancers that are present at the time of screening, and the main cause of false-negative results – or mammograms that appear normal even though breast cancer is present – is high breast density.

Density is the relative amount of different tissues present in the breast. Dr. Pardes says that radiologists are mandated to classify breast density using four categories when evaluating mammograms. The categories describe the relative proportion of fibroglandular tissue (which is white on mammography) to fat (which is gray on mammography) in the breast.

"When breasts are predominately fatty (or the least dense), mammogram images are fairly simple to interpret. When more glandular tissue is present (or when breast density is higher), mammography images become more difficult to read," says Dr. Pardes. "On a mammogram, normal glandular tissue is white, and tumors are also white, making it difficult sometimes to discern between healthy and potentially harmful tissue."

Women with dense breasts often have difficulty with the reliability of screening with mammography alone. For these women, Dr. Pardes says additional diagnostic tests such as whole breast ultrasound or breast MRI are sometimes recommended. Another test, called breast specific gamma imaging (BSGI), is an alternative for women who cannot undergo MRI.

"We've come a long way in detecting and battling breast cancer, but it's still the most common form of cancer among American women," says Sumy H. Chang, MD, a fellowship-trained board-certified breast surgeon on staff at Community Medical Center. She encourages women to see a doctor at the very first sign of any change or abnormality, stressing that women should feel at ease seeking care as they play a significant role in determining their treatment approach.

"While the options may differ from woman to woman, I explain, in complete detail, what these options entail and what to expect," says Dr. Chang. "Working closely with the patient, I will recommend the best path for her."



Jorge Padres, MD Board-certified Radiologist Women's Imaging Center at Community Medical Center



Sumy H. Chang, MD Board-certified Breast Surgeon Community Medical Center

To schedule an appointment at the Women's Imaging Center in Toms River and Whiting, please call **732.557.8150.** For more information about breast health at Community Medical Center, visit **barnabashealth.org/community.** 

# Lower Your Risk

While there is no "magic bullet" in terms of preventing breast cancer, Drs. Pardes and Chang encourage women to reduce their risk for developing the disease. They recommend taking the following measures – many of which can help aid the recovery process if cancer is detected.

- Don't smoke
- Maintain a healthy weight
- Limit alcohol consumption
- Eat a balanced diet
- Know your breasts so you can spot irregularities, like a lump or change in shape, size or texture
- Conduct regular breast selfexams in front of the mirror, in the shower or lying down
- Have a yearly breast exam by a qualified physician, usually a gynecologist
- Begin mammogram screenings at age 40
- Learn your risk factor women at high risk should discuss their options with their physician

# Know Your Genes: How family history affects your future

ancer runs in Patricia Lees' family. Her sister died of breast cancer at 37 and her father's mother and sister also had breast cancer. These circumstances, coupled with the fact that she has two daughters in their 20s, led Patricia to schedule an appointment for Community Medical Center's Cancer Risk Evaluation Program. Patricia, a registered nurse, is Administrative Director of Perioperative Services at Community Medical Center, so she was keenly aware of the importance of confronting her risk for cancer.

The Breast and Ovarian Cancer Risk Evaluation Program provides personalized cancer risk assessments, genetic counseling and genetic testing. Located within the J. Phillip Citta Regional Cancer Center, the program also helps women protect their health by creating tailored plans for cancer risk reduction and cancer screening based on each woman's level of risk.

The program was first developed at the University of Pennsylvania's Abramson Cancer Center. As a member of the Penn Cancer Network, Community Medical Center is able to provide patients with access to this program as well as clinical research trials.

The program involves two visits. The first visit with Michelle Lyons, MS, LGC, a licensed genetic counselor, focuses on reviewing the patient's family history and personal medical history and discussing the genetics of cancer and the option of genetic testing. The second visit is with Michelle and George Trim, MD, a board-certified gynecologist with special training in cancer genetics. During the second visit, the patient receives her test results and is given a personalized plan for managing her cancer risk.

