

A Publication of  
JERSEY CITY MEDICAL CENTER

SUMMER 2019

# healthy

*together*

**JOINT PAIN:  
HOW TO GET HELP**

**GETTING READY  
FOR QUINTUPLETS**

**DELICIOUS &  
NUTRITIOUS  
SUMMER RECIPES**

**FITNESS TIPS  
FROM BASEBALL PROS**

# Celebrating a Good Year

Time really does fly. Already, a year has passed since we first announced our partnership with Rutgers University, one of the nation's leading public educators, to create a new state of health in New Jersey. We're thrilled by how much already has been accomplished and how our partnership is benefiting patients and communities across the state. And we're energized by our plans for the future.

Our medical group includes hundreds of primary care and specialty physicians with over 200 locations across the state. Our partnership with Rutgers gives each of these physicians seamless access to the strength of our combined, state-of-the-science medical expertise, services and treatments.

One of the most exciting things to come out of our partnership with Rutgers so far is the recently announced creation of a dedicated cancer hospital, to be built in New Brunswick on the Robert Wood Johnson University Hospital campus. This new cancer center of excellence will take on the most complex cases, enabling more cancer patients to stay in New Jersey close to family and friends for treatment.

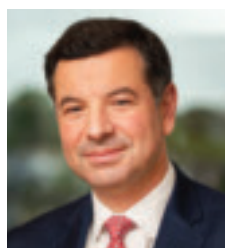
At Jersey City Medical Center, our capability to fight cancer has been significantly enhanced by our partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center. Rutgers Cancer Institute of New Jersey specialists are serving patients right on our campus, providing close-to-home access to the latest treatment and clinical trials. And working with Rutgers Health and Barnabas Health Medical Group, JCMC's Outpatient Services at Colony Plaza has expanded to offer comprehensive outpatient services and the first-of-its-kind medical and surgical practice to Hudson County. Together, we specialize in excellence.

We look forward to bringing you many more benefits as we continue to hardwire Rutgers across the RWJBarnabas Health system.

Yours in good health,

**BARRY H. OSTROWSKY**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
RWJBARNABAS HEALTH

**MICHAEL PRILUTSKY**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
JERSEY CITY MEDICAL CENTER



## HEALTH NEWS

### JERSEY CITY MEDICAL CENTER EARNS AWARDS AND ACCREDITATION

Jersey City Medical Center's steadfast commitment to improving the health and well-being of the community we serve is exemplified by our advanced technologies and the recognitions we have received. Here are some recent examples:

- **GRADE A SAFETY:** JCMC has earned its 14th A from The Leapfrog Group since the program's inception in 2012.
- **ADVANCED TECHNOLOGIES:** JCMC is home to the most advanced robotic-assisted surgical program. Surgeons may choose to utilize this technology to further customize general surgical procedures and achieve an advanced level of accuracy and optimal results.
- **NURSING EXCELLENCE:** JCMC achieved Magnet recognition for a third time from the American Nurses Credentialing Center's Magnet Recognition Program, which distinguishes organizations that meet rigorous standards for nursing excellence.

• **ACCREDITATION STATUS:**

JCMC's Antenatal Testing Unit is accredited by the American Institute of Ultrasound in Medicine (AIUM), demonstrating the hospital met or exceeded nationally recognized standards in the performance and interpretation of diagnostic ultrasound examinations. JCMC has also been recognized as a DNV GL Healthcare-certified Hip & Knee Replacement Program. This certification validates the hospital's excellence across the spectrum of hip and knee replacement care, from diagnosis to treatment, rehabilitation, education and outcomes.



**Jersey City Medical Center** | **RWJBarnabas HEALTH**

355 Grand St., Jersey City, NJ 07302  
201.915.2000 | [www.rwjbh.org/jerseycity](http://www.rwjbh.org/jerseycity)

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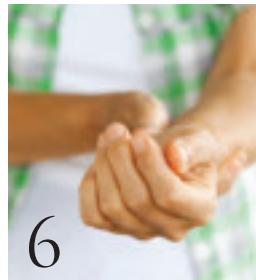
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# WHEN IS IT AN EMERGENCY?

## HOW TO DECIDE WHERE TO GO TO BE TREATED FOR AN ILLNESS OR INJURY.

**Y**our bad back suddenly got worse. Your daughter fell in the backyard and can't put weight on her ankle. Your father mentions he's been having chest pain.

All of those scenarios require professional medical care. But what kind of care is needed—an appointment with a primary care doctor, a visit to the urgent-care center, or a trip to the Emergency Department (ED)?



**DEVEN UNADKAT, DO**

In general, trust your gut and err on the side of caution, advises Deven Unadkat, DO, FACEP, Emergency Department Chairman and Medical Director

at Jersey City Medical Center.

"Essentially, if you have any condition that you feel needs an immediate response from a physician, that you think can potentially cause harm or cause significant health issues because of a delay, you want to go to an ED," he says.

These are the general differences between primary care, urgent care and emergency care:

**PRIMARY CARE** is "scheduled medical care, where the patient goes to see the physician for preventive care, for general well-being," says Dr. Unadkat. Primary care providers can treat most common health problems and provide referrals to specialists as needed. Because of their scheduled visits, they may not be able to accommodate a patient on short notice.

**URGENT CARE** is provided at walk-in centers for issues that could be

dealt with by a primary doctor, but require immediate care. "Urgent care is unscheduled, episodic care when you need a provider to make a diagnosis in a timely fashion. If you're looking for a substitute for your primary care doctor because he or she is not available, the best choice would be an urgent care center," says Dr. Unadkat.

Urgent care centers often see patients seeking relief for symptoms such as congestion, coughs and upper-respiratory tract infections. "Those sorts of things, as well as things like superficial cuts and scrapes, or a sprained ankle, can be handled at urgent care," says Dr. Unadkat. "But for anything more serious, you should come to an ED to be seen by a board-certified emergency physician."

An **EMERGENCY DEPARTMENT** is a center for the management of conditions



At left: views of RWJBarnabas Health at Bayonne provided by Jersey City Medical Center. The facility has state-of-the-art equipment for any emergent care need.

## A SATELLITE ED IN BAYONNE



RWJBarnabas Health at Bayonne, a state-of-the-art satellite ED of Jersey City Medical Center, celebrates its second anniversary this August. Located at 519 Broadway at the corner of 24th Street, it is staffed 24/7 with board-certified emergency physicians as well as specially trained nurses and technicians. The facility has an on-site imaging facility and provides ample parking.

“The community loves it,” says Deven Unadkat, DO, FACEP, Emergency Department Chairman and Medical Director at Jersey City Medical Center. “It gives residents another ED choice, right in their community. The response has been fabulous.”

that are potentially life-threatening.

“They used to call such places ‘the emergency room’ because there literally was one room, where there was one nurse and a doctor on call,” explains Dr. Unadkat. “Now, major EDs like Jersey City Medical Center are staffed with multiple board-certified emergency physicians, physician assistants, nurse practitioners and nurses who are trained in emergency care, and trained to take care of multiple complex and serious patients at one time.”

Common complaints presented in the ED include “chest pain, belly pain, vomiting, dehydration, diarrhea, vaginal bleeding, difficulty talking or walking, difficulty moving arms or legs, visual disturbances and traumatic conditions like falls, lacerations, head injury and broken bones,” explains Dr. Unadkat.

A satellite ED, such as the one at the RWJBarnabas Health at Bayonne facility provided by Jersey City Medical Center, is located away from the primary site

of a medical campus and can offer local residents a more convenient location and a shorter wait time. It has virtually all the equipment of the main hospital ED and is fully staffed around the clock by board-certified emergency physicians.

