Pediatric Epilepsy: Aaron’s Story
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November is National Epilepsy Awareness Month, and being aware of the signs of epilepsy can be difficult, as epileptic seizures are not always obviously noticeable. Each year, 150,000 children and adolescents in the United States will have a newly occurring single seizure and 30,000 are diagnosed with epilepsy after subsequent seizures occur. Epilepsy can emerge as early as the first year of a child’s life, which is why new parents can often miss or misinterpret physical symptoms. Some seizures can be very short, but frequent, and many times the seizure sufferer doesn’t recognize he or she experienced an epileptic episode, while those around them may not have perceived the signs of the seizure.

Common symptoms of a child’s epileptic seizure include:
- A staring spell
- Uncontrollable jerking movements of the arms and legs
- Lack of response to verbal stimulation
- Shaking, falling or smacking of the lips

According to the Centers for Disease Control and Prevention, failure to recognize seizures early and not receiving proper treatment increases the risk for additional seizures, disability, and decreased health-related quality of life. Epilepsy can not only affect a child’s health, but can also have a major social impact, causing isolation and loss of self-esteem. If you suspect that your child may have experienced even one seizure, contact your pediatrician immediately for an evaluation. Take notes about the duration and symptoms your child exhibited and share this with your doctor.

CentraState is proud to provide specialized epilepsy treatment programs exclusively for infants and children at The Comprehensive Epilepsy Center at CentraState, which features state-of-the-art technology and a staff of experienced pediatric epileptologists, neurologists, registered nurses, and technologists. Directed by Megdad Zaatreh, MD, a board-certified neurologist specializing in epilepsy, the Epilepsy Center provides a full spectrum of care to infants, children, adolescents and adults living with epilepsy and is part of our larger neurosciences program. Our multidisciplinary approach offers complete care and ongoing support to epilepsy patients and their families, with the goal of improving the quality of life and accessibility of care for anyone coping with seizures.

To learn more about pediatric epilepsy, read Aaron’s story on page 6.
For the past 20 years, 71-year-old Frank Castro and his wife, Pura, have spent two months a year in Spain, a place of heritage and lasting memories for them. The memories they have from this summer’s trip, however, are of a different order. Frank is lucky to have lived through this trip.

He had noticed a shortness of breath while in Spain but chose not to worry his wife. The night of their return, Frank felt unusually exhausted and retired early, figuring that it was just from the trip. But by 1 a.m., Frank was struggling to breathe, and by early morning, Pura and Frank headed for CentraState’s emergency department, a decision that ultimately saved Frank’s life.

Frank was found to have a massive blood clot, or pulmonary embolism, in the main artery to the lungs, most likely the result of his lengthy plane trip to and from Spain. Extended immobility is one of the main risk factors for blood clots, and Frank had not moved for most of the journey. While 95 percent of emboli, or blood clots, originate in the legs, they can break off and travel to the lungs, causing a blockage to the heart. Frank’s had done just that.

To relieve this life-threatening condition, Robert Kayser, MD, board-certified interventional cardiologist with Change of Heart Cardiology and on staff at CentraState, consecutively threaded two types of catheters into Frank’s pulmonary artery. The suction catheter flushed the emboli with a clot-busting drug and suctioned particles out, but some remained. The newer infusion catheter, reserved for the most difficult cases, contains an ultrasound wire that dissolves the clot further and allows medication to penetrate more deeply into the clot than more traditional methods.

The infusion catheter worked, and Frank’s lung pressure returned to normal. Subsequently, Peter Hynes, MD, board-certified cardiologist and Dr. Kayser’s partner, located the original clot in Frank’s leg and dissolved it as well, leading to Frank’s full recovery.

Dr. Kayser remarks that “CentraState now has the capability to provide a level of care that is commensurate with or higher than any of the hospitals in the area and any academic center. Even though we are a community hospital, we have the latest and greatest of endovascular therapies available. There’s really almost nothing being done in the world of endovascular services that we don’t do at CentraState.”