"Getting screened has been on my mind since my sister's death," says Patricia. "I just needed to take that important step and make an appointment. I filled out the paperwork, met with Michelle, had my consult and my blood work done, then anxiously waited for my results."

"With three generations of cancer in Patricia's family, she was a good candidate for our cancer risk evaluation program," says Michelle. "We were able to educate Patricia on her lifetime risk for breast cancer. Even though Patricia's genetic testing was negative, we did have to inform her that she's facing a moderate risk because of her family history, and we discussed steps she can take to manage her cancer risk."

Patricia was relieved to learn she did not have a mutation in BRCA1 or BRCA2, which would have meant that she had a high risk for breast and ovarian cancer. She understands the risks she faces and after participating in the program learned she is now eligible for a breast MRI annually. She was also advised to schedule a clinical breast exam every six months and an annual mammogram.

"My advice to anyone with a family history of breast or ovarian cancer is to get tested. The results will not only define your path, they may save your life..."



"My sister had a love for life and all she wanted to do was live life to its fullest. She fought to survive. Ten years later, testing is available that might have helped to save her life. We all need to take advantage of these extraordinary advancements in screening and technology. By doing so, we may save our own life or the lives of people we love," says Patricia.

Many insurance companies cover the cost of genetic counseling and genetic testing when medically indicated. Financial assistance is often available for individuals who are uninsured or under-insured.

"Women should know their family health history," says Michelle. "If you know which health conditions run in your family, you can take concrete steps to preserve your health and prevent those conditions."

Community Medical Center's cancer program is approved by the American College of Surgeons' Commission on Cancer as a Community Hospital Comprehensive Cancer Program, meeting the organization's high standards since 1986. The program has received the prestigious "Gold" designation for all areas surveyed.

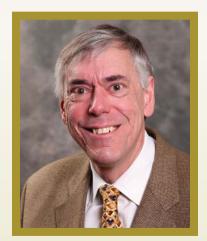
If a woman or one of her close relatives has any of the following risk factors, she may be more likely to develop breast or ovarian cancer – and could therefore benefit from the evaluation program:

- Breast cancer at age 50 or younger
- Ovarian cancer at any age
- Bilateral breast cancer at any age
- A relative with male breast cancer
- Diagnosed with "triple negative" breast cancer
- Two or more cases of breast and/or ovarian cancer on the same side of the family
- Jewish ancestry and a personal or family history of breast or ovarian cancer
- Any family member with a mutation in a cancer-susceptibility gene, such as BRCA1 or BRCA2

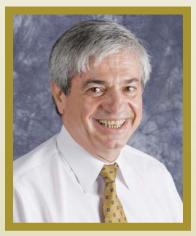
To reach the Breast and Ovarian Cancer Risk Evaluation Program, call **732-557-2154.** For more information on the J. Phillip Citta Regional Cancer Center, visit **barnabashealth.org/Community.** 

## Physicians of Distinction

### Award Recipients Honored



Richard C. Hartwell, MD, PhD



John A. Pino, DO



Michael J. Spedick, MD

hree board-certified physicians were recently named Physicians of Distinction 2015 award recipients at Community Medical Center Foundation's Winter Holiday Ball held at Eagle Oaks Country Club. Richard C. Hartwell, MD, PhD, a neurosurgeon; John A. Pino, DO, a family practitioner; and Michael J. Spedick, MD, FACS, FAAP, FAAO, an ophthalmologist, were recognized for their outstanding service and commitment to Community Medical Center.

"We began this award ceremony in 2011 in conjunction with Community Medical Center's 50th anniversary and continue to hold these awards as we have so many physicians on staff deserving of this recognition," says Stephanie L. Bloom, FACHE, President and Chief Executive Officer at Community Medical Center.

Dr. Hartwell is a neurosurgeon at Community Medical Center and his scope of practice includes aneurysm and tumor surgery, instrumental spinal fusion surgery, intraoperative navigation and non-invasive radiosurgery. He is a recipient of Community Medical Center's "Excellence in Caring" award, the hospital's prestigious award recognizing staff excellence. He earned his medical degree and PhD from the University of Chicago and completed his residency at the University of Pennsylvania.

