MOMENTS THAT MATTER:
DEFENDING ON THE FIELD AND OFF, WITH CYSTIC FIBROSIS
Read Belle’s Story
Greetings,

I’m pleased to share with you that your children’s medical records have now been streamlined throughout Atlantic Health System using our advanced medical records technology known as Epic. This will allow your pediatrician to have access to important information about your child from the hospital, pediatric specialists involved in their care, and the laboratory, all in real time. It will also give parents the ability to see from the convenience of a cellphone, test results and parts of the medical record.

In this issue of AtlanticView Kids, you’ll read several exciting and informative stories from Goryeb Children’s Hospital, including being able to better recognize and deal with stress in your child, preventing and treating seasonal injuries, spotting Crohn’s disease before gastrointestinal symptoms begin, and how early identification of sepsis in children can head off this life-threatening condition.

In our Moments That Matter feature, you’ll meet Belle, a high school senior and lacrosse player with cystic fibrosis, who relies on her specialized care team at Goryeb’s Respiratory Center for Children to make sure that her disease does not get the best of her.

In addition, you’ll meet our newest pediatric cardiologist who is an expert in sophisticated cardiac imaging techniques. You’ll also learn that we have an entire pediatric urology surgical team trained in the use of robot-assisted surgery. And, you’ll learn about our team of development pediatric specialists who run our NICU Developmental Follow-up Program and assist in detecting developmental concerns in babies who are born prematurely.

We always want to hear from our readers, so please contact us at atlanticview@atlantichealth.org if you have a story idea or want to share a comment.

WALTER D. ROSENFELD, MD
Chair of Pediatrics,
Atlantic Health System
Children’s Health and
Goryeb Children’s Hospital

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Delivering Well-Connected, Coordinated Care

Over the last year, Atlantic Health System has streamlined medical records using an advanced technology known as Epic.

This online platform creates a single electronic health record for each patient. It also connects physicians and practitioners at different locations, simplifying communication between you and your care team.

Whether you visit Atlantic Health System hospitals, acute care centers, physician offices, laboratories or imaging centers, you now have access to your medical and prescription history – and test results – right on your phone.

Beyond providing greater convenience, Epic helps us deliver better coordinated care. With all of your caregivers securely linked to accurate, real-time information about your health and wellness, you benefit from better clinical decision making and reduced paperwork and testing.

2018 has truly been an Epic year for Atlantic Health System. We thank you and your family for entrusting us with your care, and we look forward to sharing this innovation with you.

CEO’s corner

Stay On Top of Atlantic Health System News

AtlantiCast is Atlantic Health System’s very own newscast. Broadcast every two weeks, AtlantiCast is a local news source for all things happening at Atlantic Health System’s hospitals and the communities we serve.

You can view AtlantiCast on the television screens throughout our system as well as at atlanticast.org. It is also available on local news outlets, including News12, FiOS1, Patch and TAPinto.

Renowned Orthopedic Oncologist Joins Atlantic Health System

Internationally recognized orthopedic oncologist James C. Wittig, MD, has been named chairman of Orthopedic Surgery, Morristown Medical Center, and medical director of orthopedic oncology and sarcoma for Atlantic Health System. Dr. Wittig is one of approximately 100 orthopedic oncologists in the nation. He is acclaimed for his work treating and researching pediatric and adult patients with bone and soft tissue cancers and benign and metastatic cancers. He will have oversight across Atlantic Health System’s six hospitals and will focus on ensuring outstanding quality, academic excellence and optimal operational performance. Dr. Wittig says he is “honored to be selected as the new chairman for a truly accomplished department of orthopedic surgeons at one of the best medical systems in the United States. I look forward to continuing to build this premier department and expand the orthopedic oncology offerings.”

Dr. Wittig can be reached at Atlantic Orthopedic Oncology and Sarcoma at 833-292-BONE (2663).

