

A Publication of
**ROBERT WOOD JOHNSON
UNIVERSITY HOSPITAL HAMILTON**

WINTER 2020

healthy *together*

**BACK IN
ACTION
AFTER HIP
REPLACEMENT**

**OUR GUIDE TO
WINTER
WORKOUTS**

**PREVENTING
CERVICAL
CANCER**

**CRITICAL CARE
WHEN EVERY MOMENT COUNTS**

SAVING LIVES IS OUR LIFE'S WORK

At RWJBarnabas Health, we take the trust people place in us to heart. It's the bedrock of our commitment to your care, from preventive services to life-saving emergency treatment.

For urgent situations, we have two world-class trauma centers, one in Jersey City and one in New Brunswick, as well as the only burn center in the state, located in Livingston. In addition, we have expanded our emergency response capabilities and have acquired an advanced emergency helicopter, call sign Life Flight, equipped and staffed to provide critical care while transporting badly injured patients.

To help people stay healthy and safe, we reach out with education and prevention programs for people of all ages. We've also invested in creating the new secure and convenient RWJBarnabas Health Connect app, available at your app store. Health Connect lets you access your records, store your insurance information, search for doctors, and make real-time appointments that are automatically added to your phone calendar.

Health Connect, along with the RWJBarnabas Health TeleMed app, which offers online access for a physician visit, are integral parts of efforts to create a truly tech-forward healthcare organization. These efforts led to all RWJBarnabas Health hospitals earning the "Most Wired" designation from the College of Healthcare Information Management Executives this year.

Robert Wood Johnson University Hospital (RWJUH) Hamilton offers the best in healthcare technology close to home. World-class technology detects and fights cancer and robotic-assisted, minimally invasive surgeries promote faster healing. The latest in diagnostic balance and hearing equipment for children and adults is found on the RWJUH Hamilton campus. These are just a few examples of the technology that complements the expertise of our clinicians, who provide outstanding healthcare—right here in Hamilton.

Whether you face an emergency or have an everyday health question, we're committed to providing convenient access to the highest-quality care—whenever and wherever you need it.

Yours in good health,



BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH




RICHARD FREEMAN
PRESIDENT AND CHIEF EXECUTIVE OFFICER
ROBERT WOOD JOHNSON
UNIVERSITY HOSPITAL HAMILTON



HEALTH NEWS



A NEW PRIMARY CARE PRACTICE

The newest Robert Wood Johnson University Hospital (RWJUH) Hamilton primary care practice opened at 17

Main Street in Robbinsville in December 2019. "We're here to look at the big picture when it comes to your health," says Shankar Santhanam, MD, who will be based in the new office. To make an appointment, call 609.392.6366.



AN A FOR PATIENT SAFETY

RWJUH Hamilton earned its eighth Safety Grade A and was named as one of America's Top General Hospitals for the second time by The Leapfrog Group. Hospitals with A

ratings indicate the commitment of staff at every level to protect patients from preventable medical harm and error.


HELP KICKING THE HABIT

New research shows that cigarette smoking is linked to an increased risk of developing type 2 diabetes. RWJBarnabas Health's Institute for Prevention and Recovery's Nicotine and Tobacco Recovery Program can help smokers beat nicotine addiction. For more information, call 833.795.QUIT or visit www.rwjbh.org/nicotinerecovery.

Robert Wood Johnson University Hospital Hamilton | **RWJBarnabas HEALTH**

1 Hamilton Health Pl., Hamilton Township, NJ 08690
609.586.7900

CONNECT WITH US ON

-  @RWJHamilton
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Robert Wood Johnson University Hospital Hamilton complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. For more information, see link on our home page at www.rwjbh.org/hamilton. RWJUH Hamilton cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al 609.586.7900. RWJUH Hamilton konfòm ak lwa sou dwa sivil Federal ki aplikab yo e li pa fè diskriminasyon sou baz ras, koulè, peyi orijin, laj, enfimite oswa sèks. ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis ed pou lang ki disponib gratis pou ou. Rele 609.586.7900.

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WINTER 2020



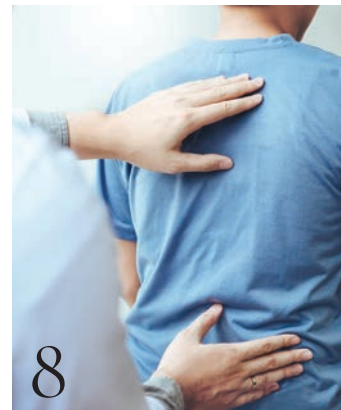
17



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- 2. WELCOME LETTER.**
A community update from our CEOs.
- 4. COMMUNITY CALENDAR.** A roundup of health education and support programs.
- 8. BATTLING BACK PAIN.** A spine surgeon explains when to seek treatment.
- 9. HOW TO SAVE A LIFE.** Is it a heart attack or cardiac arrest—and what can a bystander do?

- 10. TRAUMA WITHOUT DRAMA.** Top RWJBarnabas Health trauma and burn centers stand ready to save severely injured patients.
- 12. MAKING MATERNITY SAFER.** A strong focus on women's health before, during and after pregnancy aims to save lives.


- 13. LEARNING TO CRAWL AGAIN.** A baby rebounds from a traumatic brain injury.
- 14. A STRANGER'S GIFT.** A blood stem cell donation—and a powerful medical partnership—saved the life of a Toms River woman.
- 16. YOU CAN BEAT THE WINTER BLUES.** Seasonal depression is a struggle, but help is available.
- 17. COMPASSIONATE CANCER CARE.** The 2019 "We vs. C" event raised critical funds for the Holistic Program.

- 18. THE SECOND TIME AROUND.** Thanks to hip replacement surgery, a fit grandmother is back to her active lifestyle.
- 20. OUR GUIDE TO WINTER WORKOUTS.** Simple ways to stay fit when the weather is frightful.
- 22. A PREVENTABLE CANCER.** Vaccination and regular screening provide the best protection from cervical cancer.
- 24. COMMUNITY CALENDAR.** Health screenings close to home.



Community Education

All events are held at RWJ Fitness & Wellness, 3100 Quakerbridge Road. They are **FREE** unless otherwise noted. Registration is strongly encouraged to ensure a successful program. Call 609.584.5900 to register.

 denotes a holistic event.

BEDSIDE HARP®

Classes ongoing. For start dates, fees or to register, call 609.273.0068 or visit www.bedsideharp.com.

• Instructional Folk Harp

Includes music and textbooks, ear training and more than 85 songs. All ability levels. Five- or 10-week semesters are available. For group sessions, join the Harp Circle. Build confidence to participate in performances. Call for class fees.

First Saturday Walks Walking in Nature: A Prescription for Better Health

Come discover the Abbott Marshlands with a knowledgeable guide. Each First Saturday Walk will explore a different part of this rich and diverse natural area. Guides and locations will vary so that all marshland trails will be explored. For meeting times, locations, trails and cancellation information, visit www.abbottmarshlands.org.

Nicotine and Tobacco Dependence Treatment Program

**Mon. and Wed., 1 to 5 p.m.,
and Fri., 11 a.m. to 3 p.m.**

One-on-one and walk-in hours for individual or group counseling. Prescriptions for smoking cessation medication (such as gum and patches) are available upon request. To preregister or for information, contact Michael Kosloski, BA, CTTS, Certified Tobacco Treatment Specialist, at 732.837.9416 or email quitcenter@rwjbh.org.

Ask the Nurse Practitioner About Lung Health

**Mon., February 10, March 9
and April 13; 10 to 11 a.m.**

Do you have concerns about lung cancer, COPD or other

lung disease risk factors and symptoms? Our nurse practitioner can help determine your risk for lung disease. Lung cancer screen available to current or former smokers only. Vivian Owusu-Mensah, MSN, RN, ANP-BC, OCN

KidsFit Program for Weight-Challenged Youth and Teens ages 8 to 14 and a Parent/Caregiver

This nine-week, all-inclusive wellness program teaches children, teens and their families how to live a healthier lifestyle. The focus is on nutrition and healthy eating, physical activity, behavior changes and self-esteem. Call 609.890.4441 for registration information.

Pathwork: First Friday Lecture Study Fri., February 7, March 6, April 3; 7 to 9 p.m.

Pathwork, a body of practical spiritual wisdom, presents a step-by-step journey of self-discovery. This year's topic: Relationship to Self, Others and Spirit. Amy Rhett, Certified Pathwork Helper

Kids in the Kitchen

Hands-on cooking class directed by a dietitian. For children ages 6 and older with a parent/caregiver. Fees: \$5 per child and \$5 per parent/caregiver. Register early; class size is limited.

- **Thu., February 13; 6:30 to 8 p.m.**
Sweetheart Snacks: Valentine treats with a healthy twist
- **Thu., March 5; 6:30 to 8 p.m.**
Good-for-You but Tasty Too!
Fresh ideas for picky eaters
- **Thu., April 2; 6:30 to 8 p.m.**
Egg-cellent Eggs! Protein-packed egg dishes kids will love

Ask the Diabetes Educator Fri., February 14, March 13 and April 17; 10 a.m. to Noon

Bring your questions about

prediabetes, type 1 diabetes and type 2 diabetes. Marguerite Billie O'Donnell, BSN, RN, CDE. Appointment and registration required.

Understanding Alzheimer's Disease and Dementia Tue., February 18; 1:30 to 3 p.m.

Learn about the relationship between Alzheimer's disease and dementia. Discover risk factors, stages of the disease, current treatment, the newest research and available resources through the Alzheimer's Association. Registration required.