Dr. Kayser recommends that to avoid blood clots, people should attempt to be as mobile as possible, walking intermittently during long journeys or extended periods of sitting, such as in an office or in front of a television. CentraState inpatients are provided voluntary or mechanical methods of stimulating the muscles, such as leg compression devices, expressly to avoid clotting.

Frank remains grateful for the services of his physicians and “the wonderful people at CentraState” and is looking forward to his next summer in Spain.

For more information about CentraState’s endovascular services, visit www.centrastate.com/endovascular or call 866-CENTRA7 (866-236-8727).

**RISK FACTORS FOR PULMONARY EMBOLI**

A genetic abnormality of the clotting system
Prolonged immobility (from bed rest, long journeys, extended television viewing)
Surgery
Dehydration
Trauma to the blood vessels
Smoking
Robert DeFeo loves to show off the photo book his daughter made for him as he began cancer treatment. Titled “Health is Our Greatest Gift,” the book is a collection of family pictures and inspirational captions.

There’s a photo with his wife, two grown daughters and two grandchildren with the caption, “We love you daddy.” Another photo bears one of the motivational phrases he turned to during his darkest days, “Bring it on treatment, I’m stronger than you think.”

Without the love of his family, and the care and support of his team of doctors, nurses and specialists at CentraState Healthcare System, Robert says he doesn’t know how he would have survived his remarkable battle with cancer. In a span of less than 18 months, the 70-year-old was diagnosed with and treated for three separate types of cancer – undergoing multiple surgical procedures, three rounds of radiation treatments and a course of chemotherapy.

“Bring it on treatment, I’m stronger than you think.”

“Lung cancer typically does not produce a cough or other symptoms during its earlier stages,” says Robert Caccavale, MD, a board-certified thoracic surgeon on staff at CentraState. “Yet, when we detect lung cancer before symptoms arise, patients very often have better outcomes.”

IT’S CANCER, AGAIN
Robert’s workup at CentraState included positron emission tomography, or PET, a diagnostic imaging exam to detect cancer cells in the body. The test showed possible cancer in his thyroid, which was later confirmed with a biopsy.

“Lung cancer typically does not produce a cough or other symptoms during its earlier stages,” says Robert Caccavale, MD, a board-certified thoracic surgeon on staff at CentraState. “Yet, when we detect lung cancer before symptoms arise, patients very often have better outcomes.”
staff at CentraState, who performed Robert’s radiation treatments on the referral of Dr. Rossos. “It was really quite unusual to have all three cancers and have them all present in a very narrow time frame.”

Robert’s doctors had to not only attack each type of cancer, but they had to work collaboratively on his care.

“It was challenging, because treatment is different for each cancer," says Bhavesh Balar, MD, a board-certified hematologist/oncologist who chairs the Cancer Committee at CentraState. “We constantly had to keep in mind whether treatment for one type of cancer would complicate treatment for the second or third.”

SOPHISTICATED CANCER CARE
Because of the complicated nature of his case, Robert benefited from many of the comprehensive services and coordinated care available at The Cancer Center at CentraState.

- For his radiation treatments with Dr. Soffen, he underwent intensity-modulated radiation therapy (IMRT), a state-of-the-art technology that precisely targets and destroys cancer cells.
- His lung cancer surgery with Dr. Caccavale involved an advanced, minimally invasive surgical procedure known as video-assisted thoracic surgery, or VATS.
- Before Robert underwent chemotherapy for lung cancer, Dr. Balar checked his molecular markers to determine the best, most targeted treatment.
- His thyroid was removed by Amit Kharod, MD, a board-certified general surgeon on staff at CentraState, using a method that helps ensure nerves of the throat are not injured during surgery.

EMOTIONAL SUPPORT
Robert also credits the guiding hand of Sharon Lorfing, APN-C, a surgical oncology nurse practitioner and cancer navigator at CentraState. Sharon is available to help cancer patients deal with practical issues—from making appointments to finding transportation—and is there to provide education and emotional support.