MORE URGENT CARE CENTERS

Atlantic Health System Collaborates with MedExpress

Atlantic Health System and MedExpress, a neighborhood health care provider, have announced a collaborative initiative that will enable them to seamlessly coordinate care. MedExpress urgent care centers offer a broad scope of affordable walk-in care, employer health services, and basic wellness and prevention services. They also provide access to an Atlantic Health System facility if additional or more advanced care is needed.

MedExpress locations can also serve as an extension of the services available within Atlantic Health System. Visit atlantichealth.org/medexpress for more information.
DO YOU KNOW IF YOUR CHILD IS STRESSED?

As adults, we know stress all too well – what the triggers are, how much is too much and, often, how to manage it. Our children, on the other hand, rarely ask, “Can you help me manage my stress?” Parents, therefore, should be on the lookout for signs that a child is suffering.

“It’s important to recognize that childhood stress is real,” says Christopher Lynch, PhD, who cites the American Psychological Association’s 2013 Stress in America Survey, where teens reported stress levels higher than adults. “More concerning is 30 percent of survey respondents said they were sad or depressed, and nearly half said they weren’t doing enough to manage stress.”

Children often avoid sharing these feelings with parents, but there are some telltale signs that your child may be suffering, such as the following:

• Listen for words other than stress, such as upset, angry, sad, etc.
• Watch for physical symptoms (such as headaches and stomachaches)
• Irritable and oppositional
• Higher anxiety
• Behaviors such as tics, nail biting or hair pulling
• Tired looking/lethargic
• Disturbed sleep or appetite
• Decline in academic performance
• Drug/alcohol use

It’s also a good idea to check with your child’s teachers to see if they have witnessed similar patterns. If you suspect stress is present, consider having a conversation at an appropriate time.

“Be aware of when your child is most likely to talk – before bed or dinner, or while driving in the car,” says Dr. Lynch, who is also the program coordinator for Pediatric Behavioral Medicine at Goryeb Children’s Hospital. “Make sure you are fully present and stop whatever you’re doing when they start expressing concerns so you can simply listen. It’s critical that you listen without judgment, without interrupting and that you respect their feelings, whatever they may be.”

Although stress and anxiety disorders can impact significantly on a child’s life, it is important to note that they are highly treatable. Just like adults, children can benefit greatly by meeting with a professional to develop stress and anxiety management strategies. Atlantic Behavioral Health offers services specific to the needs of younger patients, giving them the opportunity to express their anxieties, develop coping skills and better deal with relationship issues.

For more information, call 1-888-247-1400.

Chambers Center for Well Being ‘Mindfulness for Teens’

The Mindful Teens program includes six one-hour-long sessions designed to help teens deal with some of the common challenges of this stressful stage of life. Through a series of simple, research-based mindfulness exercises, teens learn to manage stress, improve attention and respond to their thoughts, emotions and actions with more skill. Research suggests learning to cope with stress enhances regions of the brain that are important for emotion regulation and resilience that begin to form in adolescence and continue into adulthood. Teens will discover their inherent capacity to respond mindfully to life stressors and to experience more ease, health and joy.

Visit atlantichealth.org/mindfulteens for more information.
Living With Crohn’s Disease

Crohn’s disease cannot stop Nick Seyda from achieving his dreams

To say Nick Seyda has endured a few challenges is an understatement. The 13-year-old from Long Hill was born prematurely and given a 3 percent chance of a healthy survival. Yet he survived. By age 8, a new set of challenges emerged. Nick was a budding soccer phenom. His rapidly advancing skills enabled him to play up and down the east coast and he had the opportunity to play in both England and Argentina, but a growth-related knee injury forced him to the sidelines. Yet he thrived. While recuperating, Nick discovered freestyle soccer – a sport of self-expression through acrobatic tricks performed with a soccer ball. His talents developed quickly, once again, and just when Nick was moving through the professional ranks of his newfound passion, another obstacle surfaced in October 2017.

“I was diagnosed with Crohn’s disease,” says Nick, who, despite the third setback in his young life, is incredibly optimistic. “Sure it was tough, but I decided to look at the positives and set new goals for when I got better.”