In some cases, a trip to the ED may accomplish more than saving your life; it can put you on the path to ongoing treatment. “Not only are we identifying and accurately treating emergent medical conditions, we’re also treating and discharging patients to specialists associated with our hospital system. This way, the patient’s condition is shared with outpatient specialists who have access to our records. It allows for more efficient communication and better overall care,” says Dr. Unadkat.

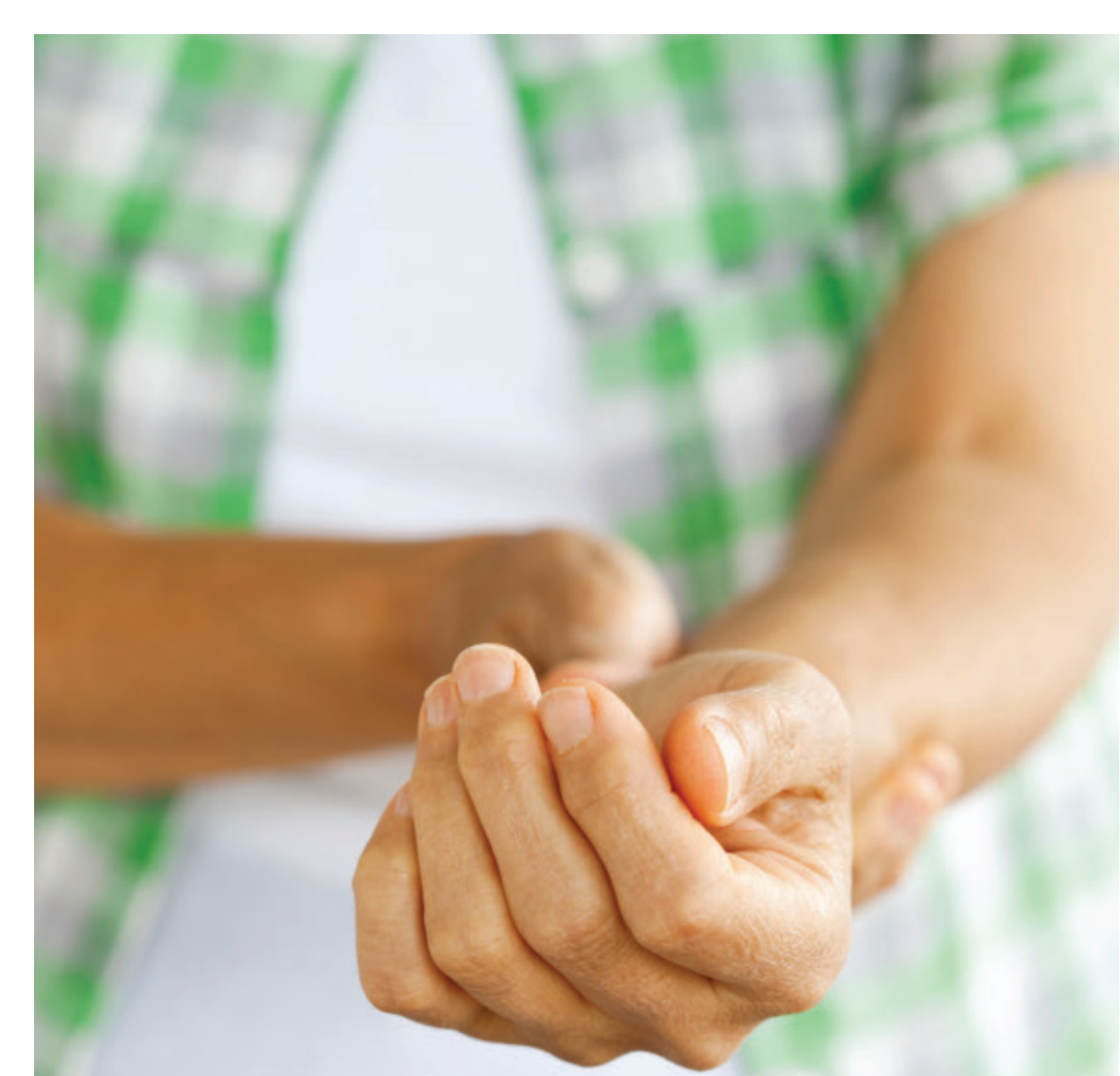
## THE COST QUESTION

The cost of healthcare often plays a role in patient decisions, even in emergency situations, Dr. Unadkat says.

“If you are worried about bills, look at your insurance plan to understand what your deductibles and copays are for urgent care vs. emergency care,” he advises. “Generally, emergency care is more expensive because the level of care and specialty is higher.

“But know this: In our Emergency Department, we will see anyone who comes in, regardless of their ability to pay,” says Dr. Unadkat. “We will make sure you are seen, 24/7, and that your emergent condition is addressed and stabilized. That’s what makes my job so rewarding.”

For more information about RWJBarnabas Health at Bayonne, call **201.716.5700** or visit [www.rwjbh.org/bayonne](http://www.rwjbh.org/bayonne).



# A PAIN IN THE JOINT: HOW TO GET HELP

AN ORTHOPEDIST CAN IDENTIFY THE CAUSE, AND MAKE YOUR NEXT STEPS EASIER.

**P**ain in the joints can greatly affect quality of life. “Many of our patients tell us they think more about their pain than about the activity they’re doing, even if it’s just walking across the room,” says Frank Liporace, MD, Director of the Orthopedic Institute at Jersey City Medical Center (JCMC).

The first step in successful treatment, he says, is to determine exactly what is causing the pain. Because of the wide range of possibilities—from arthritis to bone changes to a malformation of the joint—it’s a good idea to get any joint pain evaluated by specialists. “Come to us to decipher the cause and help you begin the right treatment,” says Dr. Liporace.

### ABCs OF ARTHRITIS

Often, the cause of joint pain is arthritis, a condition that is the major cause of disability for adults in the U.S., according to the Arthritis Foundation. In fact, there are over 100 types of arthritis, and a variety of risk factors and treatments.

The most common form is **osteoarthritis** (OA), also called “wear and tear” or “degenerative” arthritis. Causes include excess weight, past joint injury or overuse of the joint. The smooth cartilage between the joint breaks down, leading to damage and pain. The pain can lead people to forego being active, which then leads to weaker, less stable muscles around the joint—and more pain.

One of the most painful types, **rheumatoid arthritis** (RA), has a very different cause. It’s an autoimmune disease, which means the body’s immune system attacks healthy cells. With RA, this attack is to the joints, causing swelling and pain. If not treated early or correctly, the inflammation can sometimes cause permanent damage.

Other types of arthritis include **psoriatic arthritis** (which affects some people with the skin condition psoriasis) and **juvenile arthritis** (affecting children), both of which are also autoimmune disorders. In addition, arthritic conditions that cause joint pain include many that people do not associate with



FRANK LIPORACE, MD

arthritis, such as **lupus** and **scleroderma** (“hard skin”), which are also autoimmune diseases, and **gout** (a buildup of uric acid crystals in the joint).

For patients with a type of arthritis that affects many parts of the body, a range of specialists at JCMC work together to provide the latest treatments to help slow damage and relieve pain.

### TREATMENT OPTIONS

“Surgery isn’t the only way to treat arthritis pain and other joint pain, and it’s actually the last,” says Dr. Liporace. “Many of our patients have success with a combination of medicines to reduce the pain and inflammation, plus physical therapy.”

Pain management involves a combination of medicines taken by mouth or injected using a needle. Physical therapy treatment focuses on muscle-strengthening,

with the goal of helping the patient regain balance and increase the strength of key muscles that support the joint.

Other treatments, like surgery, are also effective for some patients, Dr. Liporace says. (See sidebar, above). “The expertise of our team at the Orthopedic Institute at JCMC spans the range of care, to meet all the needs patients would have,” he says.

“Our patients report returning to playing sports, to being more active with their kids and grandkids and to new activities they avoided before because of pain,” he says. “At the end of the day, I’m most gratified when someone has told me, ‘I’m happy how treatment turned out, and I wish I’d done this sooner.’”

