

Richmond University Medical Center Hosts Cancer Survivors Month Dedication Ceremony



Director of Radiation Oncology Marc Adams, MD, and radiologist Hoon Lee, MD, plant the celebratory bush for National Cancer Survivors Month.

On June 7 oncologists, medical staff, and senior leadership from RUMC joined several cancer survivors for a dedication ceremony at RUMC's Center for Cancer Care to celebrate June as National Cancer Survivors Month. To honor the courage and strength of cancer survivors and their families, a ceremonial bush was planted in front of the center, located at 1000 South Avenue.

"The purpose of National Cancer Survivors Month is to bring cancer survivors together to show that there is life after receiving a diagnosis of cancer," President and Chief Executive Officer Daniel J. Messina, PhD, FACHE, said. "When you hear the words 'you have cancer' the impact goes beyond the patient. It hits the family just as hard. That's why it is important to also celebrate families of cancer survivors as part of National Cancer Survivors Month — because it is as much about celebrating them as it is about celebrating the survivors themselves."

Nationally recognized as Cancer Survivors Month, June is an opportunity for all 16.9 million cancer survivors across the country to celebrate their milestones and recognize those who have supported them along the way. Throat cancer survivor Mary Malandrucca thanked many of the oncologists and staff at RUMC for helping her overcome her cancer.

"My battle was fought throughout the 2020 COVID-19 crisis, which made my victory that much sweeter," Malandrucca said. "I will forever be grateful to RUMC and to all the staff within the cancer center for their professionalism, their compassion, and their God-given talents that have enabled me to stand before all of you today as a survivor."

RUMC's Center for Cancer Care opened in 2018, providing a variety of medically-proven cancer treatments and therapies. Last year, the Center for Cancer Care earned three-year accreditation in positron emission tomography by the American College of Radiology for providing the highest level of image quality and patient safety. Just this past spring, RUMC's radiation oncology department also received first-time accreditation from the American College of Radiation Oncology in recognition of its exceptional standard of patient care.

Following the brief ceremony, RUMC leadership, cancer survivors, and guests helped plant a ceremonial bush outside the entrance. Joining them in the planting were Staten Island Deputy Borough President Ed Burke; Health Director for Staten Island Borough President James Oddo; Dr. Ginny Mantello; and Hanane Dbajat, chief of staff for Assembly Member Michael Tannousis.



Cancer survivor Mary Malandrucca was treated at the Center for Cancer Care.

From the President & CEO, Daniel J. Messina, PhD, FACHE



Let me start by congratulating everyone who helped our state reach the 70 percent vaccination threshold early last month. This includes everyone who rolled up their sleeves to get vaccinated and the many people who volunteered in our vaccination center to help immunize others. Together we have better protected our families and our community. As a result, we can return to many of the freedoms we enjoyed before COVID-19 arrived. This year, Independence Day should have a different importance for all of us...a day to also celebrate our independence from COVID-19! While COVID is by no means gone, it is in hasty retreat. The only way to make sure that it stays that way is to continue vaccinating family, friends, and colleagues. I continue to implore anyone who has yet to get vaccinated to do so

as quickly as possible. The alternative is not really an option at all.

It's hard to believe that if all continues to progress as planned, this time next year our new state-of-the-art emergency department will be open. I have seen many of you staring up at the steel structure rapidly taking shape before our very eyes — a structure that is very much in need, as evidenced by this past year. While positive COVID-19 cases continue to decline, our ED volume and trauma cases are increasing. The features of our new ED, from larger trauma bays to dedicated areas for pediatrics and urgent care, will no doubt be put into service immediately once the doors open next year. With each bolt that is put in place and each rivet hammered home, we are all one step closer to giving Staten Islanders one of the most modern and advanced emergency departments in New York City and providing our talented team of medical professionals new tools to provide life-saving care.

In the meantime, before our new ED opens, we have plenty of other improvements that will reach completion or be nearing completion. This includes our Co-Gen power plant which goes on-line this fall, additional new elevators going into operation by end of this year to keep our staff and visitors moving with improved reliability, and completion of our new Medical Intensive Care Unit (MICU) in early 2022. Richmond University Medical Center is on the move!

**Remember the Power of One —
You Make A Difference!**

Sincerely,

A handwritten signature in dark ink that reads "Daniel J. Messina".