Private Reiki Sessions

Tue., February 18, March 17, April 21; 2 to 5 p.m.; by appointment
Wed., March 11, April 8; 5 to 8 p.m.; by appointment
Reiki is a noninvasive hands-on healing modality, which can bring calm, relaxation and healing to the body and mind. Fees: \$40 for ½ hour; \$80 for 1 hour; by appointment Patti McDougall, BSN, RN, Integrative Therapies Nurse, Reiki Master

Weight Loss: Medical and Surgical Options

**Tue., February 18, March 17,
April 21; 6 to 7 p.m.**
Explore the options for shedding unhealthy weight. The new

Center for Weight Loss provides medically supervised weight loss and bariatric surgery. Bring your questions for our bariatric coordinator and physician.

Ask the Sleep Doctor! Tue., February 18; 6 to 8 p.m.

Over time, sleep problems can hurt your heart health. Sleep apnea affects the amount of oxygen your body gets and increases the risk for many health problems, including high blood pressure, heart attack and stroke. Informal lecture/Q&A with Navatha Kurugundla, MD. Registration required.

Ask the Dietitian Wed., February 19 and Fri., March 27; 9 to 11 a.m. Tue., April 21; 1 to 3 p.m.

Do you have a question about diet and nutrition? Join Michelle Summerson, MEd, RD for a one-on-one Q&A and receive a body fat screening. Registration required.

Mindfulness Meditation Wed., February 19, March 18, April 15; 1 to 2 p.m.

Learn to find calm. Meditation has been shown to help with anxiety, depression, insomnia and stress. No experience necessary. Patti McDougall, BSN, RN, Integrative Therapies Nurse

ADVANCES IN PAIN MANAGEMENT

Tue., February 4; 6 to 8 p.m.

Learn about the latest treatments available to minimize and/or eliminate chronic pain and the role nutrition, exercise and stress management play in controlling symptoms. Prajakta Avhad, MD, board-certified in pain management and anesthesiology. Registration required.

WOMEN AND HEART DISEASE

Tue., February 11; 6 to 8 p.m.

Cardiovascular disease is the No. 1 killer of women. Forty-four million women in the U.S. are living with it. Diagnostic testing, risk factors, signs, symptoms and treatment options are discussed. Oleg Chebotarev, MD. Registration required.

HealthRhythms® Drumming Circle
Wed., February 19, March 18, April 15; 7 to 8 p.m.
 Come drum with us! HealthRhythms® is an evidence-based program that strengthens the immune system and reduces stress. It's also great fun! Drums will be provided. Fee: \$15. Mauri Tyler, CTRS, CMP

How to Transform Overwhelm
Thu., February 20; 6 to 7:15 p.m.
 Life Success Coach Natasha Sherman teaches tools for managing and transforming overwhelm.

Hate the Weight-Loss Cycle? Love Yourself and Lose!
Mon., February 24; 6 to 7 p.m.
 It takes self-love to tackle something as tough as weight loss. Join Barb Ulrich for motivational tips and weight-loss advice and start your journey toward self-love, discovery and weight loss.

Are You Stressed?
Tue., February 25; 1:30 to 4:30 p.m.
 Take a simple test to determine your stress level. Information and coping strategies will be personalized for you. Shirley Roberts, MA, LPC. Appointment and registration required.

How Can You Benefit from an Interventional Radiologist?
Tue., February 25; 6 to 8 p.m.
 Interventional radiologists (IRs) are doctors who are trained in radiology and interventional therapy. No other specialty possesses this unique combination of skills! Learn about the conditions that can be treated by IRs. David Feldstein, MD, and Gurvan Blackman, MD. Registration required.

Reiki Share
Wed., February 26, March 25, April 22; 7 to 9 p.m.
 Certified Reiki practitioners (at any level) can share the gift of Reiki with other practitioners. Bring a pillow and small sheet. \$5

Discover Your Character Strengths
Thu., February 27; 6:30 to 8:30 p.m.
 Each of us is a unique combination of 24 character strengths. If we focus on building on our strengths, we can have a lasting effect on our happiness and well-being. What are your top strengths and how can you use them to be the best version of yourself? Kathi Szabo, thought leader, yoga instructor

Reiki 1 Certification
Sat., March 7; 10 a.m. to 4:30 p.m.
 Reiki means "spiritual energy" or "transcendent life force." It's a noninvasive, gentle touch that accelerates the body's natural healing processes, supports mental and emotional healing, and provides an overall sense of well-being. Learn this powerful technique, which can be used on yourself, friends and pets. You will learn about the history of the practice and proper hand placement, and you'll have lots of time for practice. Patti McDougall, BSN, RN, Integrative Therapies Nurse and Reiki Master
 Fee: \$170. Must register. Nurses will earn 6 CEUs.*

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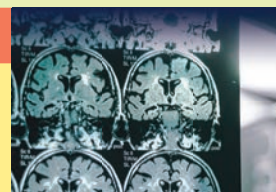
Culinary Nutrition

Adult nutrition education led by a registered dietitian. Includes tastings and take-home recipes. \$10 per participant. Space is limited. Register at least 48 hours prior to event. Alyssa Luning, RD, CSOWM. Caution: This is not an allergy-safe environment. However, most recipes can be adjusted for allergies, restrictions and/or intolerances if the instructor is notified prior to the program.

- **Wed., February 12; 10:30 a.m. to Noon and 6:30 to 8 p.m. Let's Get Spicy:** Spices like cinnamon, cumin and turmeric have been shown to support a healthy cardiovascular system. Learn how to incorporate them into nutrient-packed side dishes, sauces—and even desserts.
- **Wed., February 26; 10:30 a.m. to Noon and 6:30 to 8 p.m. Fat Tuesday Goes Lean for Lent:** A low-fat diet can support lifestyle changes for heart health. Learn how to make a few Mardi Gras favorites: jambalaya, red beans and rice, and bananas Foster.
- **Wed., March 11; 10:30 a.m. to Noon and 6:30 to 8 p.m. Eat Right Bite by Bite:** March is National Nutrition month! This year's message: Eat Right, Bite by Bite. Using hors d'oeuvres, canapés and amuse bouche, learn about flavor profiles and how mindful eating promotes wellness.
- **Wed., March 25; 10:30 a.m. to Noon and 6:30 to 8 p.m. Semi-Homemade Meals and Navigating the New Food Label:** Explore strategies for simple weeknight meals full of flavor, without the fuss. Leave knowing the recent changes made to the food label and what to look for when choosing products.
- **Wed., April 8; 10:30 a.m. to Noon and 6:30 to 8 p.m. Blue Zones:** The Lessons We Can Learn from the Healthiest People in the World: It's (the day after) World Health Day. Blue Zones are areas where people live the longest, with the lowest incidence of disease. Learn about and sample some of their culinary staples.
- **Tue., April 21; 10:30 a.m. to Noon and 6:30 to 8 p.m. Sustainability in the Kitchen:** How we shop, cook and eat affect the environment. Learn how to be kind to our planet from farm to plate with recipes celebrating spring.

SPRING 2020

Mini Medical School: CALLING ALL BRAINS!



Tue., March 3, 10, 17, 24; 6 to 8 p.m.
 Enjoy a four-week course taught by RWJBarnabas Health physicians as they share their knowledge of the most complicated organ of the human body—the brain. Receive a certificate at a graduation ceremony upon completion. Fee: \$40 for adults and \$20 for high school students. Registration required.

WEEK 1: MARCH 3

- **Opening Address and Welcome**
 F. Javier Villota, MD; Internal Medicine
 Medical Director of the Mini Medical School

- **What's Inside That Brain of Yours?**
 Kenneth M. Lieberman, MD, FACS, FAANS;
 Neurosurgery

WEEK 2: MARCH 10

- **Brain Conditions and Procedures**
 Erol Veznedaroglu, MD, FACS, FAANS,
 FAHA; Neurosurgery

WEEK 3: MARCH 17

- **Concussion: The Overlooked Brain Injury**
 Adam Redlich, MD; Sports Medicine
 Specialist

- **Post-Concussion Rehab**

James Schorsch, DPT, Cert. CCTT

WEEK 4: MARCH 24

- **Good News—We Can Change the Brain!**
 Lorraine Sgarlato, AuD

🌀 Mindfulness Meditation for the Absolute Beginner
Tue., March 10; 6 to 7:15 p.m.
 Curious about meditation but don't know where to start? Learn what meditation can do for your busy mind and frazzled body. Patti McDougall, BSN, RN, Integrative Therapies Nurse

Orthopedics Open House: Joint Replacement
Thu., March 12; 6 to 8 p.m.
 Discover the latest advances in knee and hip replacement surgery, including robotic-assisted surgery, and learn how the Center for Orthopedic & Spine Health and our rehabilitation team prepares you for a successful joint replacement. Dinner included. John Nolan, MD, fellowship-trained orthopedic surgeon. Registration required.

Preventing Drug Use in Youth
Thu., March 19; 6:30 to 8 p.m.
 Preventing drug abuse in the early years is crucial for reducing health risks. Learn more about the steps families can take to prevent substance use in youth. Registration required.

🌀 How to Break Up With Your Cell Phone and Why You Might Want To
Thu., March 19; 6:30 to 8 p.m.
 Learn how phones and apps are designed to be addictive—and how phones can damage our ability to focus, concentrate and form new memories. Learn practical tools to unplug yourself. Patti McDougall, BSN, RN, Integrative Therapies Nurse

🌀 Letting Go of Fear
Tue., March 24; 6:30 to 8:30 p.m.
 Are you living the life of your dreams, or are you scared you're not good enough or smart enough? Join Kathi Szabo, thought leader and yoga instructor, who will help you tackle the "Fear Monster." \$15

Ask the Diabetes Team
Thu., March 26; 10 to 11:30 a.m.
 Do you have questions about the lifestyle changes required to achieve better control of

your diabetes or prediabetes? Bring your questions to our diabetes educator, registered dietitian and health coach. Registration required.

The Impact of Allergies on Sleep
Tue., April 7; 6 to 8 p.m.
 Allergies can disrupt sleep and cause problems such as snoring or sleep apnea. Common therapies will be discussed. Anthony J. Ricketti, MD, board-certified, fellowship-trained allergist, and Peter Ricketti, DO. Registration required.