“I try to give patients as much information as I can when they are first diagnosed with cancer,” she says. “We want patients and family members to be empowered to take control of their care and to also know they are not alone when they get that diagnosis.”

With his cancers in remission, Robert has regained his strength, his weight and most of his old voice. He hopes to be back out on the golf course soon. While he doesn’t know what the future holds, he believes he can get through anything with the support of his family and his wife, Maryanne, who, remarkably, is a lung cancer survivor herself.

“When I was feeling down and low, she would tell me not to worry and that everything was going to be all right,” he says. “She was right. I was treated wonderfully at CentraState. The way they treat you, it’s unbelievable.”

For more information about CentraState’s cancer services, call 855-411-CANCER (855-411-2262) or visit www.centrastatecancercenter.com.

FREE LUNG CANCER SCREENINGS

The Lung Center at CentraState Medical Center, in conjunction with Freehold Radiology Group, is now offering free, low-dose CT screenings, using a 64-slice CT scan, for those individuals considered at high risk for developing lung cancer. Participants will be screened once a year for three years.

To receive the free CT scans, participants must:

- Be a current or former smoker age 55 to 74
- Have smoked for 30 pack years or more (e.g., 1 pack a day for 30 years, 2 packs a day for 15 years)
- Still be smoking or have quit in the past 15 years
- Not have existing nodules

For more information, and to determine your eligibility, please contact CentraState’s nurse navigator at 732-637-6365.
It was just another day in the Lucia household in Toms River during the summer of 2012. Aaron, 2 ½ at the time, had been engaged in speech therapy because his language development was lagging far behind that of his two older siblings, yet he appeared to be making little progress. Aaron still only uttered “Ma.” Frustration was building for both Aaron and his parents.

That day, Aaron had a slight fever, suggesting a possible ear infection. Returning from the doctor’s office where the ear infection had been confirmed, Marie Lucia glanced in the rearview mirror to see Aaron convulsing in his car seat. Terrified, Marie rushed him to the closest hospital.

A spike in Aaron’s temperature had set off a seizure, called a febrile seizure, a frightening but somewhat common occurrence in children. In isolation, a febrile seizure may not raise an alarm or require treatment. However, when coupled with a language or other developmental delay, further exploration is essential, states Megdad Zaatreh, MD, board-certified neurologist specializing in epilepsy and on staff at CentraState Medical Center.

Dr. Zaatreh set Aaron up for a three-day electroencephalography (a.k.a., prolonged EEG), which showed that Aaron was having six to seven, visibly undetectable seizures per hour, a stunning finding for the Lucias. Seizures act like electric shocks to the brain, disrupting learning and memory storage and retrieval. Although Aaron’s seizures were lasting only four to five seconds per seizure, their frequency was disrupting his language development.

The Lucias were proactive and chose to administer, over time, increasing doses of medication to Aaron, while Dr. Zaatreh monitored two parameters: Aaron’s speech and his seizure activity through repeat EEGs. To her relief, Marie found that “every time Dr. Zaatreh upped Aaron’s medication, his speech got better. He’s talking in sentences now. If we hadn’t found Dr.
Zaatreh, we could still be thinking that Aaron just had a speech delay.”

SEIZURES AND CHILDHOOD DEVELOPMENT

Public perception is that seizures involve convulsions and a loss of consciousness, as in grand mal seizures. A much more common type is the complex partial seizure, where a child or adult loses awareness for one or two minutes. The child may stare into space, have glassy eyes, and stop talking. Moments later, he or she is fine. Complex partial seizures are often undetected until something more dramatic occurs, as in Aaron’s febrile seizure.

Meanwhile, precious developmental time is lost. The seizures will most likely disappear as the child ages; however, the child’s speech, behavior and school performance can all be affected if no treatment is provided. The repercussions of these learning deficits could last a lifetime. “Aaron was very, very shy before he was speaking. I think that had a lot to do with not being able to communicate with people,” Marie observes.