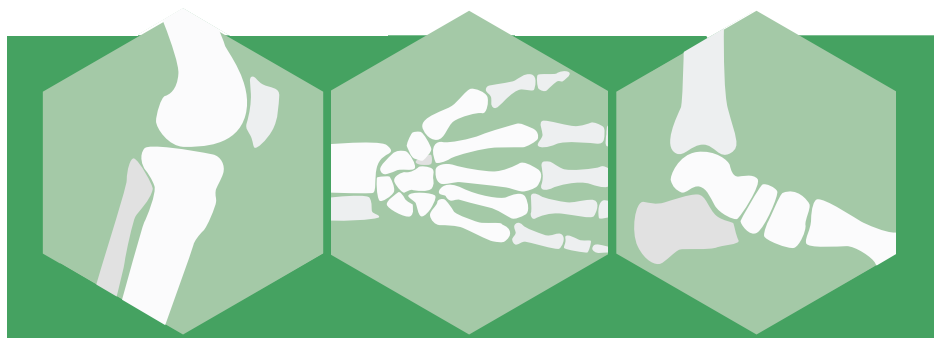
“Whether you’re age 45 or 85 and have arthritis, we want you to not have to think about your joints at all. We want you to be as active as possible.”

## WHEN IS IT TIME FOR JOINT SURGERY?

“If a doctor recommends surgery as the first treatment for arthritis or joint pain, you’ve got the wrong doctor,” says orthopedic surgeon Frank Liporace, MD, Director of the Orthopedic Institute at Jersey City Medical Center (JCMC). “We can have a serious discussion about surgery after you have exhausted other options, like physical therapy and medicines.”

When surgery is the best option, patients are pleased to find how quickly they improve with advanced treatments, he says. For example, in a same-day procedure, specialists at JCMC can repair damage or injury to joints with arthroscopy, which involves tiny incisions and the use of small cameras, lasers and other tools. For bones or joints that are not aligned correctly, surgeons can employ other advanced tools and techniques. These include osteotomy, the cutting or removal of a piece of bone, and total joint replacements.

“Because of our experience and the techniques, even with total knee replacement, our patients are usually back on their feet in less than a day,” says Dr. Liporace. “They are often surprised and pleased by that.”



To learn more about the Orthopedic Institute at Jersey City Medical Center, call **844.63.ORTHO** or visit [www.rwjbh.org/ortho](http://www.rwjbh.org/ortho).

# DELICIOUS AND NUTRITIOUS

IT'S THE SEASON FOR HEALTHY RECIPES THAT MAKE THE MOST OF FRESH, LOCALLY GROWN INGREDIENTS.

In summer and early fall, eating healthy gets easier and tastier, thanks to the availability of local produce. The vitamin-packed recipes below are provided by the RWJBarnabas Health Wellness on Wheels mobile greenhouse and cooking school, which travels around the state to provide free nutrition education and demonstrations to local neighborhoods.

## KALE PESTO PASTA

### INGREDIENTS:

- 1 medium butternut squash, about 2 pounds, peeled, seeded and cut into 1-inch cubes
- ½ cup plus 2 tablespoons olive oil, divided
- 1 teaspoon sea salt, divided
- ½ teaspoon black pepper, divided
- 1 box (13.5 ounces) whole wheat penne pasta
- ¼ cup pumpkin seeds
- ½ pound fresh kale (about ½ of a large bunch)
- ¼ cup grated Parmesan cheese
- 2 cloves fresh garlic, chopped

### DIRECTIONS:

- Preheat oven to 400°. Toss cubed butternut squash with 2 tablespoons olive oil, ½ teaspoon sea salt, and ¼ teaspoon pepper. Spread squash out into an even layer on a baking sheet and bake for 30 minutes, turning halfway through. Set aside.
- Meanwhile, cook pasta according to package directions. Reserve 1 cup starchy pasta water, then drain pasta and set aside.
- Add pumpkin seeds to a dry medium sauté pan and heat over medium heat for 3–4 minutes to toast. Set aside.
- Remove kale leaves from their stems and add to food processor. Discard stems. Add remaining ½ teaspoon sea salt, ¼ teaspoon pepper, toasted pumpkin seeds, Parmesan cheese and garlic to food processor. Pulse until kale is finely chopped and ingredients are well combined. With the food processor running, slowly drizzle in the remaining ½ cup olive oil until the sauce is smooth.
- In a large mixing bowl, toss together pasta, pesto sauce and roasted squash until well combined. Add starchy pasta water to help mix in pesto if necessary.



## RATATOUILLE

### INGREDIENTS:

- 1 tablespoon vegetable oil
- 1 large yellow onion, peeled and chopped into ¼-inch pieces
- 4 cloves garlic, peeled and minced
- 1 medium eggplant, peeled and diced into ¼-inch to ½-inch pieces
- 2 zucchini, diced into ¼-inch to ½-inch pieces (or use 2 cups of frozen chopped zucchini)
- 1 red bell pepper, cored, seeded and diced into ¼-inch pieces
- 1 teaspoon dried basil
- ½ teaspoon dried oregano
- 3½ cups fresh tomatoes (or canned low-sodium tomatoes, including the juice)
- 1 lemon, quartered
- ¼ cup chopped fresh basil leaves

### DIRECTIONS:

- Put a pot on the stove over medium-low heat and when it is hot, add the oil. Add the onion and garlic and cook until golden, about 10 minutes.
- Add the eggplant, zucchini, bell pepper, dried basil and oregano and cook, covered, until the eggplant is very soft, about 40 minutes.
- Add the tomatoes and cook, uncovered, for 20 minutes.
- Serve garnished with lemon quarters and fresh basil, or cover and refrigerate up to 3 days.



To schedule an appointment with a Registered Dietitian, call **201.885.3700** or visit Pavonia Primary Care at 500 Pavonia Avenue, 2nd floor, Jersey City.





# CRANIAL TUMORS: HELP FOR HARD CASES

**HOW TOP NEUROSURGEONS AT RWJBARNABAS HEALTH  
TACKLE THE TOUGHEST TUMORS.**

Cranial tumors are never easy to treat, but some are especially challenging. Those cases are often sent to Anil Nanda, MD, MPH, and the team of expert neurosurgeons affiliated with RWJBarnabas Health (RWJBH).

Recently, for example, there were the cases of an 8-year-old girl with an arteriovenous malformation, a bird's nest-like tangle of blood vessels at the top of her spine that paralyzed her, and a 21-year-old woman with a hemorrhaged brain stem cavernoma. Both patients were referred to Dr. Nanda and the enhanced neurosurgical program he is creating with colleagues

throughout RWJBH. The lesions were successfully removed.

"People should know that we can take care of very complicated neurosurgical issues with good

outcomes right here in New Jersey," says Dr. Nanda, who has been recognized as a global leader in neurosurgery.

But Dr. Nanda is not just building a practice that specializes in cranial tumors in his roles as Senior Vice President of Neurosurgical Services for RWJBH and Professor and Joint Chair of the Department of Neurosurgery at both Rutgers Robert Wood Johnson Medical School and Rutgers New Jersey Medical School. Dr. Nanda is creating a world-class center of neurosurgery at RWJBH. In addition to providing state-of-the-art training for medical residents, the effort is attracting top talent to New Jersey from all over the world.

## GRATIFYING RESULTS

Neurosurgery services at RWJBH cover many areas, including spinal disease, stroke, aneurysms, brain trauma and more.

Dr. Nanda's specialty is surgery of the skull base, an area formed by bones at the bottom of the skull that is crisscrossed by nerves and blood vessels carrying messages and oxygen to the brain.

Last fall, an especially challenging patient was referred: a 38-year-old woman whose personality had been slowly deteriorating over the previous five years. She had become hostile to family and friends, and her memory and cognition were impaired.