Seniors

Look for programs like these and other new offerings with the new Better Health program for members age 50 or better!

State Health Insurance Assistance Program (SHIP)
 Trained counselors provide free, objective and confidential help with questions and issues related to Medicare. Call 609.695.6274, ext. 215, for an appointment.

50+ Bridge Club
Mon. and Fri., Noon to 3 p.m.
 Join us if you have basic knowledge of the game and point system.

50+ Charity Knitting Club
Wed., 10 a.m. to Noon
 Knitters make items for hospital patients. Experienced knitters at all levels are welcome. For more information, call 609.298.7040.

The AARP Driving Course
Mon., February 3, March 2 and April 6; 9 a.m. to 3 p.m.
 Be a safer, better driver. Most insurance companies will lower your premium with a completion certificate. Bring

🌀 Jin Shin Jyutsu, a Physio-Philosophy
Tue., April 7; 6:30 to 8 p.m.
 Jin Shin Jyutsu (pronounced "jitsu") is gentle acupressure that's used to help restore health. You'll learn how to use gentle touch for self-healing. Kerry Kay, Jin Shin Jyutsu practitioner.

Gynecologic Cancer Roundtable Discussion
Tue., April 14; 6 to 8 p.m.
 Bring your questions and concerns for our gynecologic physician. Topics include cancer prevention and diagnostic testing. Ruth Stephenson, DO, gynecologic oncologist at RWJUH Hamilton and Rutgers Cancer



your NJ or PA driver's license. Fee: \$20; \$15 for AARP members. Cash or check only.

AARP Income Tax Preparation
Wed., February 5 through April 15; 9 a.m. to 1 p.m.
 AARP volunteers will prepare and e-file your federal and state income returns. Bring all necessary paperwork. Appointments mandatory.

Grief & Loss Group for Older Adults
Thu., February 6 and 20; March 5 and 19; April 2 and 16; 1:30 to 2:30 p.m.
 If you've lost a loved one or have been separated from your support system, you can find comfort and begin to cope better by interacting with others.

Letting Go of Clutter
Tue., February 11, March 10, April 14; 1:30 to 3 p.m.
 This support group explores how our emotional ties to our "stuff" can create clutter and affect our mood.

Discovering the Gold in the Golden Years
Tue., 1:30 to 2:30 p.m.
 An upbeat, safe place for

Institute of New Jersey, the state's only NCI-Designated Comprehensive Cancer Center. Registration required.

Take Control of Your Health: Diabetes Self-Management
Wed., April 15, 22, 29 and May 6, 13, 20; 1 to 3:30 p.m.
 Designed by Stanford University, this six-week program empowers people who have diabetes with the skills and support needed in the day-to-day management of this chronic condition. Topics include menu planning, preventing complications and more. Registration required.

Support groups accept walk-ins. All programs are FREE unless otherwise noted.

older adults to express concerns and talk openly about stressors in a discussion group format.
 • **February 18:** Heart Health
 • **March 17:** Senior Scams
 • **April 21:** Serving Up Good Nutrition

The Wise Woman: Positive Aging
Thu., 1:30 to 3 p.m.
 As we age, the twists and turns of life challenge us to remain positive, stay engaged in life and find new meaning. Discussion group format.
 • **February 27:** The Heart of a Woman
 • **March 26:** Generosity—Giving and Receiving
 • **April 23:** Vulnerability

Healthy Outlooks for Older Adults
Tue., March 24; 1:30 to 2:30 p.m.
 Learn about the safety, risks and misuse of prescription pain medications, as well as healthier alternatives to pain management through various complementary therapies. Barbara Sprechman, CPS, Prevention Coalition of Mercer County. Registration required.

MEDICAL ADVISORY PANEL MEMBERS

The following physicians and experts provide guidance and expertise in developing our community health education programs.

Richard Freeman, CEO

Seth Rosenbaum, MD, CMO/Infectious Disease

F. Javier Villota, MD, Chair, Internal & Occupational Medicine

Diane Grillo, MBA, VP Population Health

Maqsood Amjad, MD Hematology/Oncology

Prajakta Avhad, MD, Pain Management

Leslie Adelman Banks, Fitness & Wellness Center/Managing Partner

Hari Bezwada, MD, Orthopedic Surgery

Anjali Bhandarkar, MD, Internal Medicine

Gurvan Blackman, MD, Interventional Radiology

Sean Bradley, DMD, Oral & Maxillofacial Surgery

Oleg Chebotarev, MD, Cardiology

Paul Codjoe, MD, Orthopedics

George DiFerdinando, Jr., MD, MPH, Public Health

Michael Duch, MD, Orthopedics

David Eingorn, MD, Orthopedics

Firas Eladounikdachi, MD, Breast Surgery

David Feldstein, MD, Interventional Radiology

Jarad Fingerma, DO, Urology

Elie Goldenberg, MD, General & Bariatric Surgery

Dorota Gribbin, MD, Physical Medicine & Rehab/Pain Mgmt.

Joshua Hornstein, MD, Orthopedics

Navatha Kurugundla, MD, Pulmonology/Sleep Medicine

Kevin Law, MD, Critical Care/Sleep Medicine

Marc Levine, MD, Orthopedic Spine Surgery

Ken Liebman, MD, Neurosurgery

Matthew Lynch, MD, Plastic & Reconstructive Surgery

Biagio Manna, DO, Thoracic Vascular Surgery

Shivaprasad Marulendra, MD, Gastroenterology

Ronniel Nazarian, MD, Orthopedic Surgery

John Nolan, MD, Orthopedics

Earl Noyan, MD, Bariatric Surgery

Marguerite O'Donnell, BSN, RN, Educator, Community Education

Rao S. Pasupuleti, MD, Neurology

Val Prokurat, DO, Bariatric Surgery

Pam Randolph, PT, DPT, Director, Rehabilitation Services

Adam Redlich MD, Sports Medicine

Donna Reger, MD, Internal & Occupational Medicine

Anthony Ricketti, MD, Allergy & Pulmonology

Arjun Saxena, MD, Orthopedics

Reza Shah, DO, General/Vascular Surgery

Robert Silverbrook, DO, Internal Medicine

Lauren Stabinsky, MSN, RN, Dir., Community and Corporate Wellness

Kim Zambito, MD, Hand Surgery

Common Spinal Conditions Tue., April 21; 6 to 8 p.m.

Spinal stenosis and disc herniations are common spinal conditions. Symptoms and treatments will be discussed. Rony Nazarian, MD, fellowship-trained in orthopedics and neurosurgery, and an RWJUH Hamilton physical therapist. Registration required.

**Speaker has declared that he/she has nothing to disclose. Robert Wood Johnson University Hospital (RWJUH) Hamilton is an approved provider of continuing nursing education by the New Jersey State Nurses Association (NJSNA), an accredited approver by the American Nurses Credentialing Center's (ANCC) Commission on Accreditation. Provider Number P190-10/15-19. Provider approval is valid through October 2021. Accredited status does not imply endorsement by NJSNA, RWJUH Hamilton or ANCC of any commercial products or services.*

Navigating Transitions in Care: Elder Law Planning in NJ vs. PA Thu., April 23; 6 to 8 p.m.

Elder Law Attorney Scott Bloom, Esq., will discuss the benefits and drawbacks of transition planning in NJ and PA. Light refreshments will be served. Registration required.

Using Crystals for Emotional Healing Thu., April 23; 6:30 to 8 p.m.

Crystals generate energy to help balance our bodies' electromagnetic fields for emotional healing and well-being. Donna Sweeney, Integrated Energy Therapy practitioner/Reiki Master. \$15

How to Create Happiness Thu., April 30; 6 to 7:15 p.m.

Life Success Coach Natasha Sherman shares tips for improving your happiness and life satisfaction.

Support Groups & Caregiving

Unless otherwise noted, support groups and caregiving classes are held at the RWJ Fitness & Wellness Center, 3100 Quakerbridge Road. All programs are FREE unless otherwise noted.

Nicotine and Tobacco Dependence Treatment Program Group Session Counseling

Every Thu., 5 to 6 p.m. or 6 to 7 p.m.

Group counseling. Prescriptions for smoking cessation medication (gum, patches, etc.) are available upon request. To pre-register or for more information, contact Michael Kosloski, BA, CTTS, Certified Tobacco Treatment Specialist, 732.837.9416 or email quitcenter@rwjhb.org.

Breast Cancer Meets first Tue., 6:30 p.m.

609.584.2836 Meets at the Rutgers Cancer Institute of NJ (CINJ); 2575 Klockner Road, Hamilton.

Bereavement

Call 609.631.6980 for registration and location.

Peripheral Neuropathy

Call 609.587.7215 for registration and location.

Nicotine Anonymous Fri., 7 p.m.

Outpatient Auditorium, RWJUH Hamilton Hospital; 1 Hamilton Health Place. Call 609.584.0122 for information. No registration required.

Caregiver Series: Caring for Loved Ones with Chronic Conditions

Mon., 10:30 to 11:30 a.m.

- **February 3:** First Steps for Caregivers
- **February 10:** Creating a Safe Home Environment
- **March 2:** Exploring Types of Dementia
- **March 16:** Coping with Memory Loss
- **April 6:** Normal Aging or Dementia
- **April 20:** Seven Stages of Dementia

Caring for a chronically ill senior can take a physical and emotional toll on family members. An Oaks Integrated Care Senior Well-Being Specialist.

Adult Children Caring for Parents

Mon., 5:30 to 7 p.m.

- **February 3:** Normal Aging or Dementia
 - **February 10:** Aging in Place
 - **March 2:** Seven Stages of Dementia
 - **March 9:** Coping with Memory Loss
 - **April 6:** Creating a Safe Home Environment
 - **April 13:** First Steps for Caregivers
- An Oaks Integrated Care caregiver specialist will



conduct these interactive workshops on crucial topics and facilitate a supportive group experience.