Daniel J. Messina, PhD, FACHE
President and Chief Executive Officer

Patient Satisfaction: A Note of Thanks

Please accept my thanks for a job well done. I need to say thanks to Dr. Daniel J. Messina and the wonderful staff of RUMC. I have been living healthy and happily vaccinated with my two doses of Pfizer vaccine since January 14, 2021. The reason I delayed sending a thank you is because I continued to monitor myself thinking I better make sure this worked out so well for me, and it did! I had no adverse reaction or anything I could complain about and with all the hype around getting vaccinated, all I could do was recommend to others, "go to RUMC, call the vaccine line, leave your name, and they will call you back." I recommended it to everyone and still do; dispelling any hesitation, I reassured everyone who asked me, relaying my good experience there. I don't recall everyone on a first name basis, but the two medics who inoculated me were terrific and the nurses too. Please extend my appreciation in general to all who participated in my experience.

M.W.

Everyone working in the vaccination program has demonstrated the most professional care. The treatment I received has been respectful and the staff has shown kindness and the best medical care a person could hope for. Thank you so much!

M.A.

Very efficient system. The experience from check-in to paperwork and vaccine was literally "painless." The staff was friendly and attentive. Very pleased!

R.L.

I had surgery last week and received excellent care from the nursing staff. It really is one of the greatest hospitals in Staten Island. I was very happy. The hospital is more than excellent. The nursing staff is more than excellent and excellent work is done by the doctors. I am so happy. My special thanks to the nursing staff for the excellent care.

A.F.

Residents' Lounge Dedicated in Memory of Brittany Fidler, MD



Brittany Fidler, MD

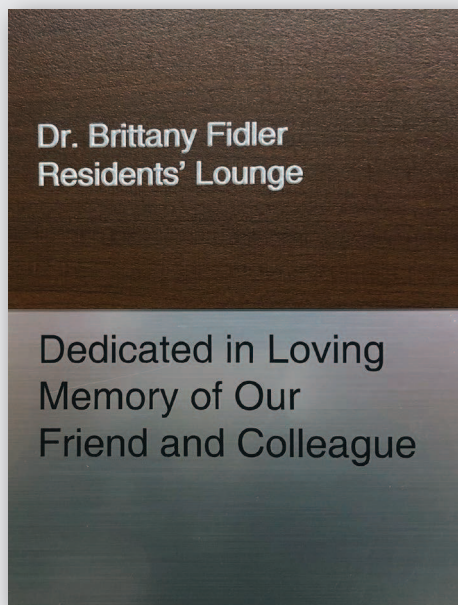


The family of Brittany Fidler, MD, with hospital leadership outside the Dr. Brittany Fidler residents' lounge.

On May 11, Richmond University Medical Center dedicated the main floor residents' lounge in memory of Brittany Fidler, MD, who passed away on March 15, 2021. She was 28 years old. The dedication ceremony was attended by Dr. Fidler's mother, two sisters, aunt, hospital administration, and staff from departments throughout RUMC.

"From all that I have seen and heard since her passing, it is clear that Brittany possessed the clinical abilities and professional character that would have propelled her to an outstanding career in the medical profession," President and Chief Executive Officer Daniel J. Messina, PhD, FACHE, said. "In the all too brief time she spent with us here, Brittany touched many lives, whether they were patients under her care or colleagues who worked side by side with her. So many people are grateful for having had the opportunity to know her."

Dr. Fidler was born in Florida, and attended American University of the Caribbean in Saint Maarten, graduating in August of 2019. Her first day at RUMC was July 1, 2020. A first-year resident in the department of Internal Medicine, Brittany expressed interest



in the field of Family Medicine.

Those sharing memories of Dr. Fidler included Chair of Medicine Philip Otterbeck, MD; Vice Chair of Medicine, Program Director of Internal Medicine, and Chief of Critical Care Jay Nfonoyim, MD; and several residents

who worked alongside Dr. Fidler.

Words of comfort were shared by Chief Operating Officer and Chief Nursing Officer Rosemarie Stazzone, RN, MS, NE-BC; Chief Administrative Officer and President of the Richmond Health Network Richard Salhany, MBA, FACHE; and Angela Kerr, who spoke on behalf of the Graduate Medical Education committee.