Crohn’s disease is a chronic inflammatory condition of the digestive tract. Affected patients may experience abdominal pain, severe diarrhea, mouth sores, rashes, swollen joints, fatigue, weight loss and malnutrition.

“Nick is an extremely active kid, so when he showed signs of fatigue, I knew something wasn’t quite right,” says mom Shannon. “Still, I just assumed it was normal for a boy his age.”

Blood tests indicated intestinal issues, so Nick was referred to Joel Rosh, MD, a pediatric gastroenterologist for Goryeb Children’s Hospital in Morristown.

“A specific symptom to look for in this age group is a growth rate decline,” says Dr. Rosh. “This is usually a time for growth spurts, but Crohn’s disease has a direct effect on bones. That’s why pediatricians always monitor a child’s rate of growth – it can be a sign of a chronic condition even before the gastrointestinal symptoms start.”

Dr. Rosh suggests that parents be on the lookout for sudden fatigue, ongoing stomach pains, cold symptoms and gastrointestinal symptoms such as recurrent diarrhea when everyone else in the home is healthy, and joint soreness, and to schedule regular checkups to help with early diagnosis. While there is no current cure for Crohn’s disease, it can be managed effectively through intravenous medications and a variety of dietary and other therapies that allow children to return to the activities they love.

“You’re going to have roadblocks in life; that’s a given,” says Nick, who wants to be a motivational speaker when he gets older. “Overcoming obstacles – choosing hard work to achieve your goals – is what makes success that much sweeter.”

For more information, visit atlantichealth.org/kidsgastro or call Dr. Rosh’s office at 973-971-5676 or the Pediatric IBD Center at 973-971-4321.

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Dr. Rosh is part of Atlantic Medical Group, a multispecialty network of health care providers. For more information, visit atlanticmedicalgroup.org.
As a lacrosse goalie and a high school senior, Belle Christ is the last line of defense for her team. For her life with cystic fibrosis, this talented 17-year-old has another team helping on the field and off. And with their help, she has become quite adept at defending her own health.

Since being diagnosed as a toddler with cystic fibrosis, Belle and her family have turned to medical professionals at Goryeb Children’s Hospital. They’ve relied on them to help keep her at her healthiest, so she can enjoy all the normal things in life.

“Because of my team at Goryeb, I’ve learned what I need to do to make myself 100 percent,” says the resident of Randolph, NJ, where she lives with twin brother Adam, and parents Ken Christ and Liz Poret-Christ. “As I got older, they’ve gotten me more and more involved in my care, asking me what I want instead of deciding for me. If not for them, I wouldn’t be ready for what’s coming up.”

Keeping healthy with cystic fibrosis is no small task. The genetic disease affects a variety of parts of the body. A thick mucus affects the lungs. It can cause chronic respiratory infections and reduce how well the pancreas and intestines work. The disease also makes it difficult for the body to get enough nutrition without extra effort.

When Belle was a toddler, her parents initially took her out of state for care, to a nationally recognized center.

“But when I told them we live near Morristown, they told us that we had some of the best experts in the country right in our backyard, at Atlantic Health [System],” says Belle’s mother.

One of those experts is Arthur Atlas, MD, director of the Respiratory Center for Children at Goryeb Children’s Hospital. He is part of Belle’s team in the Cystic Fibrosis Program there.

“We care for the total child,” Dr. Atlas says, “working very closely with a variety of specialists and pulling in other experts here on-site whenever we need to.”

“During my visits to Goryeb, they don’t dwell on the fact that you’re sick. They focus on how to make your life have the most potential, whatever is best for you. They treat you like a regular kid.”

– Belle Christ
Services are all available during the same visit and at the same place, at the Center for Children, 55 Madison Avenue, Morristown.

“We also make ourselves exceptionally accessible when patients or parents have questions,” Dr. Atlas says. “They can call to speak directly with their dietitian, respiratory therapist, nurse and physicians, for example. That’s a major advantage over larger centers.”