Finally, an MRI of the woman's brain found the cause of her problems: a 9-centimeter (approximately 3.5-inch) meningioma, a benign, slow-growing tumor that forms on membranes covering the brain.

"The tumor's pressure on her frontal lobe—which handles cognitive functions such as planning, memory and emotional expression—was so great that it had been compacted and barely showed on the MRI," says Dr. Nanda.

During surgery, Dr. Nanda first stopped the tumor's blood supply, then began the removal process. "After a difficult operation, the growth was entirely removed, and with the pressure gone, the frontal lobe expanded to its normal size," he says.

Three days later, the woman was sitting up and talking and her former upbeat personality had begun to return.

"It was really gratifying for our team to be able to effect such a dramatic change," says Dr. Nanda.

"Symptoms like this woman's are often chalked up to depression or schizophrenia or, in the case of an older person, dementia," he explains. "In such cases, it's important to investigate possible causes in detail, sooner rather than later."

For residents of New Jersey and the region, the good news is that excellent care for such conditions is available close to home. Says Dr. Nanda, "RWJBarnabas Health is building a team of top neurosurgeons and other experts in neuroscience that is among the best in the world."



**ANIL NANDA, MD**

To learn more about New Jersey's most comprehensive neurosurgery program, call **833.656.3876** or visit [www.rwjbh.org/neurosurgery](http://www.rwjbh.org/neurosurgery).



# PEAK PERFORMANCE:

# SECRETS OF BASEBALL PROS

**A HEALTHY LIFESTYLE IS NO MINOR MATTER FOR THESE OUTSTANDING LOCAL PLAYERS.**

When they unleash a blazing pitch or knock one out of the park, star baseball players can seem like superheroes. Granted, they *are* gifted. But to perform at that level, standouts from minor league baseball teams abide by healthy principles that weekend warriors and young athletes can share.

RWJBarnabas Health (RWJBH) partners with four top minor league baseball teams in the state: The Lakewood BlueClaws, New Jersey Jackals, Somerset Patriots and Trenton Thunder. What RWJBH and the

To learn more about RWJBarnabas Health corporate partnerships, visit [www.rwjbh.org/corporatepartners](http://www.rwjbh.org/corporatepartners).

**A PARTNERSHIP WITH IMPACT:** At left, RWJBarnabas Health and the Lakewood BlueClaws teamed up to deliver much-needed baseball gear to the children of Puerto Rico after Hurricane Maria. RWJBH also delivered medical supplies to the island as part of its social impact and global health initiatives.

**HEALTHY FAMILY FUN:** Below, the Somerset Patriots play at the 6,100-seat TD Bank Ballpark in Bridgewater.



## ALFREDO RODRIGUEZ

INFIELDER | SOMERSET PATRIOTS  
HEIGHT: 6'0" | WEIGHT: 175

**STRETCH FOR SUCCESS:** "Warm-ups used to be static, but now we have dynamic warm-ups, which do a better job of getting your body ready for whatever you want it to do. That means moving while stretching, like walking or pulling a knee to the chest."



## JACK PERKINS

PITCHER | LAKEWOOD BLUECLAWS  
HEIGHT: 6'4" | WEIGHT: 200

**GET A LEG UP:** "If you're a pitcher for your school or local team, the best thing to do is get your legs as strong as possible with squats, running and sprints. Legs are the strong foundation that's going to take you deep into games and give you more velocity."



MICHAEL DILL PHOTOGRAPHY

## GARRETT WHITLOCK

PITCHER | TRENTON THUNDER  
HEIGHT: 6'5" | WEIGHT: 190

**CORE PRINCIPLES:** "A good strong core is important for anybody to keep a healthy balance. I do planks and also 'dead bugs'—exercises where you lie pressed flat on the floor and extend your arms and legs."



## CONRAD GREGOR

INFIELDer/OUTFIELD | NEW JERSEY JACKALS  
HEIGHT: 6'3" | WEIGHT: 220

**CONSISTENCY IS KEY:** "If you don't have time to get to a gym, do body-weight exercises that don't require equipment—pushups, squats, squat thrusts and similar exercises. That's what I do in my hotel room when we're on the road."

ball teams have in common is their community- and health-oriented focus. "Minor league baseball has a strong grassroots spirit that you don't necessarily see in professional sports," says Michael Knecht, Senior Vice President, Strategic Marketing and Communications for RWJBH. "These are organizations that are embedded in the communities we serve, and that have similar missions and values." Any given season might feature a celebration of patients, social outreach or healthy lifestyle education for fans.

In that spirit, top players, at right, reveal their fitness tips for peak performance.

# NEW CANCER TREATMENT, NEW HOPE

## HOW CAR T-CELL THERAPY HELPED A PATIENT WHEN CHEMOTHERAPY COULD NOT.

**D**ave Rodney, 62, didn't have time to be sick. A professional concert and travel promoter, and an avid musician and cook, he had too much living to do.

But in August 2017, while working out, Dave felt a slight discomfort in his lower abdomen. He assumed he'd pulled a muscle. However, at a routine physical shortly afterward, his doctor advised him to go to the Emergency Department at Saint Barnabas Medical Center (SBMC) in Livingston.

There, a scan revealed an abdominal mass. Dave was admitted for further tests. The eventual diagnosis: diffuse large B-cell lymphoma (DLBCL). This aggressive blood cancer, a form of non-Hodgkin lymphoma, usually starts as a fast-growing mass in a lymph node.

From September 2017 through January 2018, Dave was treated with chemotherapy under the care of Andrew Brown, MD, a medical oncologist with The Cancer Center at SBMC. Unfortunately, a first round was unsuccessful, as was a second round with a different medication.

The next step would typically be to assess whether a stem cell transplant might work. But now, there is also a new treatment called CAR T-cell therapy. "It was very important that I get him to a specialty center that handles complex cases," says Dr. Brown. "Because of our health system's partnership, I sent him down to Rutgers Cancer Institute of New Jersey and Robert Wood Johnson University Hospital in New Brunswick."

### NEW POSSIBILITIES

In the fall of 2017, the Food and Drug Administration made a big announcement: It had approved CAR T-cell therapy for adults with DLBCL and for children and young adults with acute lymphoblastic leukemia.

In this therapy, T cells (a type of immune system cell) are taken from a patient's blood. In a laboratory, a chimeric antigen receptor (CAR), which binds to a certain protein on the patient's cancer cells, is added to each cell. These CAR T cells are then added back to the patient's blood to attack cancer cells.

The treatment is given only to patients whose cancer has proven resistant to chemotherapy and who may not be good candidates for stem cell transplants. Further, it can be offered only at centers that have clinicians, nurses and other healthcare

professionals who are FACT (Foundation for the Accreditation of Cellular Therapy)-certified.

The teams at Robert Wood Johnson University Hospital (RWJUH) and Rutgers Cancer Institute fit the bill. Dave Rodney would be their first patient for CAR T-cell therapy.

"This is a transformative therapy," says Dennis Cooper, MD, Chief, Blood and Marrow Transplantation at Rutgers Cancer Institute. "In the past, if a patient with this type of lymphoma wasn't responsive to chemotherapy, apart from experimental treatments we were essentially out of luck. Now we have a new option that's potentially curative."

### MOVING AHEAD

Dave met with Dr. Cooper in March of 2018. At that and subsequent visits, he learned more about the procedure and its potential benefits and risks.

"They were very honest and open," Dave says. "Yes, I'd be the first. But on the plus side, many eyes and ears would be watching me to make sure everything went well. What they said made perfect sense, so I was sold."

"I can't think of a time in my career where the staff spent so much time, collectively, preparing to treat a patient," says Dr. Cooper. "There are strict criteria for care when a patient is getting CAR T cells, encompassing everything from the electronic record to drugs that can cause a reaction, and more."