Before placing the dedication plaque that bears her daughter's name outside the residents' lounge, Dr. Fidler's mother, Michelle Medford, shared some of her memories and thanked everyone for caring for her daughter. Medford said that on the morning she received the call about her daughter's passing she was asked if there was any family in New York, to which she said there was none. All of Dr. Fidler's family members live in Florida.

"I was wrong, she did have family here in New York. All of you were her family," Medford said. "She was surrounded by her family at her passing. Thank you for being with her when we could not be."

RUMC's Speech Pathologists Restoring Hope to Those Challenged by Stuttering



Kristine Delgado, administrative director of rehabilitation

According to the National Institutes of Health, an estimated three million Americans speak with a “stutter,” a communication disorder that affects the flow of speech and can take a number of forms. “Dysfluencies that fall under the umbrella of stuttering include repetition of part of a word, prolongation (stretching out a sound for a long time), or a block, in which individuals have a hard time getting a word out at all,” shared Kristine Delgado, RUMC’s administrative director of rehabilitation.

Research reveals that stuttering can affect people of all ages but occurs most often in children between the ages of two and six as they are developing their language skills. The disorder is also two to three times more likely to occur in boys than girls. “Many children will outgrow or recover from stuttering, but data shows that children whose stuttering goes unaddressed by the age of three years or later may be more likely to stutter throughout their development, so early intervention is recommended,” said Victoria Stazzone, speech pathologist.

In terms of causes, “we look at family history, as children of stutterers are more likely to stutter, as well as the family dynamic and environment, because some children may be more likely to continue the dysfluency based on how their family responds to or addresses it,” Stazzone said. “For adults who stutter, the more stressed they become because of their stuttering, the more the stuttering can be exacerbated. Treatment for adults is about managing stress, knowing what to expect in different scenarios, and in some cases, preparing and practicing a script in situations that cause them stress.”

While there is no “cure-all” for stuttering, Delgado said that there are strategies and modifications that can help individuals manage it. “At the same time, a lot of what we do in therapy involves the entire family and how they deal with the dysfluency, as societal stigmas against people who stutter can affect their confidence and self-esteem,” she said. “So, we work with relatives, not just the patient, to ensure that they don’t make their child or family member more nervous or create a negative feeling around the stuttering.”

According to Stazzone, therapy for stuttering can be direct or indirect. “Indirect therapy focuses on making speech easier to implement, such as by slowing down,” she said. “This is particularly effective for pre-schoolers and can be done using a pacing board or by tapping to help them pace their speech.” By contrast, she said, “direct strategies focus on changing the way the stutterer speaks; for example, if they use a lot of extra words and go around things to avoid stuttering — a covert behavior called ‘circumventing’ — we might work with them to strategically take a breath, pause, or stop after so many words or after making a key point.”



“While young kids are more likely to get stuttering under control and/or grow out of it, it can become a learned way of speaking the longer it goes on uncorrected,” Stazzone said. “Children ages two to six with a speech dysfluency like a stutter would typically be seen by us twice a week for 30 minutes at a time, and the resultant therapy is customized to each individual’s strengths, weaknesses, and areas for improvement.” For older kids and adults, she said, “we work to target specific scenarios when stuttering increases and help make speech situations less stressful. A number of adult patients we treat for aphasia/stroke can also present with speech dysfluencies and are treated with the same type of strategies.”

“We encourage people to get an assessment and seek treatment if they or their child is having a problem,” Delgado added. “We require a prescription from a physician and the process is very straight-forward. If your child has a dysfluency and you’re not sure whether it’s normal for their age, we’ll do a standardized assessment using a specialized instrument to measure its scope and severity. There’s no stigma or downside to getting an evaluation,” she confirmed, “and it’s so much better to address it early than to worry about it and delay therapy.”

RUMC Embraces Robotics to Assist with Bedside Pain Management Consultations



Nurse Nina Kull and surgical resident Tharunjan Kailayanathan with the robot used for patient consultations.

As part of RUMC's palliative care program, a new pain management service has been created and is currently being utilized by Steven Erosa, DO, a board certified pain management specialist, enabling him to bring pain management consultations to the bedside.

"Working with the medical team at Richmond University Medical Center, the robot allows me to perform a bedside consultation to assist in caring for those patients in need of pain control," Dr. Erosa, said. "The physician has full access to the patient's electronic medical record as well as imaging studies through RUMC's secure network."