The prolonged EEG picks up abnormalities occurring during different activity levels as well as times of day. Sometimes, the brain abnormalities occur only at night, a time when the brain stores information learned during the day. With nighttime seizures, the storage doesn’t happen.

Dr. Zaatreh identifies two populations that would benefit from prolonged EEGs: children with speech delays for no apparent reason and children with autism. One child in three with autism experiences complex partial seizures, which can worsen the child’s speech, behavior or academic performance. “The unique thing about these two populations is that their seizures are usually treatable,” Dr. Zaatreh says.

“If someone has speech problems because of recurrent seizures, treating the seizures should give the brain the chance to start learning. Sometimes, the response is dramatic with medication.” On the other hand, warns Dr. Zaatreh, “sometimes we catch these children later, when the critical period of learning has passed. The trick is finding these patients and finding them early, not treating them. There are 25 seizure medications to pick from. Treatment is not the issue.”

Tom Lucia urges parents “to be more proactive than reactive, if there is a speech or developmental issue.” He adds, “Thankfully, Aaron had the febrile seizure or we would never have known about his seizure disorder.”

Dr. Zaatreh is confident that Aaron’s abnormal brain activity will significantly improve or go away entirely, and medication will no longer be necessary. “Aaron will eventually catch up, speech-wise,” Dr. Zaatreh says. “My prognosis is that he will do very, very well.”

For more information about The Comprehensive Epilepsy Center at CentraState, call 866-CENTRA7 (866-236-8727) or visit www.centrastate.com/epilepsy.
Sleep behaviors are one of the most common concerns parents of young children discuss with their pediatricians. In infancy and early childhood, the developing brain requires more time asleep than it does awake. As a result, sleep quality is extremely important in the overall well-being of a child. Children suffering from lack of quality sleep or sleep-related disorders can jeopardize their cognitive, emotional and physical development. Pediatric sleep problems don't just affect the child—they often have a negative impact on the quality of sleep for other siblings and the entire family dynamic.

Sleep disturbances are diagnosed in 25 to 30 percent of infants and children. Causes can include an inconsistent bedtime routine, sleepwalking, sleep apnea, narcolepsy and epilepsy. Not surprisingly, pediatric sleep disorders are often overlooked because presenting symptoms—negative behavior, moodiness, irritability, lack of motivation, inability to focus, lethargy—are misdiagnosed as behavioral or emotional problems, not a physical, medical condition. Severe or chronic sleep disorders can even cause adverse cardiovascular and metabolic effects as well as failure to thrive.

COMMON PEDIATRIC SYMPTOMS
Symptoms of sleep disorders in children can be obvious or subtle and often present with one or more of these symptoms on a regular basis:
- Ongoing bedtime resistance
- Nightly awakenings
- Sleepwalking
- Nightmares
- Bedwetting
- Insomnia
- Chronic snoring / breathing difficulties

HOW TO PROCEED IF YOU SUSPECT A SLEEP DISORDER
First, consult with your pediatrician to rule out any acute or chronic medical conditions. Once medically cleared, it may be helpful to clinically observe and monitor your child in a sleep center that offers pediatric diagnosis and treatment services. These centers offer comfortable bedroom-like settings where sleep patterns are evaluated and diagnosed during an overnight stay. A parent accompanies the child during the stay to provide comfort and alleviate anxiety. A sleep technologist applies small painless sensors designed to monitor your child’s brainwaves, muscle activity, heart rhythms, respiratory activity and oxygen saturation levels throughout the night. The results are then analyzed by a pediatric sleep medicine physician, who will determine a diagnosis and recommend the most appropriate treatment for your child, if necessary.

Once properly diagnosed, this and other sleep-related medical conditions can be successfully treated to restore the child’s normal development process. If you suspect your child may have a sleep issue, see your pediatrician and discuss a sleep study evaluation.