"Everyone in the hospital was very committed. The people who work in the blood and marrow transplant unit, the ICU nurses, the nurse practitioners, the rapid response teams, the neurology attendings and literally every medical resident went through training before we treated our first CAR T-cell patient."


After thorough preparations, Dave's T cells were collected and sent to a laboratory



ANDREW BROWN, MD



DENNIS COOPER, MD



Dave Rodney, the first CAR T-cell therapy patient at Rutgers Cancer Institute of New Jersey and Robert Wood Johnson University Hospital, is back to doing the things he loves.

PHOTO CREDIT: JOHN O'BOYLE.



RWJBarnabas Health and The Cancer Center at Saint Barnabas Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the latest treatment, including clinical trials. Visit [www.rwjbh.org/beatcancer](http://www.rwjbh.org/beatcancer).

in California to be re-engineered, a process that takes several weeks.

In November, Dave received a mild pre-treatment chemotherapy to clear his blood of lymphocytes that could compete with CAR T cells. Then he was admitted to RWJUH to receive brand-new CAR T cells via infusion. He stayed in the hospital for two weeks as his body adjusted.

"It's impossible to describe the high level of care I had—the professionalism, expertise, warmth and caring," Dave says. "These are the best people on the planet!"

### AN EXCITING FUTURE

CAR T-cell therapy is currently under consideration to treat some forms of myeloma, a cancer of plasma cells. "CAR T cells are also being modified in the hope they can work on solid tumors—brain tumors, abdominal tumors," says Dr. Cooper. "People are realizing that you can redirect CAR T cells to almost any target you want, as long as it's on a tumor cell and not a normal cell."

Unlike in chemotherapy, which kills both healthy and cancer cells, the CAR T cells remain in the patient's body for months and continue fighting the cancer. "There's a lot of work happening on ways to make CAR T cells stay in action even longer," says Dr. Cooper.

Dave continues to return for scans to check on his progress. Meanwhile, his return to normal activity is encouraging.

"I'm as busy as ever," Dave says, "feeling better and doing all the things I love doing."

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A version of this article first appeared in the Rutgers Cancer Institute of New Jersey publication Cancer Connection.

To learn more about CAR T-cell therapy at Rutgers Cancer Institute of New Jersey, visit [www.cinj.org/car-tcelltherapy](http://www.cinj.org/car-tcelltherapy) or call **844.CANCERNJ**.



From left, Gail Knight, MD, Senior Vice President and Chief Medical Officer, Rady Children's Hospital; Michael Dribbon, PhD, Vice President of Business Development and Chief Innovation and Research Officer, CSH; Patrick Frias, MD, President and CEO at Rady Children's Hospital; Warren E. Moore, FACHE, President and CEO of CSH; and Katherine Bentley, MD, Director of the Chronic Pain Management Program at CSH.

# PARTNERING TO FIGHT PAIN

**ONE BOY'S ORDEAL LED TO HELP FOR OTHER SOUTHERN CALIFORNIA CHILDREN WHO SUFFER FROM CHRONIC PAIN.**



**Children's Specialized Hospital®**  
An RWJBarnabas Health facility

at  
**Rady Children's Hospital**

A simple heel fracture from running on a California beach led to excruciating pain for 14-year-old Jasper Neale. The fracture took a long time to heal. Worse, the pain grew and radiated throughout his body. "I wasn't able to wear clothes. I couldn't shower. I couldn't walk. If a wind blew on me, I would be screaming," he says.

Eventually, Jasper was diagnosed with Complex Regional Pain Syndrome (CRPS)—a chronic condition that is believed to be caused by damage to the nervous system—at Rady Children's Hospital in San Diego. And although he underwent weeks of outpatient therapy, the pain only got worse.

Jasper's physical therapist showed him and his parents an online video she'd found. It told the story of a girl who had suffered

similar symptoms, but managed to get them under control through an intensive course of therapy at another children's hospital. "My husband and I decided we must find a program like this for Jasper," says his mother, Lori Neale. After some research, they selected the inpatient Chronic Pain Management Program at Children's Specialized Hospital (CSH) in New Brunswick.

Less than three weeks later, Jasper and his father were on a flight to New Jersey and CSH. That decision would change his life—and, ultimately, make life better for other San Diego, Southern California and southwestern U.S. children living in pain.

## MASTERING THE PAIN

At CSH, the innovative Chronic Pain Management Program treats children with this condition through intensive physical, occupational and psychological therapy. Patients learn coping techniques to desensitize themselves to pain and mitigate it—without the use of opioids or other medications.

"One of the goals of the program is to improve the pain, but the main goal is to improve function and get our patients back to their lives," explains Katherine Bentley, MD, Director of the Chronic Pain Management Program.

After seven weeks, Jasper graduated from the program and was able to return to his California home, and to his life as a teenager.

But Jasper's recovery was not the only positive outcome of his experience. Aware of the need for a multidisciplinary approach to pain management for area patients, Rady Children's Hospital and CSH created a partnership. In April, the all-new Children's Specialized Hospital Chronic Pain Management Program at Rady Children's Hospital-San Diego opened for business.

"This joint endeavor provides us the great opportunity to treat the needs of patients and families in the Southern California region," says Warren E. Moore, FACHE, President and CEO at CSH, "and for that I could not be more grateful."

Jasper would agree. "Now," he says, "I can do anything I want to do."

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.



# HEART HEALTH: KNOW YOUR NUMBERS

**KEEP ON TOP OF THESE SIMPLE TESTS TO STAY HEALTHY.**

**W**hen it comes to protection against heart disease, the evidence is simple and clear: Preventive strategies work.

“People can have a significant effect on their heart health through the lifestyle choices they make,” says Sergio Waxman, MD, MBA, an interventional cardiologist and Chief of the Division of Cardiology at Newark Beth Israel Medical Center, an RWJBarnabas Health facility. “There are not many diseases where that is so clearly documented.”

A key part of self-care is understanding the following about your heart health. Your primary care provider can check these numbers at your yearly physical, and you can track some of them between visits.



**SERGIO WAXMAN, MD**



**BLOOD PRESSURE:** The force of blood rushing through your vessels. High blood pressure, which can damage or weaken blood vessels, is defined as a reading of 130/80. “A lot of patients get nervous in a doctor’s office, which may elevate their blood pressure, so it’s important to check it outside the office as well,” says Dr. Waxman. You can buy a manual or digital blood pressure monitor at the drugstore, or use a public device available at some pharmacies.

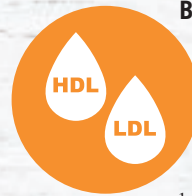


**HEART RATE (PULSE):** The number of times your heart beats per minute. “This is helpful if you’re exercising and want to see if your training is significantly affecting your heart rate,” says Dr. Waxman. The American Heart Association recommends at least 150 minutes of moderate-intensity exercise per week. The more fit you are, the

sooner your heart rate returns to normal after exercise.



**BLOOD SUGAR:** High glucose (blood sugar) levels are strongly correlated with cardiovascular disease because over time they damage blood vessels and nerves. “An annual blood test after overnight fasting is all that’s needed, unless your levels are elevated,” says Dr. Waxman. “If they are, the other number you should know is your Hemoglobin A1C, which is a measure of your average glucose levels over the past three months.”



**BLOOD CHOLESTEROL:** A waxy substance produced by the liver. Cholesterol is transported to and from cells by lipoproteins. Low-density lipoprotein (LDL, known as the “bad” kind) deposits cholesterol on artery walls; high-density lipoprotein (HDL) removes it. Both levels are determined by a simple blood test.

Your doctor also might suggest your blood be tested for C-reactive protein. “Some investigators think this may be as important as the LDL number for assessing cardiac risk,” says Dr. Waxman.