Caregiver Support Group Wed., February 5, March 4, April 1; 5:30 to 6:30 p.m.

Supportive discussion group for those caring for a loved one who is aging or has a chronic illness. Shared experiences can be healing. Oaks Integrated Care.

Stroke Survivors Support Group

Wed., February 5, March 4 and April 1; 6 to 7:30 p.m. Call 609.584.5900 to register

Diabetes Support Group Fri., February 7, March 6 and April 3; 1:30 to 3 p.m.

609.587.5900

Bariatric Weight Loss Support Group

Tue., February 11, March 10, and April 14; 6 to 7 p.m. Call 609.584.5900 to register

Alzheimer's Support Wed., February 19, March 18 and April 15; 6 p.m.

Oaks Integrated Care, 609.396.6788, ext. 89713



RONY NAZARIAN, MD

BATTLING BACK PAIN

A SPINE SURGEON EXPLAINS THE MOST COMMON PROBLEMS—AND WHEN TO SEEK TREATMENT.

Back pain is one of the top reasons people see a physician; about 80 percent of adults experience it at some point, according to the National Institute of Neurological Disorders and Stroke. Yet the causes tend to vary greatly. “You might hear that your neighbor has the same problem, but I rarely see two people with identical spinal issues,” says Rony Nazarian, MD, a spine surgeon at Robert Wood Johnson University Hospital (RWJUH) Hamilton and a member of the RWJUH Hamilton Medical Advisory Panel. Here, Dr. Nazarian explains common back problems and treatments.

What back problems do you treat most often?

I see many patients with disk herniations, in which the jelly-like substance that cushions spinal disks leaks, irritating spinal nerves. I also treat spinal stenosis, which tends to affect adults over 50. With this condition, the spinal canal narrows, putting pressure on spinal nerves and the spinal cord. The symptoms of these conditions are similar: pain that radiates to the legs or arms and is often associated with numbness and tingling or muscle weakness.

When is nonoperative treatment, such as physical therapy, appropriate?

Most of the time, patients can benefit from physical therapy (PT). There are only a few instances in which PT is not appropriate: if you have cauda equina syndrome, in which significant pressure on spinal nerves leads to a loss of sensation in the groin and a loss of bowel and bladder control. This is considered a surgical emergency. Another time PT isn't the right move: if you have cervical myelopathy, or severe compression of the spinal cord in the neck. Symptoms include a loss of bowel and bladder control; the inability to coordinate the hands; and difficulty walking. Also, patients who have tumors or traumatic injuries often aren't candidates for PT.

When should a patient consider surgery?

Patients might consider surgery if they've undergone an appropriate course of conservative care, such as PT, anti-

inflammatory medications and epidural injections, and their quality of life is still suffering. The purpose of surgery is to improve quality of life and function.

What are the advantages of minimally invasive spine surgery?

With minimally invasive surgery, we leave behind a smaller “footprint,” meaning we cut less muscle and disrupt less tissue. This leads to less surgical blood loss and a quicker procedure, as well as less postsurgical pain and a faster recovery. Many of these operations can be done on an outpatient basis, which allows you to recover in the comfort of your own home.

If you have back pain, when should you see a physician?

If you develop back pain and don't have any neurological symptoms (such as numbness and tingling or weakness), the best way to cope is to take anti-inflammatory medications (if your doctor recommends this), stretch and stay active. If the pain persists beyond two to four weeks and your symptoms progress, causing you to miss work or interfering with your daily activities, then consider seeing a physician. Similarly, if you develop symptoms such as pain, numbness, tingling or weakness in the extremities, consider seeking medical attention sooner.



Freedom from back pain starts here. Call **888.724.7123** or visit www.rwjbh.org/ortho to learn more and schedule an appointment.



HOW TO SAVE A LIFE

IS IT A HEART ATTACK OR CARDIAC ARREST—AND WHAT SHOULD A BYSTANDER DO?

“Heart attack” and “cardiac arrest” may sound like similar conditions, but they’re not the same—and one is potentially much more life-threatening. “With a heart attack, an artery is clogged, and the majority of patients have 100 percent closure of an artery,” explains Jay H. Stone, MD, Director of the Cardiac Catheterization and Interventional Lab at Community Medical Center in Toms River and a member of the RWJBarnabas Health medical group. “In a cardiac arrest, the heart stops completely and no blood at all is circulating.” Death can be instantaneous.

The two things that determine survival, Dr. Stone explains, are the underlying pathology and the flow of blood to the brain. “If someone passes out in front of you, take action immediately,” he urges. “The patient can’t afford to lose the time that it may take for professional medical help to arrive.” Quick action can double or even triple a cardiac arrest victim’s chance for survival.



JAY H. STONE, MD

HEART ATTACK

WHAT IT IS

A circulation problem. Blood flow stops because of a blockage in an artery. The part of the heart muscle that is deprived of oxygen-rich blood begins to die.

SYMPTOMS

These may begin hours, days or weeks in advance.

- Chest pain or feeling of pressure in the chest, possibly spreading to arms, neck, jaw, back or stomach.
- Feeling sick, sweaty or short of breath.
- The person having a heart attack will usually remain conscious.

WHAT TO DO

If you are having these symptoms, don’t hesitate to contact your doctor or call 911. If someone you are with appears to be having a heart attack, call 911 immediately. Sit the person down and keep them calm while you wait for help.

CARDIAC ARREST (CA)

WHAT IT IS

Usually, an electrical problem that causes the heart to stop pumping. CA can be triggered by a heart attack but can have other causes, such as an undiagnosed heart abnormality or cocaine or amphetamine use.

SYMPTOMS

- Possibly racing heart or dizziness, but CA may occur without warning.
- A person suffering CA will become unconscious and will not breathe normally, or breathe at all.

WHAT TO DO

- Immediately call 911, or have someone else make the call while you perform the steps below.
- If an AED (automated external defibrillator) is available, begin use, following the prompts.
- Do CPR (cardiopulmonary resuscitation). If you don’t know conventional CPR, do hands-only CPR (see below).

GET IT CHECKED

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



HANDS-ONLY CPR

Hands-only CPR can be done successfully even by someone who’s not a professional. The idea is to push hard and fast in the center of the victim’s chest to the beat of a familiar song that has 100 to 120 beats per minute. Think of the song “Stayin’ Alive” by the Bee Gees to help keep compressions in a regular rhythm. If disco doesn’t do it for you, push along to one of these:

- “Crazy in Love” by Beyoncé
- “Hips Don’t Lie” by Shakira
- “I Walk the Line” by Johnny Cash



TRAUMA WITHOUT DRAMA

TOP RWJBARNABAS HEALTH TRAUMA AND BURN CENTERS STAND AT THE READY TO DO WHAT'S NEEDED FOR THE MOST SEVERELY INJURED PATIENTS.

Paramedics are running through the Emergency Department (ED) entrance. Blood is all over. Doctors are shouting, “Get me a clamp—stat!”

And ... cut! End scene. That chaotic scenario, a staple of medical shows, happens on TV show sets but not in real life, trauma experts say.

“In a true trauma situation, we have quiet, controlled conditions,” says critical

care surgeon Rajan Gupta, MD, Director of the Level I Trauma Center and Pediatric Trauma Center at Robert Wood Johnson University Hospital (RWJUH) in New Brunswick. “The more we mitigate chaos, the safer the environment, and the better the patient will do.”

Another common misconception, says Dr. Gupta, is that trauma treatment ends after the critical first 30 to 60 minutes of care. “In fact, our system spans the entire gamut of care—emergency services, acute care centers, rehab facilities, radiology, blood banks, clinical labs, data registry and more,” explains Dr. Gupta. “A trauma

center’s job is to bring all these aspects together to help prioritize decisions and get the best possible long-term outcome for the patient.”

Together, experts at the Trauma Center at RWJUH, the Level II Trauma Center at Jersey City Medical Center (JCMC) and The Burn Center at Saint Barnabas Medical Center (SBMC) in Livingston—each an RWJBarnabas Health facility—provide a critical safety net for thousands of New Jersey residents.

TRAUMA OR ED?

Hospital EDs take care of emergencies, of course, like heart attacks and breathing problems. EDs also deal with a broad range of noncritical conditions, such as the flu or broken bones.

A trauma center, however, has a larger scope than an ED. First responders or ED



RAJAN GUPTA, MD



MICHAEL MARANO, MD



BRUNO MOLINO, MD

From left, flight paramedic Michael Brown, FP-C; flight nurse Robert Maiullo, CFRN; and lead pilot Joe Gilbert with the RWJBarnabas Health Airbus 135 helicopter.



physicians make the decision as to whether a patient needs the services of a trauma center.

“A trauma center is designed to immediately treat critically injured patients who have life- or limb-threatening injuries,” explains acute care surgeon Bruno Molino, MD, Trauma Director at JCMC and a member of RWJBarnabas Health medical group. “When seconds count to make the difference between life and death, a whole team is waiting around a stretcher even before the patient arrives.

“To be certified as a trauma center, a facility must have extensive resources available to care for severely injured patients at all times,” says Dr. Molino. “Neurosurgery, maxillofacial surgery, orthopedic surgery, cardiac surgery—all these specialties and more have to be there at our disposal.”

The most common types of injuries seen in trauma centers come from three

situations: falls by elderly people, blunt-force assault or penetrating wounds (such as gunshots), and motor-vehicle crashes, says Dr. Gupta. “Our cars are getting much safer, so traumatic injuries from crashes are decreasing,” he explains. “Meanwhile, for the elderly, even a minor fall can result in devastating injuries. As the population ages, this has become an ever-growing issue for health systems.”

Trauma centers also routinely drill to be prepared for mass casualties in a disaster situation. This training includes close coordination with other trauma centers in case backup is needed. There are 10 state-certified trauma centers in New Jersey.