For Belle’s care every day, her respiratory therapist has taught her how to do proper breathing exercises to keep her airway clear. At home, she uses a special mechanical vest twice a day during nebulizer (breathing) treatments. This care, along with medicines, helps keep potential life-threatening infections at bay. Belle’s team has also created a feeding tube regimen to ensure her growth is on track and provide her with enough calories for her active lifestyle (i.e., three-hour lacrosse practices six days a week). Further, she has a full pulmonary and gastrointestinal checkup several times a year.

Because of the seriousness of the disease, patients with cystic fibrosis can get very sick, even with the best care and when they follow their treatment plans very closely. Belle is one of the fortunate ones who has remained healthy.

However, the results of her detailed, personalized plan of care have been impressive, her mother says. Over her entire life, Belle has only been hospitalized for one cystic fibrosis-related stay.

“They all understand that she’s been a healthy child, and they have worked together to help keep her that way,” she says. “Everyone is involved in helping make her a success.”

“During my visits to Goryeb, they don’t dwell on the fact that you’re sick,” Belle says. “They focus on how to make your life have the most potential, whatever is best for you. They treat you like a regular kid.”

And with all the support and teaching Belle has received, this determined young woman is ready to test herself against other important life challenges that are coming up soon. She’s been accepted to Goucher College in Maryland. There as a freshman in 2019, she’ll play for their lacrosse team.

“That’s what we want,” Dr. Atlas says, “for our patients to do anything they want.”

For more information, visit atlantichealth.org/cysticfibrosis.
New Highly Specialized Care for the Tiniest of Hearts

Seeing the intricate workings of a baby’s tiny heart is the specialty of a new physician on staff at Goryeb Children’s Hospital. Anjali Chelliah, MD, is a pediatric cardiologist with advanced training in cardiac (heart) imaging, using MRI and CT scans. “MRI and CT images of the heart are a game-changing tool in pediatric cardiology, because of the detailed, three-dimensional information they provide,” she says. “It’s already the gold standard for children with certain heart diseases. These scans allow us to provide truly personalized medical care.”

Walter D. Rosenfeld, MD, chair of pediatrics for Atlantic Health System, Children’s Health and Goryeb Children’s Hospital, states that “we already have multiple, highly skilled pediatric cardiologists who are able to do fetal echocardiograms and care for all the heart needs in infants, children and adolescents. The addition of Dr. Chelliah will bring us to a new level of expertise – offering other advanced imaging studies to make early, accurate and clinically important diagnoses and decisions.”

Until recently, children did not often have CT scans of the heart due to risks posed by radiation. And few pediatric cardiologists are trained to do these CTs, so they are often performed by physicians who care for adults. Dr. Chelliah combines her knowledge of pediatric heart disease and imaging technology to use special techniques for children to minimize radiation.

“I image only the part of the chest I need to see, not the whole chest or even the whole heart,” she says. Lower doses of radiation are important for anyone, but especially for children who might need repeated scans over the course of their lifetime as their heart grows.

Dr. Chelliah also uses MRI techniques that decrease the need for anesthesia (sedation) for her small patients. “Sedation can pose risks that may be as significant as radiation for children with heart disease,” she says. She can perform cardiac MRIs in the smallest of patients, often without sedation. In addition to adding this new dimension of noninvasive imaging to our pediatric cardiology services, Dr. Chelliah will also be adding her expertise in fetal echocardiography to our expanding fetal cardiology service at Atlantic Health System.

“The addition of Dr. Chelliah will bring us to a new level of expertise – offering other advanced imaging studies to make early, accurate and clinically important diagnoses and decisions.”

- Walter D. Rosenfeld, MD, chair of pediatrics for Atlantic Health System, Children’s Health and Goryeb Children’s Hospital

A native of New Jersey, Dr. Chelliah completed her training at the Columbia University Medical Center; Harvard Medical School; the National Institutes of Health and the University of Pennsylvania School of Medicine. She has worked as a clinical professor at Columbia, written for leading academic medical journals and textbooks, and served as a volunteer pediatric cardiologist in African countries.