**BODY MASS INDEX (BMI):** This is a measure of body fat based on height and weight. The higher your BMI, the greater your risk for cardiac and other diseases. You can calculate your BMI with the help of online calculators and charts from the National Institutes of Health or the Centers for Disease Control and Prevention.

While most people know they should take better care of their health, they often feel that work and family demands prevent it, says Dr. Waxman. “Try to give yourself one hour every day to devote to taking care of yourself, whether it’s exercising, preparing healthy meals, checking your blood pressure, taking a nap or a combination of things,” he advises. “It’s like what they say about oxygen on airplanes: Put your mask on first or you won’t be able to help someone else.”

Your heart doesn’t beat just for you. Get it checked. To make an appointment with one of New Jersey’s top cardiac specialists, visit [www.rwjbh.org/heart](http://www.rwjbh.org/heart) or call **888.724.7123**.

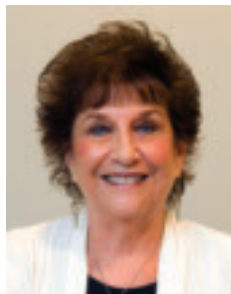


# THE KEY TO QUITTING SMOKING OR VAPING

**RWJBARNABAS HEALTH OFFERS FREE AND PROVEN SUPPORT FOR PEOPLE WHO STRUGGLE WITH TOBACCO OR NICOTINE DEPENDENCE.**

Nicotine addiction is a powerful foe. The drug triggers a brief surge of endorphins—the feel-good hormones—each time it’s inhaled through a cigarette or an electronic nicotine delivery system (ENDS), such as an e-cigarette or vaping device. That pleasure dissipates quickly, leading to the urge for another inhalation.

A pack-a-day smoker, for example, goes through this cycle about 250 times daily, creating an addictive reward system in both brain and body that causes dependence on nicotine. When the person tries to stop, withdrawal



**CONNIE GREENE**

symptoms—irritability, attention difficulties, sleep disturbances and more—lead him or her to light up again, and the cycle continues.

Most people who are still smoking today have already tried and failed to quit five to seven times, according to Connie Greene, Vice President, RWJBarnabas Health (RWJBH) Institute for Prevention and Recovery.

“They may even feel a lot of shame and guilt because of that,” she says. “But the truth is, if people who are dependent on nicotine could quit on their own, they would have done so already.”

Greene and her colleagues want these people to know that it’s not their fault. “They’re in the grip of a very insidious addiction, which may have a genetic component,” she says. “But there is hope, and there is recovery.”

“The more times you’ve tried and the more you’ve been unsuccessful, the greater chance you have for success with our Nicotine and Tobacco Dependence Treatment Program.”

## A NEW APPROACH

“We look at quitting as a process,” says Michael Litterer, Director of Prevention and Recovery at RWJBH. “It’s not as simple as making a decision and going cold turkey. In our program, we develop an individualized plan for each person who comes to us.”

When a smoker contacts the Nicotine and Tobacco Dependence Treatment Program by phone or email, a certified tobacco treatment specialist will be there to help. “You don’t have to quit right away,” Litterer says. Instead, next steps can include:

- Individualized nicotine dependence assessment, focusing on triggers and stressors
- Ongoing support in both individual or group settings
- Access to a medical director on staff to assist with primary care coordination and prescription medications
- Free nicotine replacement therapy (nicotine patches, gum and lozenges)
- Recommendations and navigation for appropriate prescription nicotine dependence medications
- Assistance in understanding the real impact of ENDS devices and cigarettes
- Behavioral modification and assistance in managing or eliminating nicotine withdrawal symptoms

“Most importantly, we will support people through the entire process of ending their nicotine or tobacco addiction. Relapsing and using nicotine during the quit attempt is sometimes part of the journey. We understand this,” Litterer says.

The program, which is funded by the New Jersey Department of Health Office of Tobacco Free, Nutrition and Fitness, does not charge participants.

The most important thing for people to know, Greene says, is that they don’t have to try to quit alone. “Call the QuitCenter number, or send us an email,” she says. “We’ll take it from there.”

To learn more about reaching recovery from nicotine or tobacco dependence, call the QuitCenter line at **732.837.9416**, or email [quitcenter@rwjbh.org](mailto:quitcenter@rwjbh.org) for a free confidential assessment. For more information, visit [www.rwjbh.org/nicotinerecovery](http://www.rwjbh.org/nicotinerecovery).







## COMMUNITY EDUCATION

### Family & Friends Adult, Child, Infant CPR Class Aug. 28, Sept. 25, Oct. 23, 2-4 p.m.

JCMC EMS Headquarters, 415 Montgomery St., Jersey City. The American Heart Association's Family & Friends CPR Course, intended for those who want to learn CPR and do not need a course completion card. Free. To register: [www.rwjbh.org/cpr](http://www.rwjbh.org/cpr) or call 888.277.2281

### Lunch & Learn Series Aug. 20, Sept. 17, Oct. 15, 1-2 p.m.

Jersey City Medical Center, 355 Grand St., Conference Room 5  
This monthly series educates our community members on various health-related topics. Join us for a complimentary meal and seminar led by guest experts. Free. To register: 888.724.7123

**Hudson County Car Seat Inspection Station**  
Every Thursday, 10 a.m.-2 p.m.  
JCMC EMS Headquarters, 415 Montgomery St., Jersey City. Car seat inspections by certified Child Passenger Safety Technicians. No appointment necessary. Free. Contact: 201.915.2906

## SUPPORT GROUPS

**Breast Cancer Support Group**  
Aug. 8, Sept. 12, Oct. 10, 5-6 p.m.  
Jersey City Medical Center, 355 Grand St., Conference Room 5 and 6. Free. To register: 888.724.7123

**Cancer Patient Support Group**  
Aug. 12, Sept. 18, Oct. 16, 1-2 p.m.  
Jersey City Medical Center Outpatient Services at Colony Plaza, 414 Grand St., Suite 12. Free. To register: 201.915.2073

**Diabetes Support Group**  
Sept. 10, Oct. 8, 2:30-4 p.m.  
Jersey City Medical Center, 355 Grand St., Conference Room 5. Free. To register: 888.724.7123

## EVENTS

**JCMC-Greenville Backpack of Health Wellness Fair**  
Aug. 15, 12-4 p.m.  
1825 John F. Kennedy Blvd., Jersey City  
A day of healthy family fun. Back-to-school items available while supplies last. Free. For more information: 201.204.0004, ext. 1052

**JCMC Baby Fair**  
Sept. 21, 11 a.m.-3 p.m.  
355 Grand St., Cafeteria. Education, demos, workshops, and fun activities for families. Vendors will show or offer baby accessories, clothing, books, toys, food and drink, and more. Free. To register: 888.724.7123

**JCMC Auxiliary Annual Tricky Tray**  
Oct. 4, 6 p.m.  
Marist High School, 1241 John F. Kennedy Blvd., Bayonne  
Contact: Leah Wittenstein at [Leah.Wittenstein@rwjbh.org](mailto:Leah.Wittenstein@rwjbh.org)

## FOR PARENTS-TO-BE

The following classes will be held at Jersey City Medical Center, 355 Grand St., 4 East Conference Room. Registration and payment are required prior to class. To register, call 201.521.5900.

**Prenatal Childbirth Classes**  
Four classes per series, two hours per class: Aug. 5, 12, 14 and 18; Sept. 9, 16, 18 and 25; Oct. 7, 9, 23 and 28; 6-8 p.m.  
Topics include third-trimester changes, signs and symptoms of labor, pain management and tour of Labor and Delivery and Postpartum Units. \$125 per couple.

**Prenatal Breastfeeding Class**  
Two-hour class, offered Aug. 20, Sept. 17 and Oct. 15; 6-8 p.m.  
Topics include latching on and positioning, when to feed your baby and breast care. \$35.