HELP FOR SEVERE BURNS

Trauma centers across the state coordinate closely with The Burn Center at SBMC, New Jersey’s only state-certified burn-treatment facility. In addition to burns from home accidents, industrial incidents and motor-vehicle crashes, one of the most common injuries the center sees—up to 30 percent of cases—is scalding in children under age 2 who have been splashed accidentally by a hot liquid.

Specialists including burn technicians, nurses and respiratory therapists, as well as the most advanced technology, are available at the center at all times. “If someone comes in with a surface burn, for example, we’re able to immediately treat them with hydrotherapy—water piped through special spigots that removes dead skin and bacteria to minimize the chance of infection,” explains Michael Marano, MD, Medical Director of The Burn Center.

The center has 12 intensive care beds for the most critically injured patients and an 18-bed recovery unit. It also runs The Outpatient Center for Wound and Burn Healing, which works with more than 4,500 patients each year.

AN OUNCE OF PREVENTION

In the hope of minimizing the need for their services, the trauma and burn centers put considerable resources into community education, covering the age spectrum from infants and car seats to geriatric fall prevention, as well as pedestrian safety,



THE NEED FOR SPEED

“In trauma care, timing is everything,” says Jim Smith, Vice President, Mobile Health Services and Patient Transport at RWJBarnabas Health (RWJBH). “The gold standard is to have no more than 60 minutes from the time a patient has a traumatic emergency to the time he or she is in the OR.”

Depending on location and time of day, a trip that takes 45 minutes by road could be done by helicopter in 20 minutes. That’s why RWJBH has partnered with Med-Trans aviation to provide a state-of-the-art Airbus 135 helicopter and two dispatch centers for live satellite tracking. Known as LifeFlight, the service includes on-scene and in-air emergency treatment and transportation to the closest appropriate state-certified trauma center. The crew includes RWJBH Emergency Medical Services flight nurses and paramedics who have had extensive training in emergency, air medical and trauma protocols.

In addition to providing time-critical transportation from emergency events, the LifeFlight system transports patients as needed among RWJBH’s 11 hospitals (and other health systems as appropriate). “The service assists with continuity of care within the same network,” Smith says. “And although it can seem dramatic and scary for patients to hear they are being transported by helicopter, sometimes the issue is not so much medical acuity as it is timing and traffic.”

In either case, he says, “It’s important for New Jersey residents to know that, barring any weather issues, air medical services in the state are robust and coordinate closely with ground providers. Very few states have the availability of resources and capabilities that we do.”

bicycle safety, sports safety, yard-work safety and distracted driving education. “I tell my Injury Prevention Coordinator that it’s her job to put me out of business,” says Dr. Gupta.

Inevitably, accidents will happen. When they do, New Jersey residents are in the fortunate position of having a nearby trauma center ready and able to serve.

To learn more about safety education and training at RWJBarnabas Health hospitals, visit www.rwjbh.org/cpr.



MAKING MATERNITY SAFER

A FOCUS ON WOMEN'S HEALTH BEFORE, DURING AND AFTER PREGNANCY AIMS TO SAVE LIVES.

“I don’t feel well,” said Tara Hansen, 29, of Wanamassa, shortly after giving birth to her son in 2011. But her healthcare providers considered her a healthy postpartum patient, and sent her home. Six days later, she died from an infection that occurred during the birth.

Pregnancy-related deaths are relatively rare—about 700 occur each year in the U.S.—but are on the rise. So is the rate of delivery-related “severe maternal morbidity,” which is defined as significant short- or long-term effects to a woman’s health.

“In New Jersey, healthcare systems, community-based organizations and government agencies are tackling this issue head-on,” says Suzanne Sernal, Vice President of Women’s Services

for RWJBarnabas Health (RWJBH). “We’re collectively looking at the entire continuum of healthcare to see what women want and need to be healthy before, during and after pregnancy.”

EMPOWERING WOMEN

Providing education is a priority. “The majority of maternal adverse events don’t happen on the day a woman gives birth,” Sernal says. “They occur in the days and weeks that follow the birth, when mom is back at home and the warning signs of a serious complication may not be immediately recognized.”

To increase awareness, Tara’s husband, Ryan, partnered with Rutgers Robert Wood Johnson Medical School and Robert Wood Johnson University Hospital, an RWJBH facility, to create the Tara Hansen Foundation’s “Stop. Look. Listen!” program. This initiative empowers women to voice any concerns they have and reminds providers to pay close attention, rather than assuming a symptom is a typical complaint of pregnancy or the postpartum period. The program has been embraced by facilities throughout RWJBH.

ALERT IN THE ED

RWJBH Emergency Departments (EDs) have created a system to ensure that any woman coming to an ED who has given birth within the previous 42 days is identified, and a note made in her electronic health record. “Care management for certain conditions can be quite different for a woman who has recently given birth compared to a woman in the general population,” Sernal says. “This alert system quickly identifies postpartum women and when minutes matter it can save lives.”

Other aspects of RWJBH’s comprehensive approach to maternal health include:

Promoting equality in healthcare to improve pregnancy outcomes. “Our hospitals are exploring the specific needs and challenges of women in their unique communities,” Sernal says.

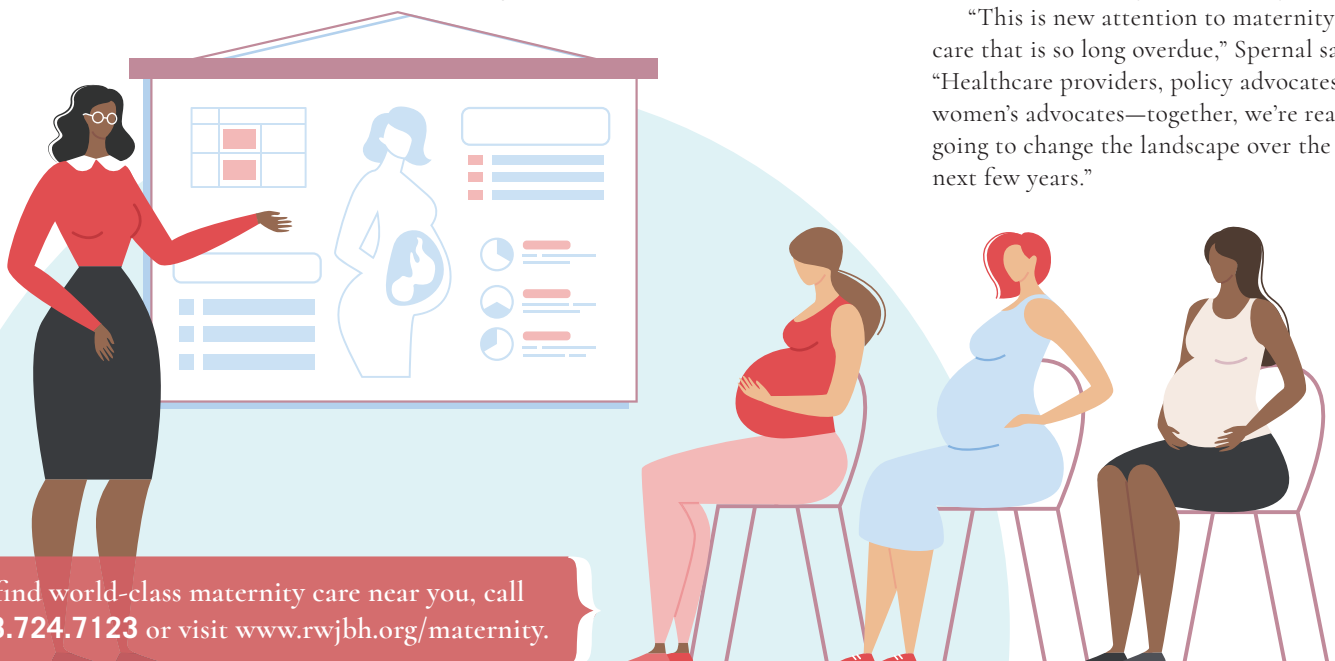
Providing reproductive planning so women, particularly those with medical conditions, can plan safer pregnancies.

Co-designing initiatives with community groups that address issues such as housing, domestic violence, obesity, diabetes and substance abuse, all of which can negatively affect pregnancy outcomes.

Focusing on maternal mental health. Monmouth Medical Center, an RWJBH facility, has the state’s only perinatal mood and anxiety disorder program.

Participating in Maternal Health Awareness Day, this year on January 23.

“This is new attention to maternity care that is so long overdue,” Sernal says. “Healthcare providers, policy advocates, women’s advocates—together, we’re really going to change the landscape over the next few years.”



To find world-class maternity care near you, call **888.724.7123** or visit www.rwjbh.org/maternity.



LEARNING TO CRAWL AGAIN

A BABY REBOUNDS FROM A TRAUMATIC BRAIN INJURY WITH THE HELP OF CHILDREN'S SPECIALIZED HOSPITAL.

On the afternoon of January 8, 2019, Olivia Lopes got a frightening phone call: Her mother, nephew and 7-month-old son had been in an accident. While the three were walking home from her nephew's school, a vehicle had jumped the curb and struck them from behind.

Olivia's mother and nephew suffered multiple fractures. Infant LJ, who had been in his car seat in a wagon being pulled by his grandmother, suffered the most extensive injuries as the car seat became dislodged and soared 70 feet away. "When we finally got in to see LJ, he was on life support," Olivia recalls. "He had multiple skull fractures, orbital fractures, severe brain trauma and a broken leg, and was having difficulty moving his right arm."

LJ spent 21 days in a Pediatric Intensive Care Unit before being transferred to the Brain Injury Program at Children's Specialized Hospital



An RWJBarnabas Health facility

(CSH) in New Brunswick. There, a team of specialists developed a customized rehabilitation program to address his medical, physical, cognitive and psychosocial needs.