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Dr. Chelliah and Dr. Rosenfeld are part of Atlantic Medical Group, a multispecialty network of health care providers. For more information, visit atlanticmedicalgroup.org.
Even before she was born, Emily Cucciniello’s parents knew she would eventually need intricate surgery. She was diagnosed with a defect in utero (in the womb) of one of her ureters, the tiny tube that takes urine from the kidney to the bladder.

“The defect never caused her any problems – until last year, when she was eight years old,” says mom Nicola Cucciniello, of Allamuchy, NJ. “Her physicians had been watching it carefully with tests every few months. But to repair it, they wanted to wait until robotic technology was more advanced.”

Robot-assisted surgery, with the da Vinci® Surgical System at Goryeb Children’s Hospital, gives physicians a great amount of precision – something needed with a child’s small organs, and ureters that might be as tiny in diameter as a small macaroni noodle.

“We have the most advanced robotic system available anywhere,” says Michaella Prasad, MD, pediatric urologist for Goryeb. “And we have an entire surgical team trained in how to use it. There’s no reason for children to travel hours away to get the benefits of this technology. We have it right here.”

For the Cucciniellos, the need for that high-tech care came quite suddenly last summer. Emily had been sick at home for 11 days before the reason was found: a major infection caused by urine backing up into the defective ureter. Her condition became serious.

“But when we got to Goryeb, it was obvious they knew what they were doing,” Nicola says. “Within 24 hours of arriving on the unit, Emily was a different child. I can’t say enough about Emily’s amazing doctors and every single person who cared for her.”

After healing from the infection, Emily returned to Goryeb to have the long-awaited surgery. Her team there had already invested in the most advanced robot-assisted surgery tools, so she was able to avoid traditional, open surgery. That meant her recovery time was also much shorter.

Today, Emily is active and energetic, and back to gymnastics. “You’d never know she had major surgery a year ago,” her mother says.

For more information, visit atlantichealth.org/robotic or call Garden State Urology at 973-828-4300.
Every 20 seconds, someone is diagnosed with sepsis, an often-hidden, life-threatening condition. More children die from this condition than pediatric cancer. Sepsis causes 18 child deaths per day in the United States, but that number could be reduced if sepsis was caught early enough.

Sepsis impacts people of all ages but is more likely to affect young children and older adults. According to Neeraja Kairam, MD, associate director, Pediatric Emergency Department, Goryeb Children's Hospital, "Sepsis is often under the radar. People frequently think of infections without thinking about the possibility of sepsis. It can present more subtly in children compared to adults, making the diagnosis more difficult with complications, including death."

Mary Wolf, MD, pediatric hospitalist for Goryeb Children’s Hospital, says, "The body focuses so much on fighting off the infection that you have damage to other organs, which is the start of sepsis. This leads to tissue damage, organ failure and death."

Symptoms of sepsis in children include fever, fast breathing or fast heart rate. "When kids have a fever because they have an infection and their heart rate is high, that is our first sign that they are getting sicker," says Dr. Wolf. "Our new electronic medical record alerts us so if it happens in the hospital, we can go take a look at them and do a physical exam to help us decide if that's a first sign of sepsis or not."

Dr. Kairam says that symptoms for sepsis at home include fever, fast breathing and a pounding heart. "If they are listless or are dehydrated in the setting of an infection, sepsis should be considered."

It could also be the normal course of their underlying infection but without knowing that, it’s always wise to be seen by a pediatrician or the emergency department."

Both Drs. Wolf and Kairam say early identification is the key to treatment and a successful outcome. "If you can catch it early, you'll
have a much better chance of preventing it from progressing,” says Wolf. “The sooner you get fluids and antibiotics into them, the lower the risk for bad outcomes. For every hour that’s delayed after you identify that they’re having a change in their vital signs, the risk of death goes up twofold.”