**Prenatal Infant Care Class**  
Two-hour class, offered Aug. 20, Sept. 17, Oct. 15; 6-8 p.m.  
Topics include diapering, bathing, cord care and special procedures. \$35.



For more events, visit [www.rwjbh.org/events](http://www.rwjbh.org/events). Note: Activity schedules are subject to change. Please call in advance if you plan to attend.



# MULTIPLE BLESSINGS



**QUINTUPLETS WERE ON THE WAY, AND THE PERINATAL AND NEONATAL TEAMS AT JERSEY CITY MEDICAL CENTER WERE READY.**

On Sunday, January 6, Abla Boutaba went into labor a day before a planned cesarean section. That event triggered an urgent call for members of the perinatal and neonatal staff at Jersey City Medical Center (JCMC).

These were no ordinary labor pains, but a precursor to the birth of quintuplets. The delivery of quintuplets would be a first for JCMC and a first for Hudson County. In fact, quintuplet births are rare anywhere. In 2017, there were only 49 sets of quintuplets

or higher-order births in the U.S.

“Quintuplets are highly likely to be premature, which means their bodies will not be fully developed. Many will need specialized care,” says Ameth Aguirre, MD, Medical Director of the Neonatal Intensive Care Unit and a specialist in perinatal (before and just after birth) and neonatal (newborn) medicine at JCMC. “That’s why one of the most important steps that any parent can make, especially with a high-risk pregnancy, is to identify the team with

the highest levels of care, who can offer anything that a baby and mother might need during and after the birth.”

The parents of the quintuplets had done their homework, visiting several facilities before deciding on JCMC. Specialists at the medical center have extensive experience in delivering premature babies and multiples, such as twins and triplets, as well as caring for them after birth in the Level III Regional Perinatal Neonatal Intensive Care Unit.



Clockwise from left: a Giraffe Incubator provides a state-of-the-art neonatal environment; the babies slumbering in the NICU soon after birth; a dedicated staff of perinatal and neonatal specialists supported the family before, during and after the birth.

## READY TO GO

Each of the five babies was assigned a team of at least 10 experts for the birth. These experts had been planning and preparing for months to give the babies the best chance for a healthy delivery.

“Over 50 staff members were relaxing at home when they received the call to come in,” says Leah Dungee, Nursing Director of Maternal Child Services at JCMC. The call wasn’t entirely surprising, since each team member, knowing that labor could start at any time, had been on call every single hour of the day since January 1.

Experts at JCMC had made sure the parents knew that the neonatal intensive care unit (NICU) was ready for anything. “Weeks before the expected delivery date, we showed them the NICU already set up with equipment labeled for each newborn, to make sure we were always ready,” Dr. Aguirre says. “We told them about our written plan for each baby to have its own full team of caregivers, just as we have for single births. We also told them how the delivery team and those in the NICU had

been rehearsing for the births.”

The team for each baby included an obstetrician, anesthesiologist, neonatologist, nursing staff, respiratory therapist, pediatric cardiologist and

more. In addition, each specialist had a backup, in case they were unavailable at the time of birth.

“Nationwide, it’s not common for a hospital to have a board-certified neonatologist on-call 24/7, as we do,” Dr. Aguirre says. “Few hospitals can assemble such a deep team of specialists day or night.”

## A HAPPY BIRTH DAY

“On the big day, all the teams reported to the hospital knowing what to do. It was exciting,” Dungee says.

As they had rehearsed, staff readied two delivery rooms. Abla and the teams for Baby A and Baby B were in place in one, and the other three teams waited in the other.

Via cesarean section, Baby A was delivered and handed off to Dr. Aguirre on Team A. The team provided the special care she needed, then shepherded the baby to the designated spot in the NICU. Team B stepped up, and Team C came in to wait their turn. And so it went for babies D and E.

Within just 30 minutes, the family had grown to include three girls, Nouha, Tala and Rouba, and two boys, Elmahdi and Elhadi.

Though they were born at 28.5 weeks (vs. full-term at 40 weeks), at weights ranging between 1.3 and 2.2 pounds, the quintuplets quickly responded to any special care they needed.

“The babies were in very good health,” Dr. Aguirre says. “It was remarkable.”

To reassure the new mom, hospital staff had also pre-arranged to have livestream video cameras on each child, so she could see her babies even while she was still in the operating room and, later, from her room in the maternity unit.

“These parents wanted what everyone wants: a healthy delivery,” Dr. Aguirre says. “That’s our sole focus, too. They are very grateful, and not one day goes by that they don’t say thanks to us.”

“It was very exciting to be part of, and I’m proud of how every single person on the team did exactly what they needed to do to ensure the health of the entire family.”

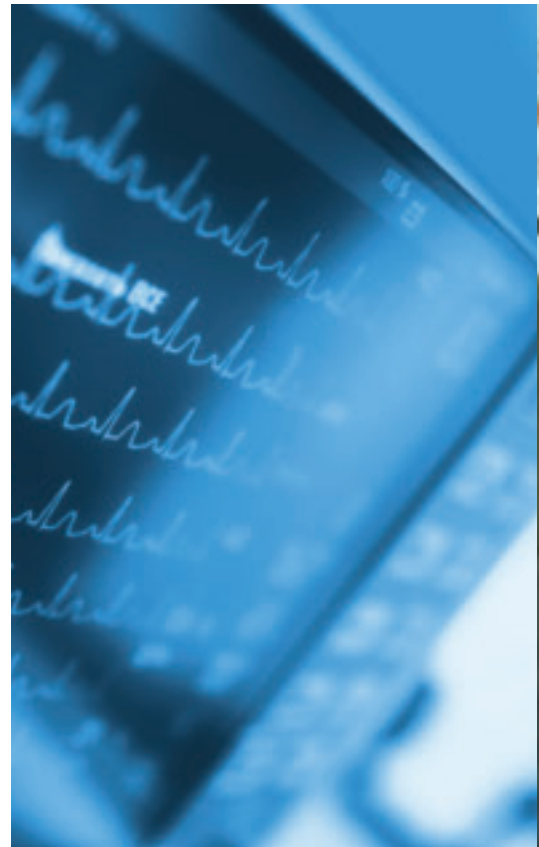


## FIRST-CLASS MATERNITY CARE

Jersey City Medical Center offers maternity specialists on site 24/7, a Level III Regional Perinatal Center and private rooms with majestic views of the Statue of Liberty and the New York skyline. Learn more and schedule a tour at [www.rwjbh.org/maternity](http://www.rwjbh.org/maternity).



AMETH AGUIRRE, MD



# SPECIALTY CARE, CLOSE TO HOME

**SUPERIOR SERVICES IN CARDIAC, CANCER AND ORTHOPEDIC CARE, AND MORE, ARE AVAILABLE AT A NEW OUTPATIENT SERVICES CENTER.**

If residents of Hudson County need a top-rated specialty service—whether for a cardiac issue, cancer or any other condition—they don't want to have to travel across the river to get it.

The good news is that they don't have to, because they can find top-quality medical specialists at Jersey City Medical Center's Outpatient Services at Colony Plaza, right across the street from the medical center itself.

"We opened this center to increase access to specialty and surgical services

in our community," says Irene Borgen, RN, Vice President, Ambulatory Care Network at Jersey City Medical Center (JCMC). "It's an additional location near the main hospital campus where patients receive the highest level of care." The newly designed space opened for business last winter.

## A BETTER EXPERIENCE

In addition to convenience, Outpatient Services offers numerous benefits for residents, Borgen explains, including:

- **FASTER ACCESS TO SPECIALISTS:**

"Many patients wait a very long time for appointments, whether because of lack of doctor availability, or because the doctor who takes their insurance has a long waiting list," she says. "Because we are hospital-based, we accept all of the insurances that Jersey City Medical Center does, including charity care and Medicaid."