Within a week, however, his family and team realized something wasn't right with LJ. He was transferred to the Emergency Department at Robert Wood Johnson University Hospital in New Brunswick, where a CAT scan led to a diagnosis of hydrocephalus. With this condition, excess cerebrospinal fluid builds up in the ventricles (cavities) of the brain and increases pressure within the head, causing head enlargement, headaches, impaired vision, cognitive difficulties and loss of coordination. A shunt was surgically inserted into a ventricle to drain the excess fluid.

From left to right, LJ Lopes in the playroom at Children's Specialized Hospital; snuggling with his cousin Auggie; getting a boost from visiting Rutgers University football players.

SKILLS REGAINED

LJ returned to CSH on February 11 to continue his rehabilitation journey. He quickly bonded with his inpatient team, particularly enjoying aquatic therapy. "Once they got LJ into the pool, there was no stopping him," says Olivia. "He loved it, and the resistance of the water forced him to start using his right arm more."

LJ spent another two months at Children's Specialized working with physical, occupational, speech-language and recreational therapists. "The progress he made at Children's Specialized was amazing," says Olivia. "After the accident, he lost all of his muscle memory. The team worked with him day in and day out, helping him to learn how to roll, crawl, stand and walk." LJ went home on April 8. He is now attending outpatient therapy sessions three days a week at the CSH location in Hamilton, working hard to build strength in his right arm and learn how to suck and swallow properly.

"We still keep in touch with the remarkable therapists and care team at Children's Specialized, updating them on LJ's progress," Olivia says. "We're forever grateful for the care that Children's Specialized provided to our son."

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

At Children's Specialized Hospital, we provide world-class care for children and young adults who face special health challenges across the state of New Jersey and beyond. 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.



A STRANGER'S GIFT

**A BLOOD STEM CELL DONATION—
AND A POWERFUL MEDICAL
PARTNERSHIP—SAVE THE LIFE OF
A TOMS RIVER WOMAN.**

It's a gorgeous day on the boardwalk in Bradley Beach and to look at the two smiling women, you would never guess that they had met in person for the very first time just three days before. They exhibit a strong physical and emotional connection—a bond worth life itself.

"I feel as if I'm with my daughter or my niece," Lael McGrath, 68, admits. She owes her life to Wiebke Rudolph, a 21-year-old recent college graduate from Kassel, Germany. Wiebke donated her stem cells anonymously to Lael after the retired second-grade teacher from Toms River was diagnosed with life-threatening acute myeloid leukemia in 2016. Both had looked forward to this meeting for more than two years.

"To have a donor and patient together like this is truly remarkable," says Vimal Patel, MD, a hematologist/oncologist in the Blood and Marrow Transplant Program at Rutgers Cancer Institute of New Jersey and Robert Wood Johnson University Hospital (RWJUH) New Brunswick. "This is the reason I went into my field: to see moments like this."

AN UNEXPECTED DIAGNOSIS

In August 2016, Lael was not well. She had been a runner for more than 40 years, but that summer she couldn't run more than a block without having to stop to walk. She had fevers, night sweats and a rash on her back. "A friend was diagnosed with Lyme disease and her symptoms sounded like mine, so I

made an appointment with an infectious disease specialist, and his phlebotomist took blood samples," she recalls.

Within 24 hours, the doctor called back to explain that he had sent the blood test results to a hematologist who wanted her in his office that day. "I think you have leukemia," the hematologist told her. "And I think you need to go to Rutgers Cancer Institute of New Jersey in New Brunswick. Today."

Lael's immune system was so suppressed that she was in a life-threatening situation. Within three days she would be admitted to RWJUH, where she would spend the next seven weeks undergoing chemotherapy. Dr. Patel has been by her side since then, along with a vast team of specialists from both



Opposite page, top, Lael and Wiebke with Vimal Patel, MD; this page, with members of the Blood and Marrow Transplant Program at Rutgers Cancer Institute and Robert Wood Johnson University Hospital.



NOT ALL DONORS AND PATIENTS MEET. BUT THERE WAS NEVER ANY DOUBT FOR EITHER OF THESE TWO WOMEN. IN FACT, THE PAIR STARTED EMAILING, TEXTING AND THEN TALKING TO EACH OTHER ON FACETIME RIGHT AFTER BEING GIVEN EACH OTHER'S CONTACT INFORMATION.

RWJUH and Rutgers Cancer Institute.

In the hospital, Lael's treatment involved the use of combination chemotherapy designed to get her into remission. "However, the specific mutations that we identified in her leukemia were high-risk in nature, so we knew that chemotherapy alone would not keep her in remission," says Dr. Patel. "We needed immune therapy in the form of an allogeneic stem cell transplant."

SEARCHING FOR A DONOR

In a bone marrow transplant, cells can be used from your own body, known as an *autologous* transplant. When cells are taken from a donor, the transplant is called *allogeneic*. "In this procedure, the patient's diseased marrow is replaced with a donor's blood stem cells," says Dr. Patel. "It allows for normal blood formation and provides a new immune system to help eliminate the leukemia. It also has the potential for a cure."

At RWJUH, bone marrow transplant coordinator Mary Kate McGrath, MSN, RN, APN, BMTCN, OCN (no relation to Lael), ran the results of Lael's DNA testing through the National Marrow Donor Program (NMDP) registry.

"Within two months of Lael's diagnosis, we identified three potential matches on the registry—but Wiebke turned out to be the perfect match," she explains.

Four thousand miles away in Germany, Wiebke was notified that she matched a patient in dire need. "Not that many people in Germany do this and certainly no one in my family or among my friends," she says. "But when I first heard about this, I said yes, I'm going to do it. I was determined."

Wiebke underwent peripheral blood stem cell donation, a procedure called *apheresis*, in which blood is removed through a needle in one arm and passed through a machine that collects only blood-forming cells. (The remaining blood is returned to the donor through a needle in the other arm.) The procedure took six hours. All the logistics of harvesting Wiebke's stem cells and then transporting them to the U.S. were handled by NMDP. Meanwhile, Lael's repeat blood transfusions were made possible by the RWJUH Blood Services team.

Lael spent weeks in the hospital during the fall and winter of 2016, waiting for the transplant and being closely monitored by her healthcare team.

Finally, in December 2016, she was notified that her transplant was imminent.

"On December 16th, it happened," she recalls. "A team walked in carrying a small cooler and within an hour, the transfusion was over. All I actually knew was that the donor

was female and 19 years old."

Lael did so well post-transplant that she was able to go home on New Year's Day 2017. Over in Germany, Wiebke was told that the transplant had gone well.

Protocol and confidentiality policies don't permit donors and patients to have direct contact with each other until at least one year has passed. In this case, the wait lasted more than two years, until test results showed that Lael's blood cells were 100 percent "donor."

Not all donors and patients meet. But there was never any doubt for either of these two women. In fact, the pair started emailing, texting and then talking to each other on FaceTime right after being given each other's contact information.

Recently, at a celebration hosted by RWJUH, both women held bouquets of flowers and stood happily alongside one another. "If it weren't for Wiebke, I don't know what would have happened," Lael says.

With the breeze blowing off the Atlantic Ocean, these two women look knowingly at one another, smile and agree, "It was a miracle."

RWJBarnabas Health and Robert Wood Johnson University Hospital, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.**



sunlight tends to boost serotonin. A lack of light causes the brain to release less serotonin, which can lead to depression.

“We’re not sure what makes some people vulnerable to SAD while others aren’t greatly affected by less exposure to sunlight,” says Dr. Kaplan. “The theory is that people with SAD may have some form of imbalance in the regulation of these two hormones. Genetic factors may play a role in this.”

WHAT TO DO

“If you think you may have SAD, consult with a professional to determine whether your condition relates to that or to something else,” advises Dr. Kaplan. “Depression can be due to many different things, so it’s better not to self-

diagnose and possibly waste time on the wrong treatments.”

Having a healthy diet and regular exercise have been shown to improve symptoms of depression. Other possible treatments for SAD include:

Light therapy. The patient sits or works near a device called a light therapy box, which gives off a bright light that mimics natural outdoor light. “For some people, this treatment is very effective, but it’s best to consult your physician about the type of device to use,” says Dr. Kaplan.

Cognitive behavioral therapy. This kind of psychotherapy, or “talk therapy,” focuses on changing inaccurate or negative thinking in order to create new behaviors.

Antidepressant medication. “Generally speaking, antidepressants don’t start working for four to six weeks,” says Dr. Kaplan. “If your depression is seasonal, you may choose to take them for several months and then go off them when winter is over, or continue to take them for the rest of the year to prevent the reappearance of depression. It’s the combined job of the doctor and patient to decide the best course.”

YOU CAN BEAT THE WINTER BLUES

SEASONAL DEPRESSION IS A STRUGGLE, BUT HELP IS AVAILABLE.

In winter, the short hours of daylight can lead to dark moods. It’s a common syndrome—thought to affect up to 10 million people in the U.S.—known as Seasonal Affective Disorder, or SAD. “SAD is a kind of depression that happens at a specific time of year, usually in the

winter,” explains psychiatrist Gabriel Kaplan, MD, Chief Medical Officer of the RWJBarnabas Health Behavioral Health Network.

Symptoms of SAD are similar to those of clinical depression, such

as feelings of hopelessness, anxiety and problems with appetite. “A couple of symptoms seem to be more common with SAD, however,” says Dr. Kaplan. “People with SAD often crave sweets more, and are more tired and sleep more.”

As with regular depression, there is help for those who suffer from SAD.

WHY WINTER?

While the exact cause of SAD is unknown, two hormones are implicated: melatonin, the hormone that regulates sleep, and serotonin, a key hormone for mood stabilization. “Melatonin tends to be produced when there’s no sunlight,” explains Dr. Kaplan. “More melatonin means people feel sleepier.” Conversely,



GABRIEL KAPLAN, MD

To learn about options for getting help for depression, call the RWJBarnabas Health Behavioral Health Network Access line at **800.300.0628**.



COMPASSIONATE CANCER CARE

THE 2019 “WE VS. C” EVENT RAISED CRITICAL FUNDS TO
PROVIDE PATIENTS WITH UNIQUE HOLISTIC SERVICES.



