

## She's a nurse. He's an EMT. This is a story about how 2 S.I. ER workers found love in a pandemic.



*Robert Manning and Jesin Samuel got engaged on Jan. 15.*

"He looked me in the eyes and we could just tell we were both smiling behind the mask," Jesin Samuel, a nurse at Richmond University Medical Center (RUMC), said of the moment she saw Robert Manning while working that day.

The duo, who both work at RUMC, met during the height of the pandemic in 2020 and began dating shortly after. Last month, on January 15, Manning proposed to Samuel. "January 15 is one day after my birthday," Samuel said. "It was like it was meant to be."

In October 2020, Samuel was working in the psychiatric emergency department when Manning, an EMT, brought in a patient. While triaging the patient, they took notice of each other. "I had to take her signature and I just remember we both looked each other in the eyes," Manning said.

While both said they did not expect to get into a relationship, especially during the pandemic, they added that the times they worked together brought them closer.

"We got through the pandemic together," Samuel said. "We got COVID together and took care of each other."

Samuel mentioned that they had already crossed paths in 2015 on an emergency call, but only had a brief interaction and did not think much of it. "It took us another five years to meet again," she said with a laugh.

Speaking about the night of the proposal, at Violette's Cellar in Grant City, Samuel said she was pleasantly surprised to see family there. She said the waiters brought the dessert out and the ring was in the center of the tray.

"He got down on one knee, held my hand and said, 'I want to spend the rest of my life with you,'" Samuel recalls. The newly engaged couple plans a September wedding.

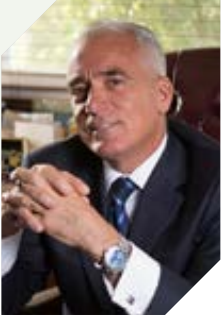
"They obviously look very happy together. I wish a world of health and happiness to the both of them," said William Amaniera, Assistant Vice President of Emergency Medical Service and Security at RUMC. "You know, 20 years ago, I met my wife at RUMC, and we're still going strong," he added.

The newly engaged couple have both worked at RUMC for seven years. They were also both born at RUMC and Samuel's parents worked at the hospital for 25 years before retiring. "I want to keep that legacy going," she said. "This place is like a second home."

*—Reprinted from the Staten Island Advance*



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



We will be hosting our 2nd annual Arnold Obey 5K Run/Walk/Bike event on Saturday, April 9, at Clove Lakes Park. I encourage everyone to take part. Proceeds from this year's event will benefit our Neonatal Intensive Care Unit (NICU), including the purchase of new heart and blood pressure monitors, sterilization units, and additional state-of-the-art warming stations that not only provide heat to infant patients, but also

oxygen and resuscitation therapy, body weight tracking, and heart rate and breathing level measurements.

The annual event is named in honor of long-time educator and pillar in the Staten Island's sports community, Arnold Obey. Obey, who passed away in 2020, had a standout basketball career at Wagner College where he was a player and eventual assistant coach. An avid runner, Obey ran track as a student first at DeWitt Clinton High School and then at Wagner College. His running career as an adult included nearly four decades of participating in the New York City Marathon, a race he ran 38 consecutive times.

The run/walk/bike event will begin at 9 AM in front of the New York City Parks Department's Staten Island headquarters adjacent to Clove Road. Registration is open now at [www.rumcsi.org/5K](http://www.rumcsi.org/5K). Race day registration begins at 8 AM. Contests for a free catered lunch at Royal Crown will be awarded for departments who register the most participants, have the best team name, and have the best team costume. Additional prizes such as

windbreakers and a Garmin watch will be awarded for individual support raised for the event. For more information, contact Gina Ferreri at extension 82106.

I am also excited to announce that plans for our new Emergency Department opening are beginning to take shape. The most recent date for construction to be complete is July/August. We are in the planning process for festivities and an official ribbon cutting that I personally invite each of you to attend with your families. You will have an opportunity to tour our new ED, which is more than double the size of our current emergency department. You will see all of its new features including expanded emergency trauma unit and triage sections; enhanced specialty areas for pediatrics and urgent care; new Sexual Assault Nurse Examiner (SAFE) suites to ensure privacy and protection; larger ambulance bays; and a patient friendly drop-off area with easier front entrance access. More will be shared in the coming weeks about our new ED, as well as our upgraded MICU, renovated Mother/Baby Unit, and start-up of our Co-Gen power plant. Thank you for being part of this historic time in our history!