- **THE HIGHEST LEVEL OF CARE:** "Jersey City Medical Center is accredited by various national and regional accrediting



bodies, meaning that it is held to the highest standards of practice,” Borgen explains. “Because Outpatient Services is hospital-based, we are held to the same high standards of safety and quality.”

• **CONNECTION TO A WIDE RANGE OF SERVICES:** “We are part of RWJBarnabas Health, one of the largest healthcare systems in New Jersey. If one of our specialists makes a diagnosis, he or she has access to any other services throughout the system, unlike a doctor in a private office,” Borgen says.

“For example, if an orthopedic specialist at Outpatient Services thinks surgery is needed, he can coordinate that care with Jersey City Medical Center’s nearby Ambulatory Surgery Center. And if a screening shows that a cardiac patient is a candidate for TAVR [transcatheter aortic valve replacement], we can assist with arranging for that procedure to be done at one of RWJBarnabas Health’s TAVR locations.”

Cancer patients benefit from the RWJBarnabas Health partnership with Rutgers Cancer Institute of New Jersey, the state’s only NCI-Designated Comprehensive Cancer Center. The relationship gives cancer patients close-to-home access to cutting-edge treatments as well as clinical trials.

### COMMUNITY NEEDS

The new Outpatient Services center is part of JCMC’s overall population health strategy, which seeks to make the highest level of care available to all Hudson County residents.

That effort has included the opening of new primary care physician offices throughout the city, as well as an ambitious health education outreach that sponsors more than a thousand events each year. Patient navigators reach out to residents to help them with matters like applying for Medicaid, getting help for chronic health conditions and more.



## TOP CARE WHERE YOU LIVE

Jersey City Medical Center’s Outpatient Services at Colony Plaza accepts the same insurances that are accepted by Jersey City Medical Center, including Medicaid and charity care.

Top-rated, specialized care is provided in the following areas:

- Abdominal Aortic Aneurysms
- Cardiology
- Cardiothoracic Surgery
- Gastrointestinal Oncology
- Gynecological Oncology
- Orthopedics
- Pain Management
- Physical Medicine and Rehabilitation
- Thoracic Oncology Surgery
- Transcatheter Aortic Valve Replacement (TAVR) Screening

Outpatient Services at Colony Plaza is located at 414 Grand Street, Suite 14, in Jersey City. Reach providers there by calling **888.724.7123**.

“Outpatient Services at Colony Plaza is another step in many steps we’ve been taking in the past few years to support the RWJBarnabas Health population health strategy,” Borgen says. “We’ve redesigned the way we deliver care to enhance use of ambulatory services, extend access to care and drive health improvement across the community. Our goal is to provide the right care in the right place at the right time.”

Jersey City Medical Center’s Outpatient Services at Colony Plaza is located at 414 Grand Street, Suite 14, in Jersey City. Reach providers there by calling **888.724.7123**.



# ‘CHANGING THE WORLD, ONE SOLE AT A TIME’

A “SNEAKERHEAD” AND ENTREPRENEUR HAS A PASSION FOR GIVING BACK TO THE JERSEY CITY COMMUNITY.

People are generous for many reasons. Suraj Kaufman, a board member at the Jersey City Medical Center Foundation, is very clear about what his reasons are.

“I grew up in very humble surroundings, in the Marion section of Jersey City,” he says. “I’m a kid from the projects who made something of himself and never forgot where I came from.”

Now a successful entrepreneur—he owns the Sneaker Room footwear and clothing store at 410 Central Ave. in Jersey City—Kaufman regularly gives to

community members in need.

Many of his donations have benefited maternal care at Jersey City Medical Center (JCMC), including special infant warmers for the Neonatal Intensive Care Unit, baby gear for women affected by HIV in the Greenville area, and a renovated waiting area in the Cristie Kerr Women’s Health Center.

“I love to work with Jersey City Medical Center because they want to be involved with what we do. It’s not just ‘write a check, cut a ribbon,’” Kaufman says. “If I say we’re hosting a block party, they say,

‘What do you need from us?’

“For one party, they sent nurses to hand out pamphlets and teach kids how to properly wash their hands. I learned something that day, too!”

At that event, Kaufman met a JCMC Emergency Department nurse. That encounter ultimately led to a brainstorm about providing shoes for the homeless. (See story, opposite page.)

Similarly, it was on a visit to Henry Snyder High School in the Greenville section of Jersey City that Kaufman hit upon a way to help vulnerable teens.



The Tiger's Den at Snyder High School now has a bright, invigorating wall mural (opposite page) as well as additional TVs and gaming systems (above right). At left, top and bottom, entrepreneur and Jersey City Medical Center Foundation board member Suraj Kaufman energizes the crowd at the ArtMax show he hosted in March to raise funds for the Tiger's Den renovation.

### A CHEERFUL CHANGE

The Tiger's Den at Snyder High School provides free, confidential social services to students and their families in one of the most economically challenged areas of the city. Services include academic and vocational counseling, lunch and after-school recreation and more. The program is provided through a partnership between JCMC, the New Jersey Department of Children and Families, and the Jersey City Board of Education.

Kaufman visited the Tiger's Den with Katy Cruz, Corporate and Donor Events Manager for the JCMC Foundation. "She said, 'Let me show you a program I think you'll be interested in,'" Kaufman recalls. They went to the high school to see the Tiger's Den, which has offices and a small room with computers, a TV and a table and chairs where students can go to have lunch.

"I loved the program, but I didn't like the looks of the space," Kaufman recalls. "I thought, if they want to get kids to focus, and to show them there are people willing to help, this room is not doing it."

After pondering the possibilities for

funding a renovation, Kaufman hit on the idea of ArtMax, an art show featuring works inspired by the Nike Air Max shoe, which took place on March 23. "You could buy a piece of art if you wanted, but at a ticket price of \$20, anyone in the community could come in to support the program," Kaufman says.

The event led to a \$20,000 donation to renovate the Tiger's Den space, including new flooring, new paint on the walls, new furniture and additional TVs and gaming systems. The work, a surprise for Tiger's Den students, was completed over spring break, with a big reveal when students returned.

"Suraj wants to really touch people and be there for people," Cruz says. "He's not focusing on having a room or a building named after him. He looks for areas where he can have the biggest impact, and give back directly."

"I always tell people I'm trying to change the world, one sole at a time," Kaufman says. "I want people to know that whether you have a million dollars to give, a hundred dollars or one dollar, everything helps."



### A MILE IN THEIR SHOES

A lot of people in Suraj Kaufman's world are "sneakerheads," meaning they have a lot of sneakers—more than they can ever wear. (Kaufman himself has more than 1,000 pairs.)

The Emergency Department (ED) at Jersey City Medical Center, meanwhile, sees its fair share of patients who don't have appropriate shoes, having lost them as a result of an accident, or due to homelessness, or for some other reason.

Solution: the Sneaker Room Closet, a custom cabinet outside the ED. Kaufman will be donating gently used pairs of sneakers, and encouraging fellow sneakerheads to do the same by collecting the sneakers at his store and promoting the idea on social media. The sneakers will be distributed by ED nurses at their discretion.

"When you meet and talk to a homeless person, so often you realize their greatest need is for basics—socks, underwear, toothpaste and toothbrushes," Kaufman says. "And very often, they need a pair of shoes that can protect their feet from dirt and infection. These lightly worn shoes can mean the world."

To learn more about giving opportunities at Jersey City Medical Center, visit [www.rwjbh.org/giving](http://www.rwjbh.org/giving).

# Jersey City Medical Center: Best in the U.S. for the 14<sup>th</sup> time



Achieving a Leapfrog A for the 14<sup>th</sup> time underscores Jersey City Medical Center's commitment as a High Reliability Organization (HRO).

Through the concerted effort of Jersey City Medical Center's physicians, nurses, staff, volunteers and leadership, patients and families benefit from the highest level of quality care and the safest possible hospital experience.