Dr. Pino is a family practitioner at Toms River-based Water Street Physicians. Since 2008, his practice has been recognized as a Patient Centered Medical Home by the National Committee on Quality Assurance – a recognition program for improving primary care. He has been on staff at Community Medical Center for nearly 40 years and has served as Department Chairperson. He received his medical degree from Philadelphia Osteopathic College and completed his residency at JFK Hospital in Stratford, N.J.

Dr. Spedick, physician and partner, Ocean Eye Institute, has been in private practice for almost 30 years. Board certified in both ophthalmology and internal medicine, he served as Chairman, Department of Ophthalmology, Community Medical Center from 2009 to 2014. He is a Fellow of the American College of Ophthalmology and is a recipient of the Academy's Achievement Award. He is also the current President of the New Jersey Chapter of the American College of Surgeons. Dr. Spedick received his medical degree from Rutgers Medical School, where he also completed a residency in internal medicine.

Russell Harrell, MD, president, Community Medical Center Medical Staff, says, "These three physicians have over 90 combined years of caring for Ocean County residents and have left an indelible mark on countless lives. Like our previous winners, they have helped build our hospital and are deeply woven into the fabric of our community. On behalf of the entire Medical Staff, we congratulate them on this well-deserved recognition."

The Physicians of Distinction selection committee includes prior award recipients Antoine Chaker, MD, Otolaryngology; Gerald Ferencz, MD, Neurology; Yesh Nayak, MD, Pulmonology; James Pasquariello, MD, Cardiology; Elmo Samuel, MD, Orthopedics; and Renato Ynaya, MD, Cardiology. Additional committee members are Lewis Wetstein, MD, Thoracic Surgery; Lisa Askey, RN; and Board of Trustee members Jerry Boisseau and Peter Van Dyke.



President
Community Medical Center Staff
Board-certified Obstetrician/Gynecologist

### The Role of the Navigator

Our featured patient navigators have one thing in common. Their experience of a loved one faced with a cancer diagnosis inspired them to their chosen careers.

Through this experience, they understand first-hand how overwhelming a cancer diagnosis can be and the obstacles patients face. They are committed to navigating the health care process for patients and alleviating stress along the way.

#### Kathé Sadler-Wright, MSN, RN-C, Clinical Breast Navigator

Kathé Sadler-Wright, MSN, RN-C,



clinical breast navigator, describes her role as a "GPS" for patients – guiding them and helping them every step of the way.

She puts patients in touch with financial and transportation resources,

schedules appointments with physicians, makes appointments for additional testing and more. "When a patient has a cancer diagnosis, there's a lot of moving parts in their treatment that need to be pulled together. Couple that with the fact when a patient gets a diagnosis, they're in shock and don't know what to do next. That's when a navigator becomes helpful."

Working closely with surgeons on staff at Community Medical Center, Kathé follows patients through the process, including surgery, radiation and chemotherapy. She's involved in developing a patient's survivorship care plan, an interdisciplinary effort involving everyone active with the patient's care.

She helps breast cancer survivors with follow-up appointments and educates them on the side effects of treatment.

Kathé is also involved with the hospital's Tumor Board – where physicians of different specialties come together to evaluate a patient's case to recommend the best treatment approach.

"Being a patient navigator is very personal for me," she says. "Women battling breast cancer today have a far better outlook than years ago – I find that very rewarding."

Kimberly Gittines Patient Navigator American Cancer Society Community Medical Center



Kimberly Gittines completely understands the "deer in headlights" looks from cancer patients who are overloaded with information, not knowing where to turn.

As the American Cancer Society (ACS) patient navigator for Community Medical Center, Kimberly helps make that giant "cloud" smaller and smaller for patients – helping them target what they need.

Patient navigators provide guidance to patients at Community Medical Center as a result of generous funding from the ACS through a grant from the Jay and Linda Grunin Foundation.

Kimberly provides an extra layer of support for patients, including access to community resources and ACS and hospital support services, and works collaboratively with nurses and social workers to meet patients' needs.