The Center for Sleep Disorders at CentraState Medical Center is one of only a few hospital-based sleep centers in the area. It is accredited by the American Academy of Sleep Medicine (AASM) and offers the latest diagnostic sleep disorder technology set in a comfortable, home-like atmosphere. Specially trained pediatric and adult specialists offer sleep study evaluations and EEGs (electroencephalograms) conducted in child-friendly bedroom settings. Parents stay with their children throughout the on-site sleep evaluation. To learn more about the Center for Sleep Disorders, call 877-NJSLEEP (877-657-5337) or visit www.centrastate.com/sleep.

Samuel Krachman, DO, is a board-certified physician specializing in sleep medicine, pulmonary care and internal medicine and director of the Center for Sleep Disorders at CentraState Medical Center in Freehold. He can be reached by calling 732-303-5070.
THE CHANGING FACE OF HEALTH CARE

Traditionally, the doctor/patient relationship is pretty straightforward: Patient gets sick, visits doctor, eventually feels better. But impending changes in how health care operates in this country, accelerated by the Affordable Care Act (Obamacare) mean potential changes in some doctor/patient relationships, such as putting their primary focus more on preventative medicine, so patients don’t get sick as often or they better manage their chronic diseases.

One model some doctors are starting to follow is the patient-centered medical home (PCMH). Despite its name, a PCMH is not a physical building but a health care model based on comprehensive, coordinated care, providing primary health care that is relationship-based with an orientation toward the whole person. PCMHs deliver accessible services with shorter waiting times for urgent needs, enhanced in-person hours, and around-the-clock telephone or electronic access to a member of the care team. In short, it’s about giving patients proper guidance so they can take charge of their own health and have a better quality of life.

Family Practice of CentraState (with offices at CentraState’s Star and Barry Tobias Ambulatory Campus, Freehold Boro, Colts Neck, Hightstown and Monroe) is currently participating in a PCMH program with Horizon Healthcare Innovations, and other physicians on staff are a part of similar programs in an effort to further enhance their quality of patient care. The practice is recognized by the National Committee for Quality Assurance as a level 3 patient-centered medical home, their highest certification.

“Patient-centered medical homes are a program where doctors try to keep our patients healthy and prevent them from getting sick,” says Marc Feingold, MD, a board-certified family medicine physician on staff at CentraState, who runs an operation similar to a PCMH in Manalapan. “I think patient-centered medical homes are the way the health care industry is going to go in the future.”

In his practice, Dr. Feingold goes over all treatment options with his patients so they have a full understanding of how to take care of themselves. “Patients feel more empowered, realize what must be done to improve their health, and take their medications more effectively,” Dr. Feingold says. “They feel better, and we feel better.”

DIGITAL DOCTORING

One of the keys of providing patient-centered care is implementing technology such as electronic medical records. When coupled with updated technology, one thing that the PCMH model brings to the table is an increase in evidence-based medicine, which determines the best course of treatment through analysis of patient records, made easier by using electronic medical records (EMR). “Through technology, we can improve patient/provider communication,” says Howard Stein, DO, president of CentraState Medical Associates. “Technology is a conduit to capture data and organize it in a way for physicians to meaningfully use it in a PCMH. Family Practice of CentraState, was one of the first in the region to embrace EMR technology.”

Dr. Feingold’s practice also uses electronic medical records, which allow him to quickly retrieve a patient’s medical history and easily share it with any other practice involved in the patient’s care, and an online patient portal, through which patients can submit questions about their care that are answered in a timely fashion by Dr. Feingold. “I think electronic medical records have made me a better doctor and a better communicator, and it frees up my staff to do their jobs more efficiently,” Dr. Feingold says.

In addition, Dr. Feingold’s office is equipped with a generic medicine dispenser, which is used to give patients a 30-day supply of medication right away instead of having to make a trip to a pharmacy—something some patients aren’t able to do for days. Dr. Feingold feels that being able to show patients their medication while in the office increases their compliance to take them properly when they get home. “I can open the medication up and put the pill right in the patient’s hands so they’re not scared of it,” Dr. Feingold says. “The dispenser integrates with my electronic medical records, so it can check for drug interactions automatically.”