At Goryeb Children’s Hospital, safeguards have been put into place, both in the emergency department and on inpatient units. “We’re the only pediatric hospital in New Jersey that has a sepsis protocol, meaning that we have an alarm system in place to identify early sepsis in kids and to implement a specific set of procedures,” says Dr. Wolf.

In the emergency department, Dr. Kairam says, “We have a protocol in place where if a child has a fever and a higher than normal heart rate, an alert is triggered to evaluate for risk factors and to initiate a huddle at the bedside with the medical team to assess whether the child is at risk for sepsis.”

Dr. Kairam says, “We are just learning that the key is to recognize sepsis as early as possible. If it is recognized and treated early and aggressively, the risk of complications drops dramatically.”

For more information on sepsis, visit sepsis.org.

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Dr. Wolf is part of Atlantic Medical Group, a multispecialty network of health care providers. For more information, visit atlanticmedicalgroup.org.
GIVING PREMATURE BABIES A FIGHTING CHANCE
Six-year-old twins PJ and Natasha started kindergarten this fall. They love playing sports, with Natasha on the swim team and PJ on the hockey team. To see them today you’d never know they had such a hard start in life. “They were born two months premature,” says mom Erin Visicaro. “Natasha was 3 pounds, 8 ounces, and PJ was 3 pounds, 2 ounces. After two long months in the hospital, Natasha came home, and PJ came home two weeks later on a breathing monitor.”

The hard work began when the twins got home, according to Erin. Natasha had to be monitored for a hole in her heart. PJ had breathing problems and was later diagnosed with autism. Erin credits the outpatient NICU (neonatal intensive care unit) Developmental Follow-up Program at Goryeb Children’s Hospital for her children’s health and well-being today. According to neonatologist Abigail Wellington, MD, “We start seeing babies in the follow-up program four months from their original due date, which is when you should start to see developmental milestones like lifting their head, rolling, making eye contact with their parents, and smiling.”

Lawrence Skolnick, MD, co-director of MidAtlantic Neonatology Associates, says, “The babies we refer to the program are babies we know are at risk for having problems in terms of development. There are many things that can be done to help them, and we want to make sure they get the follow-up they need.”

The babies referred must be less than 1,500 grams (3 pounds, 4.9 ounces) at birth or born at less than 32 weeks. “The goal of the program is early detection of developmental concerns,” says Tara Gleeson, DNP, APNC, manager of the Child Development and Autism Center. “We screen for fine motor skills, gross motor skills, emotional development, cognitive skills and language. We also provide education about ways to promote and foster development.”

A team of professionals evaluates children every three to six months until age three. A neurodevelopmental pediatrician or pediatric nurse practitioner conducts outpatient development examinations. “We work in collaboration with the child’s pediatrician,” says Gleeson. “Assessments are done by a physical therapist, speech pathologist, occupational therapist, social worker and audiologist.” Parents are then referred to the appropriate professionals for treatment.

“We screen for fine motor skills, gross motor skills, emotional development, cognitive skills and language. We also provide education about ways to promote and foster development.”

– TARA GLEESON, DNP, APNC

“It can be very overwhelming for parents to have five different follow-up visits to different specialists,” says Dr. Wellington. “I always stress to them that we’re going to be involved in making sure that their baby has a great outcome. I think they feel a little bit less alone knowing that our care is continuing.”

Erin agrees and says, “When I had the twins, I felt clueless and like my world had just been rocked given the situation they were in. So, having the follow-up program was exactly what a person in a similar situation needs. The doctors and nurses in the program are some of the most patient and compassionate professionals I’ve ever met.”

The follow-up program “was the driving force throughout our family’s success,” says Erin. “Due to the program, PJ is playing hockey, his speech is taking off, and he recently told us ’I love you’ independently.”

For more information, visit atlantichealth.org/childdevelopment.
The human body is resilient. It is also wonderfully self-healing. So when sporting injuries take your kids out of the game, you can be assured that proper medical care will have them back on the field in no time.