"Sometimes people just need to talk or need information while others need everything – from A to Z," says Kimberly.

Kimberly especially enjoys fitting patients undergoing cancer treatment with free wigs, available in every color and style at the Inspiration Boutique. "Losing hair during cancer treatment can be one of the hardest things to deal with. By the time people leave with a new wig, they're happy and smile. "Wigs make such a difference!"

#### Terri Martin, RN, BSN, OCN, Lung Clinical Navigator



Terri Martin, RN, BSN, OCN, lung clinical navigator, removes barriers to patient care. "I serve as the patient's point person – pulling resources together to make sure their needs are met."

Terri alleviates patients' stress in many ways, including compiling medical records required for additional doctor's visits to helping them understand their medical treatment.

"It's common for patients to feel overwhelmed – I can step in and smooth out the process."

Serving as the liaison, Terri makes sure patients get what they need medically, and also helps educate them about their treatment. "Sometimes, patients are confused about what was said in the doctor's office. I step in and help explain the information in understandable terms."

When lung cancer treatment is completed, many patients are concerned about recurrence. "I encourage patients to continue to contact me – my support is ongoing."





# Lung Cancer Program Offers New Hope for Patients

ung cancer claims more lives than breast, colon and prostate cancers combined. To help increase the fight against lung cancer, Community Medical Center has launched a new Lung Cancer Program at the J. Phillip Citta Regional Cancer Center, featuring the most advanced resources for diagnosing and treating lung cancer.

"We're committed to elevating the care for patients in our community and are proud to offer extensive services through the new Lung Cancer Program," says Stephanie L. Bloom, FACHE, President and Chief Executive Officer at Community Medical Center.

The Lung Cancer Program utilizes a multidisciplinary team of experts who plan and oversee each patient's care. The team includes a range of specialists, such as a medical oncologist, radiation oncologist, surgeon, pulmonologist, pathologist and radiologist. Using a full

range of world-class treatment options, the lung cancer team offers minimally invasive surgery and outpatient biopsies, chemotherapy, and radiation and target therapies, plus the region's only CyberKnife, which provides highly precise radiation therapy. Through the hospital's Lung Tumor Board, a panel of cancer experts reviews treatment options and makes recommendations for select patients' treatment plans. To ensure patients receive thorough care and peace of mind, a registered-nurse navigator coordinates the patient's care and provides information and support throughout the entire process – from initial contact with the program through diagnosis, treatment and survivorship.

According to James McCaughan, MD, board-certified thoracic surgeon who served as the driving force behind its development, "It's important to remember that lung cancer has no symptoms at its earliest stages — so those who are at high risk or who do have symptoms should contact us right away. Early detection and treatment save lives."

#### Know the Signs

- ✓ Persistent cough
- ✓ Constant chest pain
- ✓ Coughing up blood
- ✓ Shortness of breath, wheezing or hoarseness
- Repeated bouts of pneumonia or bronchitis
- ✓ Swelling of the neck and face
- ✓ Loss of appetite, weight loss
- ✓ Fatigue

#### The Lung Cancer Program: What to Expect

A series of steps assesses each patient's risk for developing lung cancer and determines the appropriate next steps:

- Patients meet with the hospital's dedicated registered nurse clinical navigator to discuss risk factors and complete a screening tool designed to determine their individual risk.
- Patients explore their eligibility for lung cancer screening using a low-dose CT scan.
- The hospital's Lung Tumor Board reviews patients' diagnostic information and assesses any abnormalities. This panel of cancer experts reviews various treatment options and makes recommendations for select patients' treatment plans.

The J. Phillip Citta Regional Cancer Center at Community Medical Center, a member of the Penn Cancer Network, is the leading provider of cancer services in the Ocean County region. It has been nationally recognized by the Commission on Cancer of the American College of Surgeons with accreditation since 1986.