With the combination of state-of-the-art technology and focus on patient responsibility, Dr. Feingold’s practice has elevated patient care from the traditional, standard way of practicing medicine to a guidance tool for overall health. “I like to think of myself as a health coach more than a doctor,” Dr. Feingold says.

To find a physician at CentraState, call 866-CENTRA7 (866-236-8727) or visit www.centrastate.com/physicians.
Healthy Holiday Eating

Everyone loves the holiday season, but all of that tasty holiday food can do some damage to your waistline. So instead of deep-frying your stuffing and smothering your turkey in mayonnaise, try serving up these healthy alternatives with a dash of holiday cheer instead:

**Turkey**
Instead of buying the whole bird, try just buying individual turkey breasts, which are all white meat and lower in calories than dark meat. But if you must have that whole turkey to enjoy, avoid the trend of deep frying and stick to roasting. It may take longer, but the results in taste and health are worth it.

**Green Beans w/ Caramelized Shallots**
2 pounds green beans, trimmed
1 pound medium shallots
2 tablespoons butter
2 tablespoons olive oil
1/2 teaspoon fresh thyme, chopped
Salt & pepper, to taste

**Directions:**
Cook green beans in boiling, salted water until tender, about 6 minutes. Drain and plunge into a bowl of ice water to cool. Drain again.

Cut off and discard ends from the shallots. Cut shallots lengthwise in half and remove peel.

Melt butter with oil in a large skillet over medium-high heat. Add shallots and sauté for 1 minute. Reduce heat to medium-low; sauté until shallots are browned and tender, about 20 minutes. Sprinkle with thyme, salt and pepper.

Add cooked green beans to the shallots and stir over medium-high heat until heated through. Season to taste with additional salt and pepper. Serve warm.

**Stuffing**
1 12-oz package of cubed herb-seasoned stuffing
2 cups of fat-free, low-sodium chicken broth
1-1 1/2 cups applesauce
1 cup chopped celery
1 cup chopped onion
2 links of sweet turkey sausage

**Directions:**
Spray a pan with nonstick cooking spray. Sauté celery and onions 3-4 minutes. Remove from pan. Remove sausage from casing and sauté in same pan until cooked through and broken into small pieces. Gently mix bread, onion, celery and sausage in a casserole dish. Add apple sauce and broth and fold together. Bake at 350 degrees for 30 minutes. Cover for softer stuffing.

**Another healthy alternative:** Instead of sweet potato casserole, bake sweet potatoes and lightly drizzle with honey and cinnamon.

**Lessons from the Kitchen:**
Cancer-Fighting Kitchen - Cooking Demonstration

Join us as we gather around the table to laugh, learn and share ideas on food, health, and lifestyle. Our cooking demos are facilitated by a master’s-prepared registered dietitian who will discuss and demonstrate healthy cooking techniques, exploring how making simple changes in your kitchen can be the first step toward a healthy lifestyle. Topics change monthly, and groups are small, so register early so you won't miss out.

Registration is required, as space is limited. To register, please go to centrastate.com and click on Class and Events or call the Health Awareness Center, Monday-Friday, 8:30 a.m.-4 p.m. at 732-308-0570.

**Class Date:** Tuesday, December 10, 7-8:30 p.m.

**Location:** CentraState Medical Center, Star and Barry Tobias Ambulatory Campus, Health Awareness Center, Suite 100, 901 West Main Street, Freehold, NJ 07728

**Cost:** $10
It’s inevitable for virtually everyone—as we age, the tasks of everyday life become more and more difficult. We have a hard time remembering where we put things, wondering if we took our medication, getting in and out of the shower, cooking, cleaning the house, etc., and these complexities are usually exacerbated if we’re living alone. Some senior citizens can cope just fine doing these things on their own, but others, typically those with health problems, just find them too difficult to overcome without assistance.