According to Ellen Davis, MD, a pediatric orthopedic surgeon for Goryeb Children’s Hospital, “We see spikes of certain injuries during certain athletic seasons. In the fall with football, we see a lot of contact injuries, more broken bones. When we transition into basketball, there’s a lot more ligament, knee and ankle injuries.”

When it comes to snow sports like skiing or snowboarding, Dr. Davis says, “Far and away, most injuries in snowboarding are wrist injuries because the natural tendency when you’re falling is to try to catch yourself.” Dr. Davis says skiing injuries focus more on ACL (anterior cruciate ligament) tears and other ligament injuries.

When an injury occurs, Dr. Davis says she tells parents, “Toes above nose. For example, for an ankle fracture, elevate it and try to get it above heart level. Pack it with ice and try to immobilize to keep it from moving too much.”

As far as when to go to the emergency department: “If there’s an obvious deformity and the child can’t walk, or there’s immediate swelling, then that’s something you should go to an emergency room for or an urgent care,” says Dr. Davis. “If there’s a minimum amount of swelling and the child can walk, but with a limp, there’s no need to rush to the emergency department. You should go to an orthopedist who usually keeps open appointments for such cases.”

Dr. Davis says preventing broken bones and torn ligaments can be done through proper warm-up and stretching. “A lot of times these injuries might take a kid out of their sport for the season, and that’s a pretty big deal. So, you have to be well-conditioned. Your fitness level has to be up, and you have to be game-ready.”
 Foundations Look to Improve CARE FOR PEDIATRIC PATIENTS

Our foundations are looking to expand and improve services in several areas that will benefit all our patients and the communities we serve.

Morristown Medical Center is seeking funds for the Social Skills Program at the Child Development Center. This program combines classroom learning with community field trips to help children with autism develop the skills needed to function safely and appropriately in a variety of public settings.

The Eating Disorders Program at Overlook Medical Center hopes to fund staff training that will further expand its treatment offerings. New funding will also allow for a special lounge area to be outfitted with couches and workstations, providing families with a more comfortable space.

Newton Medical Center’s Maternity Center is opening a second operating suite and needs to purchase newborn phototherapy biliblankets, phototherapy overhead lights and newborn warmers. This equipment helps treat infants with jaundice and lowers bilirubin levels in the body.

Chilton Medical Center Foundation is seeking funds to purchase three EtCO2 monitors for patients who are receiving opioids. In response to the focus of The Joint Commission and other regulatory agencies, Atlantic Health System has recently created a policy to address this need. This administrative policy requires physicians, nurses and respiratory therapists to use Opioid or “EtCO2” monitors on patients who are at risk for over-sedation with opioid use. EtCO2 monitors will provide an additional measurement of respiratory rate, may detect hypoventilation by identifying rises in carbon dioxide, and apneic episodes before changes in heart rate and/or pulse oximetry are noted. Ultimately, this will reduce adverse events associated with over-sedation during opioid use.

The Foundation for Hackettstown Medical Center will be hosting its second annual Holiday Lights Festival on Saturday, November 17, at 5:00pm at the hospital. This family-friendly event will include live music, crafts for kids and fireworks. For information, visit atlantichealth.org/holidaylights.

Learn more about these projects:

MORRISTOWN MEDICAL CENTER
Visit f4mmc.org or call 973-593-2400.

OVERLOOK MEDICAL CENTER
Visit overlookfoundation.org or call 908-522-2840.

NEWTON MEDICAL CENTER
Visit newtonmedicalcenterfoundation.org or call 973-579-8309.

CHILTON MEDICAL CENTER
Visit atlantichealth.org/chiltonfoundation or call 973-831-5165.

HACKETTSTOWN MEDICAL CENTER
Visit atlantichealth.org/hmcf or call 908-850-6876.
Visit atlantichealth.org/urgentcare to access medical treatment in your community.

For a referral to a pediatric specialist, call 1-800-247-9580 or visit atlantichealth.org/doctors.

Please call 973-971-5000 for information on all Children's Health locations and services and/or contact the specific department on the previous page.