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

Sincerely,

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

## Patient Satisfaction: A Note of Thanks

Dear Misses Orleman and Morrison,

My wife and I—and child—were guests at RUMC for a few nights over MLK Jr. weekend and I wanted to share with you what an exceptional and extraordinary experience we had. Every individual with whom we interacted was kind, patient, attentive, caring and knowledgeable—from Labor & Delivery, to the nurses in the Mother Baby Unit, to the folks responsible for meals and tidying the rooms. Knowledge of one's craft is critical to success in any field, but the hallmark of a true professional is putting the client first. Erica (OR), Lori, Pat, Deniz, Karen (maternity), Ana (lactation), Cathy (meals), Dr. K and countless others whose names I did not get, exemplified this. Not only did they care for us, but they patiently imparted their knowledge of what must seem to them routine tasks—one reassuring encounter after another for two very new and intimidated parents. I am in awe of your staff. You are lucky to have them. Baby Charlie, Caroline and I certainly feel lucky to have been in their care.

Best regards,

— Joseph P. Cardillo

Dear Arlene,

I want you to know that my journey to recovery would have been incomplete without seeing your smiles every day. It would have been impossible to remain positive had you not given me hope through these tough times. Thank you, not just for being the best nurse in the world, but for being the sunshine in my life. Thank you!

Sincerely,

— Yenny Gomez

To the Amazing Labor and Delivery Staff,

Thank you so much for taking such amazing care of me and let's not forget saving me. You are all a part of this wild birth story for me and will always hold a special place in my heart. Hopefully the next time I have a baby it's not this dramatic...LOL!

Love,

— Stephanie Marazzo



## RUMC Joins in Celebrating 100 Year Anniversary of ACS's Commission on Cancer

The RUMC Oncology Department, led by Victoria Forte, MD, Cancer Service Line Director, Director of Hematology-Oncology, and Program Director, Hematology-Oncology Fellowship Program, was pleased to receive a commemorative plaque recognizing the 100 year anniversary of the American College of Surgeons' Commission on Cancer.

Since its inception, the Commission on Cancer has been providing oversight of the advancement of cancer care nationwide with focus on quality, research, and standard protocols. The Commission on Cancer has accredited RUMC's oncology program for over 80 consecutive years, making it the longest consecutively accredited care program on Staten Island.

"It is indeed wonderful that the Commission works with hospitals and providers on excellence in cancer care," Dr. Forte said. "RUMC has been a part of their network for over 80 years receiving both accreditation and accolades for our accomplishments."

Debbie Rodriguez, Associate Director of Oncology, said, "Our entire program is based on the hundreds of standards provided by the Commission. We have been able to make tremendous strides in all aspects of cancer care, including our new palliative care and pain management services."



(l-r): Richard Salhany, MBA, FACHE, President of Richmond Health Network and Chief Administrative Officer; Victoria Forte, MD; and Debbie Rodriguez, CTR.

## Employee of the Month

Congratulations to our Employees of the Month for February:



Thomas Wilson, RN, Cardiovascular Department



Michael Pellington, Security

## The Quality and Patient Safety “Q Corner”

From Joan Gleason Scott, PhD, RN, NEA-BC, CPHQ, CPPS  
Vice President Quality, Infection Prevention, Patient Experience, Language Services



Joan Scott Gleason

Some colleagues who have celebrated Nurses' Week with me know that every year, I read “Nursing as Metaphor”, a 1983 editorial from the *New England Journal of Medicine*, co-authored by Claire Fagin and Donna Diers. I read it, in memory of Donna, a former dean at the Yale University School of Nursing. She and I worked together there many years after she wrote that essay. She became a beloved mentor of mine. I have fond memories of a conversation we had about that essay and I smile because I remember when I told her many years after she wrote the article, how much I liked it. She just smiled and then in her own unique way, offered some advice. A few days later, I received a copy of her book in the mail. She told me, “Next year, perhaps you should change it up!” But this time... No. I continue to read *Nursing as Metaphor*.

I remain steadfast, especially throughout these years of the pandemic, as I quote, “nurses are tough, canny, powerful, autonomous, and heroic.” Thank you, Donna! Thank you, my nursing colleagues and friends! I have had the privilege of serving as a vaccinator at local community clinics. Every day I worked there, I had the opportunity to serve nurses and other health care colleagues. With each vaccine, I hoped that I was giving them a dose of strength and resilience to care for others, and to allow themselves to be cared for by others. I administered each vaccination with respect, humility, and gratitude. I believe that Nursing is a Metaphor for Life.