After consultation with the physician and resident, a member of the palliative care team delivers the robot to the patient unit and the resident coordinates the consultation through the robot. The service has been well received and is available for all services including medicine and surgery for post-operative consultations.

"The COVID-19 pandemic has forced us to approach patient care differently," Richard Salhany, MBA, FACHE, president of the Richmond Health Network and chief administrative officer, said. "We were successful with implementing tele-health medicine for the ambulatory network and to provide stroke consultations during the pandemic keeping patients connected to their provider. With regard to the pain management program, we are simply adapting the technology already in use for a different service."

ACS Accepts RUMC Abstracts for Quality and Safety Conference

The American College of Surgeons (ACS) has accepted six abstracts from Richmond University Medical Center, which will be featured at its Quality and Safety Conference this month.

"Richmond University Medical Center's best practices continue to be of the highest quality and worthy to share our experiences with others," Chief

Administrative Officer and President of the Richmond Health Network Richard Salhany, MBA, FACHE, said.

Department	Title	Authors
Oncology and Pathology	Use of Next-Generation Sequencing to Improve Outcomes in Non-Small Cell Lung Cancer	Brittany Taylor, MD; Amandeep Kaur, MD; Svetoslav Bardarov, MD; Nisha Lakhi, MD
Oncology and Pathology	Use of Next-Generation Sequencing to Improve Outcomes in Breast and Gynecologic Cancers	Brittany Taylor, MD; Svetoslav Bardarov, MD; Nisha Lakhi, MD
Palliative Care	Implementing a Formal Palliative Care Program to Improve Oncology Services	Richard J. Salhany, MBA, FACHE; Thomas Forlenza, MD; Alla Adla, AGNP-BC; Sarah Ganzer, LMSW; Stephen Erosa, DO
Trauma	Incorporation of a Pre-Trauma Committee Meeting and the Effect on Performance Improvement	Richard J. Salhany, MBA, FACHE; Daniel Genovese-Scullin, RN, MS
Trauma - Adult	Creation of a Geriatric Trauma Activation	Daniel Genovese-Scullin, RN, MS; Johnathon LeBaron, MD; Jean Gordon, RN, AVP
Trauma - Pediatric	Increasing-Sub-Specialty Commitment to in-house Patient Management	Daniel Genovese-Scullin, RN, MS; Amanda Brooks, RN

RUMC Offers Effective New Approach for Patients Battling Depression

One of the most concerning fallouts of the COVID-19 pandemic has been the rise in mental health disorders nationwide. According to a recent study by the Centers for Disease Control and Prevention (CDC), over 42 percent of Americans surveyed in December 2020 reported symptoms of anxiety or depression — a nearly four-fold increase from just 11 percent of Americans who reported feeling those symptoms between January and June 2019.

“The combination of pandemic-related restrictions, social isolation, loss of job/income, and fear and uncertainty over the virus have led to a spike in depression and anxiety,” confirmed Joel Idowu, MD, medical director of Outpatient Services and chairman of the Department of Psychiatry and Behavioral Sciences. “The pandemic has both exacerbated existing mental illness and driven new diagnoses of depression and anxiety, leading to more outreach for our mental health services than ever.”

According to Marlon Garcia, MD, attending psychiatrist at the Center for Integrative Behavioral Medicine, depression is usually treated in a number of ways. “For patients with mild to moderate depression who want to avoid medication, talk therapy alone can often help change their way of thinking,” he said. “If that fails, the next option is typically a combination of talk therapy plus antidepressant medication.”

While all antidepressants are FDA-approved and effective, Dr. Garcia noted that the variety of different options on the market each target, boost, and/or regulate different neurotransmitters in the brain and are selected to the benefit of each patient based on that individual’s unique manifestation of depression. Dr. Idowu noted that of the estimated 15 to 20 million Americans suffering from a form of depression at any given time, only about half of those people seek treatment. Of those, “research shows that 35 percent of patients who are properly treated will achieve remission and recover from depression, while a third will achieve some partial response and 30 percent will be ‘treatment resistant’ and still have symptoms,” he said. “For those individuals who are partially responsive or treatment resistant to antidepressants, ‘transcranial magnetic stimulation,’ or TMS, can be a very effective option,” Dr. Idowu said.