RWJBarnabas Health and Robert Wood Johnson University Hospital Hamilton, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.



The fundraiser featured aromatherapy sampling, musical and dance performances, art demonstrations and more. From left: William Walsh, Chairman, RWJUH Hamilton Board of Directors; Yolanda Stinger, Vice Chair, Foundation Board; Lisa Freeman, Chairperson, “We vs. C”; Richard Freeman, President & Chief Executive Officer, RWJUH Hamilton; Nina Melker, President, Foundation Board and Vice Chair, RWJUH Hamilton Board

At Robert Wood Johnson University Hospital (RWJUH) Hamilton, cancer patients not only receive expert medical care but also benefit from an array of programs that enhance well-being. The Holistic Program offers Reiki (a hands-on healing technique), pastoral care, meditation, massage, nutrition counseling and pet, art and music therapies. It also provides wigs and wig care. Stylists from Sleek Salon and Salon Pure cut, style and size the wigs for patients. A cellist comes to the Cancer Center monthly and a harpist comes almost daily to entertain patients who are receiving infusions. There’s also an aesthetician who teaches patients how to care for their skin during treatment. “Cancer patients need spiritual enrichment and the human touch,” says Lisa Freeman, co-creator and chair of the “We vs. C” fundraising event and a Foundation board member.

The Holistic Program, which is available free of charge, is funded entirely by the

RWJUH Hamilton Foundation. (The services aren’t covered by insurance.) Over the past three years, the Foundation has held the “We vs. C” event to raise funds for the Cancer Center. The most recent event, which was held on September 20, 2019 at the Trenton Country Club, raised about \$75,000 for the Holistic Program.

AN UNFORGETTABLE EVENING

The event, called “The Secret Garden,” brought to life some of the Holistic Program’s unique features. Guests wandered around five different rooms, each of which offered distinct “experiences”: a “sniff bar,” which allowed guests to sample aromatherapies; musical and dance performances; art demonstrations; and henna tattoos, which

were provided by the Robbinsville BAPS and the Mosque of Greater Princeton. Guests received personalized Arabic calligraphy paintings. “We created a live event out of what we do every day in the Cancer Center,” says Jessica Alleman, Foundation Manager.

The event succeeded in raising awareness of cancer care at RWJUH Hamilton. “Every guest experienced something new that night,” says Freeman. Raising funds for the Holistic Program is crucial because, as Freeman points out, “the RWJUH Hamilton Cancer Center provides excellent care for the whole person. We have the latest technology and the most brilliant clinical minds. The level of compassion among our providers is unheard of.”

For more information about the RWJUH Hamilton Foundation, please visit us at www.rwjbh.org/hamiltongiving.

After her second hip replacement, Mary Jo Hartmann can take long walks without pain.

THE SECOND TIME AROUND

THANKS TO ANOTHER HIP REPLACEMENT SURGERY, A FIT GRANDMOTHER IS BACK TO HER ACTIVE LIFESTYLE.

Mary Jo Hartmann, 72, enjoys gardening, taking brisk walks and attending her grandchildren's hockey games. But in the spring of 2019, she was experiencing a deep, sharp ache—and sometimes stabbing pain—in her left hip. She found herself stuck inside her home and miserable. “It was too painful and exhausting to drag myself up and down my front steps,” says the Hamilton resident, who had been so fit she routinely took seven- to eight-mile walks every day. “The pain was so intense I couldn't sleep for more than about two hours at a time,” she recalls. “I tried all sorts of medications and injections, but nothing helped.”

Mary Jo sensed it was time to return to her orthopedic surgeon, John Schnell, MD, who had replaced her right hip at Robert Wood Johnson University Hospital (RWJUH) Hamilton in 2015. When she saw Dr. Schnell, he told her she should consider replacing her left hip. She didn't hesitate. “I had such wonderful results my first go-round with him, I didn't think twice about having the procedure again,” says Mary Jo.

Mary Jo's first hip replacement had been done using Mako robotic-arm-assisted surgery, in which a CT scan of a patient's hip is taken and a three-dimensional model is created based on his or her anatomy. During surgery, the physician guides the robotic arm and positions the hip implant based on the plan. This helps to ensure greater precision and typically results in a quicker recovery. “Mary Jo was the first patient I used the Mako robot on, and by the time she returned four years later, I'd

done another 600 of them,” says Dr. Schnell.

A RAPID RECOVERY

Mary Jo had the surgery on August 12, 2019, and it was a breeze, she says. “An hour and a half

after I returned from the recovery room, the nurses had me walking up and down the hall,” she recalls. She remembered many of the nurses from her previous surgery. “The staff at RWJUH Hamilton is just so incredible,” she says. “Everyone—the doctors on call, the nurses and the woman who cleaned my room—spoke to me with such respect. It's clear that they all care deeply about their patients.” Her visit was short and sweet: The morning after her surgery, she was discharged.

Mary Jo spent the next three days at her son's house before returning to her own home. Like the first time around, her recovery was easy. Although she had to use a cane for support for the first two weeks, she found that she was able to resume activities like going up and down the stairs almost immediately. “It was strange being able to do this without clutching onto the railing for dear life,” she says.

Since she'd been in such good shape before the surgery, Mary Jo didn't require any physical therapy. She gradually eased into her walking routine—first cautiously strolling half a mile, then a mile and then gradually picking up the pace and distance as the weeks went by. At her six-week checkup, Dr. Schnell cleared her to return to the gym. It wasn't long before she was able to resume her three-times-a-week, 90-minute resistance training routine. “I've always prided myself on taking meticulous care of my body,” she says.

NO MORE PAIN

These days, Mary Jo spends her time putting around her garden, baking for family and friends and relishing her time with her grandkids. “I feel like I've gotten my life back,” she says. She's set ambitious goals for herself: Over the next few months, she hopes to ease into walking eight miles a day.

Mary Jo's presurgical fitness routine set her up for a successful recovery, says



SETTING YOURSELF UP FOR SUCCESS

While physical therapy (PT) can help ensure a full recovery from joint replacement surgery, it's not always necessary after a hip replacement. The focus is on walking, says Pamela Randolph, PT, DPT, Director of Rehabilitation Services at Robert Wood Johnson University Hospital (RWJUH) Hamilton. “We make sure all of our patients are walking the day of surgery,” she says. If a patient has developed an abnormal gait pattern due to hip pain, PT may be recommended. “Physical therapy can help strengthen the surrounding muscles so that a patient's gait returns to normal,” says Randolph.

Dr. Schnell. “The more fit a person is, the more likely he or she is to bounce back quickly after joint replacement,” he explains. While a hip replacement tends to involve less recovery time than a knee replacement—which can require months of physical therapy—he warns that people should have realistic expectations. It's unlikely that hip replacement patients will be able to run marathons, but Dr. Schnell gives them his blessing to resume low-impact activities like walking, yoga, golf and biking.

Mary Jo credits her rapid recovery, in part, to the skill of her surgeon. “I have nothing but good words for Dr. Schnell, who gave me back my quality of life—twice,” she says.



JOHN SCHNELL, MD

Change your life with orthopedic surgery.
Learn more at www.rwjbh.org/hamiltonortho.





A GUIDE TO WINTER WORKOUTS

SIMPLE WAYS TO STAY FIT WHEN THE WEATHER IS FRIGHTFUL.



With winter comes the temptation to curl up on your couch till the spring thaw. But fight the urge for the sake of your health, advises Ryan Stevens, MPS, ATC, CSCS, Manager of Athletic Training Services at Robert Wood Johnson University Hospital (RWJUH) Hamilton. “Winter workouts have many physical and emotional benefits,” he says.

For starters, staying active charges up your immunity: A few minutes of daily exercise can help keep colds and the flu at bay. In addition, winter workouts can help you avoid the five- to 10-pound weight gain that is typical during the season. Exercise outside and you may burn a few more calories than you would inside, depending on how hard your body has to work to stay warm. In addition, you may get a small dose of sunlight, which can boost your vitamin D intake and lift your spirits. “It can be tough to be inside all winter if you like to be outside,” says Stevens. “So forcing yourself to go outside—even for short periods of time—can improve your mood.” What’s more, research shows that exercise fends off depression. Experts don’t know exactly why, but it releases endorphins (chemicals that leave you with a sense of well-being) and increases blood flow to the brain.



FEELING THE BURN

Wonder what the fitness payoff is for outdoor activities? Here’s how many calories you’ll burn in 30 minutes*:

- Brisk walking at 4 miles per hour: 167
- Running at 5 miles per hour: 298
- Hiking: 223
- Downhill skiing: 223
- Cross-country skiing: 298
- Snowshoeing: 298
- Ice-skating: 260
- Operating a snowblower: 167
- Shoveling snow by hand: 223

* Based on a 155-pound person

SIMPLE INDOOR EXERCISES

When the weather is frightful, you may be forced to bring your workout inside. Here are some simple exercises that can be done as warm-ups (for 15 seconds each) or for longer periods (30 to 45 seconds each). Do all of them two or three times to increase your endurance, says Ryan Stevens, MPS, ATC, CSCS, Manager of Athletic Training Services at Robert Wood Johnson University Hospital (RWJUH) Hamilton. “If you aren’t comfortable getting on the floor, try these exercises on your bed,” he suggests.