Naturally, you want to be there for your parents and help them as much as you can, but sometimes that’s just not a possibility. You have your own life you lead, and the more care your parents need, the less equipped you’ll be to personally help them. If you do find yourself in this situation, it may be time to consider the option of placing your parent in an assisted living facility. It’s a difficult choice to make, and one that your parent might not readily accept, but it may be the right choice for everyone.

The following are some red flags that your parent shouldn’t be living on his or her own anymore.

**HAS YOUR PARENT:**
1. Experienced significant weight loss?
2. Let his or her grooming habits slide?
3. Isolated from friends and family?
4. Hidden bruises from falls or other household injuries?
5. Stopped paying bills?

But finding the right residential setting for your parent isn’t just about their quality of life, it’s also about the effect it will have on your life. The following are some signs that you may be ready for your parent to make the change to assisted living.

**BY TAKING CARE OF YOUR PARENT, HAVE YOU:**
1. Become sleep deprived?
2. Missed key duties or functions at work and/or home?
3. Found yourself struggling to pay bills as a result of spending money on your parent’s care?
4. Neglected your own health?
5. Felt concerned that your parent would not be able to properly respond to an emergency in their house?

Such a drastic change in lifestyle will undoubtedly be challenging and emotional for your whole family. The transition may not be easy, but sitting down with your parent and going over all of the reasons why he or she should move and showing them how their quality of life will improve will help them accept the change and the reasoning behind it, so you both can live your lives with more peace of mind.

For more information about CentraState’s senior services, visit www.centrastate.com/senior-services.

“With the upcoming holidays we are often visiting older relatives that we may have not seen for quite some time,” says Maria Ciminelli, MD, program director of the CentraState Family Medicine Residency Program. “During these visits it may become apparent that their physical and/or mental health has declined significantly, and it’s time to begin thinking about the resources offered through assisted living.”

**MAKING THE DECISION**

“An important factor to remember is that your parent isn’t likely to admit that they need to move into an assisted living facility when someone first suggests it,” Dr. Ciminelli says. “You and other key family members may come to that determination after careful discussion and observation of your parent’s state of living. One strategy that may help your parent realize that an assisted living facility would improve their quality of life and their overall safety is to actually involve your parent’s primary care doctor in the discussion.”
CentraState Briefs

The Manor Health and Rehabilitation Center Earns DOH Recognition

CentraState Healthcare System’s The Manor Health and Rehabilitation Center recently received the New Jersey Department of Health Advisory Standard of Care—a recognition of excellence and one of the top honors the state can bestow on a senior care facility. According to the Department of Health (DOH), licensing standards for New Jersey nursing homes include both mandatory standards, which facilities must meet, and advisory standards, which are standards of excellence that are optional and voluntary.

The Manor achieved compliance with advisory standards in the areas of:

- Access to care
- Resident activities
- Administration
- Resident assessment and care plan
- Communication
- Dental services
- Dietary services
- Nurse staffing
- Pharmacy
- Quality assessment and medical records

CentraState Earns Joint Commission Accreditation for Wound Program

The Central Jersey Wound Treatment Center at CentraState Medical Center has recently received The Joint Commission’s Disease-Specific Care Certification. CentraState earned the two-year certification by demonstrating compliance with the Commission’s national standards for health care quality and safety in wound care. The Central Jersey Wound Treatment Center at CentraState provides a multidisciplinary approach to the diagnosis and treatment of non-healing (chronic) wounds, using the most advanced technology and procedures, including hyperbaric therapy.

Joint Commission recognition was earned only after CentraState underwent a rigorous on-site review by the Commission’s expert surveyor and assessment of compliance with national standards of care, including program and clinical information management, optimization of care, and collection and analysis of performance data to drive future improvement activities. Achieving Joint Commission certification means that CentraState has demonstrated a commitment to the highest level of care for its patients, and is a major step toward maintaining excellence and continually improving the care it provides.