A Safe and Effective Therapy

“TMS is an innovative, non-invasive procedure that uses a magnetic field and a current to target and modulate neurotransmitter activity in the brain,” Dr. Garcia explained. “Because it’s able to go deeper into the brain than medication and stimulate blood flow to the part of the brain specifically involved in depression (the prefrontal cortex), TMS — a well-known therapy in the medical community that’s been successfully applied to the treatment of depression — can lead to the improvement of depressive symptoms.”

Performed using the hospital’s high-tech BrainsWay Deep TMS technology, “the process begins with an initial hour-long procedure, which requires the patient to sit in a chair and wear a helmet in order to enable us to take measurements, locate the target, and conduct initial mapping,” Dr. Garcia said. “Once

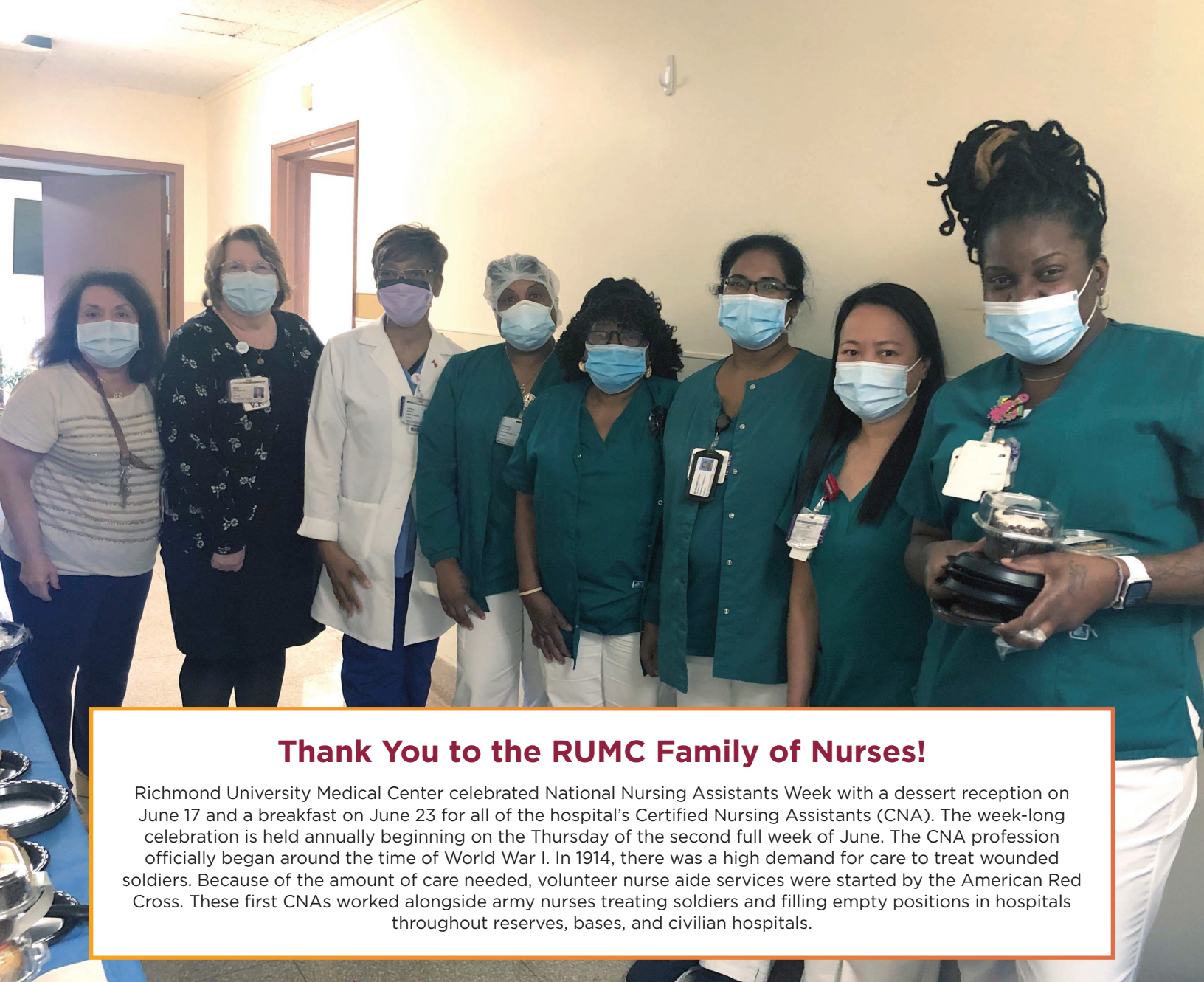
we find the target, we apply electromagnetic impulses and adjust the frequency to the patient. Patients may feel a tapping sensation in their head, at which point we’ll adjust the frequency based on their feedback, but the therapy has no serious side effects.”