James McCaughan, MD Board-certified Thoracic Surgeon Community Medical Center

# Saving lives even faster... new stroke protocol implemented

he Emergency Department at Community Medical Center, with help from local EMS, has cut the time required to treat stroke patients by half through a multidisciplinary approach called the EMS Stroke Bypass program. The program also utilizes technology to make it even easier to complete consultations with neurologists.

A team of experts from Community Medical Center's Emergency Department and the Jay and Linda Grunin Neuroscience Institute includes emergency medicine physicians, neurologists, radiologists, nurses, stroke coordinators, radiology staff and pharmacists, working in collaboration with the Monmouth Ocean Hospital Service Corporation (MONOC) Advanced Life Support Division.

Through the EMS Stroke Bypass program, when a patient suspected of experiencing a stroke calls EMS, the responding EMS team completes a rapid assessment of the patient, looking for symptoms such as the amount of time that the patient has been experiencing symptoms, facial droops, arm drifts and abnormal speech. MONOC EMS then notifies Community Medical Center's Emergency Department of the patient's estimated arrival time. This advance warning provides hospital staff with the time needed to prepare, assign a physician and expedite the patient to receive a CT scan upon arrival.

Once the CT scan confirms the lack of bleeding in the brain, the decision to administer the clot-busting medication tPA can be made.

"The saying is 'time is brain," said Vikram Varma, Chair, Department of Emergency Medicine at Community Medical Center. "The faster we get the patient to the end result and the decision is made to administer tPA, which helps dissolve clots, the better the outcome for the patient."

According to the American Heart Association, if given promptly, one in three patients who receive tPA resolve their symptoms or have major improvements in their recovery from stroke.

Since EMS Stroke Bypass was implemented 10 months ago, the program has successfully cut the time taken to evaluate, diagnose, receive the official CT result and make the decision to administer the clot-busting medication nearly in half.

"This program has really allowed us to expedite care," said Dr. Varma. "As soon as the patient is brought in through our doors, they are taken straight to the CT scanner with EMS – it has truly changed our workflow and improved outcomes in a time-sensitive situation."

For stroke patients who enter the Emergency Department and require a consultation from a neurologist, the REACH program – remote evaluation of acute ischemic stroke – provides patients with faster access to neurologists.

To facilitate quick consultation with a neurologist, the REACH program has begun in the Emergency Department (ED), which allows for Skyping between a neurologist and a patient in the ED who needs to be evaluated for a potential stroke.

Vikram Varma, MD
Board-certified Emergency Medicine
Chair, Department of Emergency Medicine
Community Medical Center

The neurologist is able to see the patient from a laptop computer and has the capability to zoom in to view the patient. This allows the neurologist, in consultation with the emergency room physician, to begin lifesaving care at the Emergency Department.

"The REACH program complements the EMS Stroke Bypass program, ultimately cutting down the time required to treat patients and resulting in better outcomes," said Dr. Varma.

### Pastoral Care Services

Spiritual guidance and emotional support benefits patients, families and hospital staff

hether a patient is facing surgery or end-of-life issues, it's common to experience feelings of anxiety, fear and grief. To help patients, along with their family members, cope with these feelings, Community Medical Center's Pastoral Care Department offers spiritual guidance, emotional comfort and support.

The Pastoral Care Services team includes a full- and part-time chaplains who provide leadership to a staff of 16 volunteers and 41 Eucharistic Ministers. The team provides guidance and support in three distinct areas: prayers/invocations and blessings, death and dying, and outreach participation.

"We recognize that many patients and loved ones are looking for holistic approaches to improve their wellbeing and are proud to offer options through Pastoral Care Services," says Karen Ahearn, RN, Chief Nursing Officer at Community Medical Center.

The hospital's chaplains recognize and respect the views of all religions, denominations and personal philosophies, encouraging a holistic approach to health care.

The Pastoral Care team counsels patients in many areas, including impending surgical procedures and end-of-life decisions. They also lead religious ceremonies of worship such as bedside weddings and baptisms, perform blessings and rituals at the time of birth, or coordinate with a patient's clergy to have them performed. Chaplains sit on ethics committees, work with organ donors and provide spiritual care to hospital staff.