- **Three-Point Stability:** Starting in a push-up position (also called a “high plank”), alternate taking one foot off the ground, then repeat with one hand off the ground. If it’s too difficult to get down on the floor, this exercise can be performed by leaning against a countertop.
- **Bridges:** Lie on your back with your knees flexed and your feet under your knees. Lift your hips in the air, pressing through your heels. If you’re able, alternate marching your legs up and down while you perform this exercise.
- **Hamstring Pumps:** Lie on your back with both knees straight. Grab one of your thighs and pull it up toward your chest. Extend the knee of the leg you are holding into the air as high as you can, pumping it up and down. Do this for 15 seconds, then switch sides.
- **Reach & Rotate:** Get on all fours. Starting with your right hand, reach underneath and across your body to the left as far as you can. Then rotate back to the right and reach toward the ceiling. Lead with your thumb, as though you’re hitchhiking.
- **Squats:** Standing in one place, pretend you’re sitting down into a chair, and then stand up tall again. Keep your feet parallel and flat on the ground.
- **Hinges:** Standing up with your knees slightly bent, bend forward at your hips while keeping your back straight like a tabletop. Straighten back up again.

COLD WEATHER SAFETY

While there are many benefits to working out during the winter months, keep the following in mind before you hit the pavement (or slopes):

- **Choose footwear with a good grip** to avoid slipping and falling in the ice and snow.
- **Wear a fleece or wool hat and mittens.** This can help you avoid frostbite (freezing of the skin and other tissues).
- **Dress in layers.** Your first layer should be a synthetic fabric designed to wick away sweat. The second should be wool or fleece. Top it off with a breathable and waterproof layer. You can always remove it if you feel too warm.
- **Slather on sunscreen (with an SPF of 30 or above)** and wear sunglasses. Ice and snow reflect the sun’s ultraviolet rays.
- **Drink plenty of water** to avoid dehydration.
- **Beware of frostbite in the bitter cold.** Watch for numbness, a lack of color and tingling in your ears, nose, hands and toes. If you notice any of these symptoms, head indoors immediately and warm your skin slowly. Don’t assume it takes a long time for frostbite to set in—it can happen in as little as 30 minutes if it’s 0 degrees Fahrenheit and the wind speed is 15 mph.

Exercise with us this winter! Learn more about RWJ Fitness & Wellness in Quakerbridge at www.rwjhamiltonwellness.com.



RWJBarnabas Health and Robert Wood Johnson University Hospital Hamilton, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

A PREVENTABLE CANCER

VACCINATION AND REGULAR SCREENING PROVIDE THE BEST PROTECTION FROM CERVICAL CANCER.

Like many women, you might worry about breast cancer, but cervical cancer should also be on your radar. In 2016, the most recent year for which statistics are available, there were nearly 13,000 cases of cervical cancer, and 4,188 women died from the disease, according to the Centers for Disease Control and Prevention (CDC). Fortunately, the disease can be prevented.

A LIFESAVING VACCINE

Cervical cancer occurs in the cells of the cervix—the lower part of the uterus, which allows a baby to enter the birth canal. It's almost always caused by the human papillomavirus (HPV), the most common sexually transmitted infection in the U.S., says Ruth Stephenson, DO, FACOG, a gynecologic oncologist at Robert Wood Johnson University Hospital (RWJUH) Hamilton and Rutgers Cancer Institute of New Jersey. About 70 percent of women are exposed to HPV, but the immune system eliminates the virus 80 to 90 percent of the time, according to the National Cervical Cancer Coalition. However, certain high-risk types of HPV can be dangerous. "HPV can cause changes in the cells of the cervix that, over time, can turn into cancer," says Dr. Stephenson.

Gardasil®, the HPV vaccine, protects against the most common high-risk strains of the virus. The vaccine was originally intended for children and young adults, but the U.S. Food & Drug Administration recently approved it for adults up to age 45. The CDC recommends giving children two doses of the HPV vaccine at ages 11 and 12. Three shots must be given to people who are vaccinated between the ages of 15 and 45.



RUTH STEPHENSON, DO

SMART SCREENING

Regular screening with a Pap test can also help women avoid cervical cancer. During this procedure, a physician collects cells from the cervix during a pelvic exam. The cells are examined under a microscope for signs of cancer and precancerous changes. If abnormalities are found, a biopsy may be necessary. The physician will remove any precancers, which helps to prevent cervical cancer more than 95 percent of the time. Before you have a Pap test, ask your physician if you should have HPV testing—which checks for the presence of the virus—at the same time.

Having regular Pap tests (see "Screening Guidelines") and keeping any follow-up appointments with your gynecologist are key. "Many women stop seeing their gynecologist after they're done having babies or have gone through menopause," says Dr. Stephenson. "If a woman has precancerous cells and isn't treated, she's at risk for cancer."

THE MOST ADVANCED TREATMENT

Early cervical cancer doesn't usually cause any symptoms. When the disease is more advanced, signs include abnormal vaginal bleeding (between periods or after menopause, for instance); pain during sex; discharge, which may contain blood; changes in your bladder or bowel function; weight loss and fatigue.

Patients who are treated at RWJUH Hamilton benefit from the hospital's partnership with the Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-Designated Comprehensive Cancer Center. "We're fortunate to have a multidisciplinary tumor board," says Dr. Stephenson. "Every cancer case is presented to a panel of interdisciplinary specialists—including a radiation oncologist, medical oncologist and other surgeons—to determine the



SCREENING GUIDELINES

Getting a regular Pap test enables your physician to identify any abnormal cell changes in your cervix. Women should begin annual testing at age 21. If the results are normal over time, a woman can have less frequent Pap smears (every three to five years). "If you've never had any abnormal Pap tests, you can stop having them at age 65," says Ruth Stephenson, DO, FACOG, a gynecologic oncologist at Robert Wood Johnson University Hospital (RWJUH) Hamilton and Rutgers Cancer Institute of New Jersey. "But I still recommend having an annual pelvic exam to check the cervix, vagina and vulva for abnormal growths."

REDUCING YOUR RISK

Simple lifestyle changes can help lower your risk for cervical cancer. If you smoke, quit. Smoking weakens the immune system, making you more vulnerable to long-term HPV infection. In addition, use a condom to help reduce your risk of contracting HPV.

best treatment."

Patients also have access to clinical trials. "We offer promising new therapies, such as immunotherapy [in which the body's immune system is harnessed to fight cancer cells] and targeted agents for cancer," says Dr. Stephenson.

Take care of yourself! Learn more about the RWJ Center for Women's Health and request an appointment at www.rwjbh.org/hamiltonwomenscenter.





Health Screenings

Screenings are FREE unless otherwise noted. Registration required. Call 609.584.5900 to schedule unless otherwise noted.

Hamilton RWJ Fitness & Wellness Center

3100 Quakerbridge Rd., Hamilton

Take-Home Colorectal Kit Tue., February 4 and April 28; 9:30 to 10:30 a.m.

Learn about colorectal cancer, types of screening tests and how to use a simple, take-home test to detect early cancer.

Cholesterol Lipid Profile/Glucose/Blood Pressure and Stroke Risk Assessment

Fri., February 7, March 6 and April 3; 8:30 to 10:30 a.m.

Eighty percent of strokes can be prevented by controlling individual risk factors. Simple finger stick and fast 12 hours prior. Registration required. Fee: \$5

Blood Pressure and Glucose Screenings

Mon., February 10, March 23 and April 6; 10 a.m. to Noon

Hypertension can lead to heart disease, stroke and kidney damage, so know your numbers. In addition, you can get an immediate glucose reading with a simple finger stick. A nurse will share the results and provide

education about prediabetes and diabetes.

Memory Screening

Wed., Feb. 19; 10 a.m. to 12 p.m.

Are you concerned about "senior moments"? The Mini-Mental State Exam is a quick assessment to discern normal aging versus potential problems. Appointment and registration required.

Osteoporosis Screening

Tue., March 3; 10 a.m. to 12 p.m.

An ultrasound of the heel can help detect osteoporosis.

Orthopedic Screening: Hand/Wrist

Tue., March 24; 4 to 6 p.m.

Meet with an orthopedic physician and physical therapist, who will assess bone and joint pain and test your strength and range of motion. Kimberly Zambito, MD, orthopedic surgeon

Orthopedic Screening: Spine

Thu., April 2; 5 to 7 p.m.

Meet with an orthopedic physician and physical therapist, who will assess bone/joint pain and test your strength and range of motion. Marc J. Levine, MD, orthopedic surgeon

RWJ HAMILTON AUDIOLOGY BALANCE CENTER

2 Hamilton Health Pl., Hamilton

Hearing Screening

- Wed., February 19; 9 to 11:30 a.m.
- Thu., March 12, April 16; 9 to 11:30 a.m.

Lorraine Sgarlato, AuD
Call 609.245.7390 to register.

Fall Prevention/Balance Screening

- Wed., February 19; 9 to 11:30 a.m.
- Thu., March 12 and April 16; 9 to 11:30 a.m.

Call 609.245.7390 to register.

RWJ HAMILTON VEIN AND VASCULAR SURGERY CENTER

3525 Quakerbridge Rd., Trenton

Varicose Vein and Venous Screening

Thu., March 12; 4 to 6 p.m.

Sto Poblete, MD
Call 609.570.2071 to register.

RUTGERS CANCER INSTITUTE OF NJ (CINJ)

2575 Klockner Rd., Hamilton

Prostate Cancer Screening

Mon., March 9; 5 p.m.
Includes an exam and PSA blood test. Exam by Christopher

Arellano, NP. Thank you to the John Paul Geijer Memorial Foundation for its contribution to this screening.

RWJ REHABILITATION AT DELAWARE VALLEY

123 Franklin Corner Rd.; Suite 103; Lawrenceville

Orthopedic Screening: Ankle/Foot

Thu., February 13; 2 to 4 p.m.

Attend a foot and ankle screening with a board-certified specialist and a physical therapist. Meet the doctor who will treat both pediatric and adult foot and ankle conditions, including sports injuries. Note: This screening is not designed to evaluate diabetic and dermatologic conditions. Faith Schick, DPM

RWJ OUTPATIENT CENTER AT EWING

1440 Lower Ferry Rd., Ewing

Orthopedic Screening: Shoulder/Upper Extremity

Thu., March 12; 4 to 6 p.m.

Meet with an orthopedic physician and physical therapist who will assess bone and joint pain and test your strength and range of motion. John Prodromo, MD