“The process usually involves four to six weeks of daily sessions, each lasting 20 to 25 minutes after the initial set-up/mapping session,” added Dr. Idowu, “and research shows that 50 to 60 percent of patients who were partially or non-responsive to antidepressants will see a marked improvement in their symptoms following TMS therapy. It can help them achieve recovery/remission.”

Full FDA clearance for the use of TMS in the treatment of depression was granted in 2008 and Richmond University Medical Center invested in the technology in 2019, according to Dr. Idowu. “As a leading provider of behavioral health services on Staten Island, Richmond University Medical Center was committed to expanding our continuum of services with this important and effective technology, which has benefitted a number of our patients greatly over the past two years,” Dr. Idowu said. “We’re the only hospital setting offering TMS on Staten Island and we provide it in a comfortable environment at our Center for Integrative Behavioral Medicine.”



Transcranial Magnetic Stimulation (TMS), available at RUMC's Center for Integrative Behavioral Medicine, is proving to be an effective option to combat depression.



Thank You to the RUMC Family of Nurses!

Richmond University Medical Center celebrated National Nursing Assistants Week with a dessert reception on June 17 and a breakfast on June 23 for all of the hospital's Certified Nursing Assistants (CNA). The week-long celebration is held annually beginning on the Thursday of the second full week of June. The CNA profession officially began around the time of World War I. In 1914, there was a high demand for care to treat wounded soldiers. Because of the amount of care needed, volunteer nurse aide services were started by the American Red Cross. These first CNAs worked alongside army nurses treating soldiers and filling empty positions in hospitals throughout reserves, bases, and civilian hospitals.

New Hires — Welcome to RUMC!

Samuel Alfonso *Building, Service Worker*
 Arlene Bajxac, *Unit Clerk*
 R. Leonard Balgobin, *Director*
 Manuel Barreto, *Food Service Worker*
 William Bavaro, *Food Service Worker*
 RoseMary Beckley, *RN*
 Natalia Bishop, *Switchboard Operator*
 Nicholas Bray, *Security Guard*
 Lisa Breidenbach, *Office Manager*
 Vildana Cafi, *Building Service Worker*
 Melissa Cerio, *Unit Assistant*
 Madelyn Collins, *Nursing Assistant*
 Inemesit Femi Adegbulu, *Nursing Assistant*
 Tara Harrington, *Asst Director of Nursing*

Linda Iacobelli, *Education Specialist*
 Alyssa Internicola, *RN*
 Aicha Kaba, *Nursing Assistant*
 Shannon Kelly, *Switchboard Operator*
 Roland Ladia, *Nursing Assistant*
 Ashley Lane, *RN*
 Giacomo Lucchetti, *LCSW*
 Sierra Martinez, *Nursing Assistant*
 Jennifer Mendizza, *RN*
 Olamide Odaranile, *RN*
 Nmaobi Ogbonnaya, *Community Health Worker*
 Maria Paez Velez, *Registrar*
 Alex Pedersen, *Food Service Worker*
 Jasmin Philip, *RN*

Lynette Ramos-Melendez, *RN*
 Terry Reid, *Nursing Assistant*
 Martina Saad, *Intern*
 Dana Scotto, *LMSW*
 Richard Smith, *Admin Director*
 Stephen Sottile, *Security Guard*
 Suriya Suriyarachchi, *Food Service Worker*
 Besim Tahiri, *Building Service Worker*
 Oksana Tychanicz, *Clinical Lab Tech*
 Sharifah Valentin, *Administrative Assistant*
 Ariana Volodarsky, *RN*
 Brianna Wallace, *RN*



SAVE THE DATE

MONDAY
SEPTEMBER 27, 2021
AT THE RICHMOND COUNTY COUNTRY CLUB

JACK SIPP
GOLF, TENNIS
AND
BOCCE OUTING

*To benefit
Richmond University
Medical Center*

Register at
www.rumcsi.org/golf