Once a year during Nurses Week, chaplains perform a "Blessing of the Hands" ceremony open to any staff on the unit, including doctors, technicians, nurses and housekeepers. Staff is invited to participate and share a quiet moment to reenergize themselves, pray for continued strength to take care of patients, and lessen any anxieties.

"To heaf sometimes,
to remedy often,
to comfort always."

- French proverb

To better understand the diverse spiritual needs of patients, the Pastoral Care staff is involved with the Clergy Council where multi-denominational clergy members from the area meet regularly at the hospital to discuss issues affecting their parishioners that may ultimately impact their hospitalization.

Community Medical Center provides patients with a booklet of specially chosen prayers and scripture offering words of inspiration, guidance and solace during a hospital stay. Also available is the CareNotes series of publications that address a variety of spiritual topics, including a selection for cancer patients and their families. The Chapel is open at all times for people of all faiths for meditation and prayer.

#### A "Day in the Life" of a Chaplain

Chaplain Cheryl Baker has been a presence at Community Medical Center for 14 years, starting as a volunteer then serving as part-time chaplain for the past eight years. While each day is different and filled with its own set of challenges – from ministering to the needs of people facing crises to connecting with families – Chaplain Baker and her team strive to provide a sense of calm and comfort to patients and their families. She starts her day by assigning religious lists to ministers and deacons and providing a census report to volunteers. Then, she makes rounds – checking in on volunteers and patients. Chaplain Baker is called upon to make emergency room visits – often when a patient has passed away – and offer support to family members as well as staff.

"Although this is their routine, staff and doctors need spiritual support too," says Chaplain Baker. "We're here to help families however we can – by offering prayer, a listening ear and a hand to hold. Many times, it's just being in the room that brings a sense of calm to patients and families."





#### **Meet Chaplain Alice**

Community Medical Center is pleased to welcome Alice Seccafico as full-time chaplain.

Chaplain Alice is no stranger to Community Medical Center as she previously served as chaplain at Van Dyke Hospice of Community Medical Center Home Health and Hospice and part-time chaplain at the hospital. She has prior experience working in the behavioral health field and the court system.

As chaplain, she hopes to reaffirm patients, family members and staff alike about the goodness in life. "During tough times, many people have questions about their spirituality and belief system," said Chaplain Alice. "I'm here to help them explore that and to help them reconnect spiritually. Regardless of a person's religion, my goal is to help people find comfort and peace."

An ordained minister, Chaplain Alice received her Master of Divinity degree from Palmer Theological Seminary and a Bachelor of Arts degree from Seton Hall University.

### ■ Community Medical Center ■ Barnabas Health

99 Highway 37 West, Toms River, NJ 08755

#### **Inspiration Boutique Pampers Our Patients**

ancer patients may now receive even more comfort and care at the Inspiration Boutique, a new specialty center for cancer patients located within the J. Phillip Citta Regional Cancer Center at Community Medical Center. The boutique was made possible by generous funding from the American Cancer Society (ACS) through a grant from the Jay and Linda Grunin Foundation.

As patients undergoing treatments for cancer often experience hair loss, the Inspiration Boutique provides cancer patients with access to a large variety of wig styles and colors, along with accessories, free of charge.

"We understand that hair loss causes a great emotional toll for many cancer patients," says Michael Nagy, MD, FACS, a plastic surgeon affiliated with Community Medical Center and board member of ACS. "An important component of the healing process is for people to feel good about themselves. We strive to treat the whole patient and take into consideration the mind, body and spirit... the Inspiration Boutique is designed to do just that."

The Inspiration Boutique also offers an array of holistic therapies to promote healing, including Reiki for stress reduction and relaxation, as well as pet, art and music therapy programs and support groups.

"We hope the spa-like feel and services at Inspiration Boutique will help make patients feel a little more at ease and help lessen the stress on patients and families," says Stephanie L. Bloom, FACHE, President and Chief Executive Officer, Community Medical Center.





Michael Nagy, MD Board-certified Plastic Surgeon Community Medical Center