## New therapy at RUMC to treat depression shows promise



Marlon Garcia, MD

Depression is a leading cause of disability in the world. While treatments for depression are not always effective, a particular type of therapy is seeming to make a difference.

Transcranial Magnetic Stimulation, or TMS, may sound daunting, but it is actually an FDA-approved, noninvasive treatment used to relieve symptoms of depression. The therapy is a brain stimulation treatment using the same technology as MRIs, utilizing a targeted magnetic field that sends pulses to neurons in the parts of the brain affected by depression.

According to Marlon Garcia, MD, attending psychiatrist at Richmond University Medical Center, TMS is a good option for patients not responding to medications used for depression, or for patients who do not want or cannot undergo electro-convulsive therapy, another type of depression treatment.

“The initial appointment takes about an hour, during which time we evaluate how much intensity we give to deliver the magnetic pulse,” he said. “After that, it’s an everyday procedure that, takes about 25 minutes, five days a week for four to six weeks.”

Dr. Garcia noted that no anesthesia is involved during treatment, so patients can drive or work after the procedure. The team at RUMC has seen success with this treatment, with over 80 percent of patients responding well.

*TMS is a non-invasive method of depression treatment that relies on electromagnetic induction using an insulated coil placed over the scalp.*





# Chief of cardiovascular discusses the value of stress tests in diagnosing coronary artery disease



Francesco Rotatori, MD, FACC, and Chief of Cardiovascular

Data from the CDC reveals that heart disease is historically the leading cause of death in the U.S., with the disease claiming the lives of over 600,000 Americans each year. Coronary artery disease — caused by plaque buildup in the wall of the arteries that supply blood to the heart, causing them to narrow and limit blood flow to the heart — is the most common type of heart disease, affecting over 18 million adults and proving fatal for more than 350,000 annually.

The good news? Routine screening involving any of a number of minimally-invasive stress tests can help diagnose coronary artery disease and help prevent the condition from progressing.

According to RUMC Chief of Cardiovascular Francesco Rotatori, MD, FACC, “the heart is a muscle that needs blood supply to work. Three coronary arteries provide blood to the heart muscle, but the heart will suffer and pain will result if one or more of those arteries is blocked.”

One of the most common symptoms of coronary artery disease is chest pain upon exertion, “although sometimes people don’t have typical chest pain—they can also experience anything from gastric

pain (located a bit above the navel) to pain in their neck, jaw, back, shoulder, or arm,” Dr. Rotatori said. “Wherever they experience pain, however, the red flag is that they feel it upon exertion—such as every time they take the stairs, etc. This happens because if blood flow to the heart through the coronary arteries is blocked, it reduces the heart’s oxygen supply. The more you exert yourself, the more you need oxygen and the only way to increase oxygen to the heart is through increased blood flow,” he said. “A blockage in one or more coronary arteries will impair physiological response and result in pain.”

Cardiovascular stress tests simply try to recreate the conditions that cause an individual pain, Dr. Rotatori explained. “Often performed by walking on a treadmill or biking on a stationary bike, they’re conducted in a controlled setting under the watchful eye of a physician and may also involve other imaging of the heart.”

*“Stress tests are important because they can help detect a problem before it causes permanent damage to the heart. Some people are at higher risk of heart disease and not feeling it—including diabetics, smokers, individuals who are obese/sedentary, and others.”*

*— Dr. Rotatori*

He noted that stress tests used to help diagnose coronary artery disease are divided into the categories of “exercise” or “pharmacological” based on whether the patient can exercise on a treadmill or not.

“For those who can exercise, patients walk on a treadmill while connected to an electrocardiogram (EKG), which records the heart’s electrical activity,” Dr. Rotatori said. Based on multiple factors (including age, other medical conditions, baseline EKG results, etc.), the doctor might add another imaging modality to the EKG. Examples include nuclear stress tests, which involve the injection of a radioactive tracer that binds to the heart based on blood supply and lights up in proportion to the level of blood supply in and around

the heart, enabling visibility to areas of blockage, or in a stress echocardiogram, where “at the peak of exercise, we’ll take the patient off of the treadmill and do a sonogram of their heart to see how the walls are moving,” he said. “The heart muscle won’t work properly if there’s not enough blood supply present.”

“In the event that a patient can’t exercise, we’ll employ the use of a pharmacological stress test, through which we administer IV medication that simulates the effect of exercise on the heart and then identify issues through the use of a radioactive tracer,” Dr. Rotatori said. “In this case, nuclear or echocardiogram imaging modalities are added as necessary.”

Conducted in an office setting, Dr. Rotatori said that all stress tests aim to have patients exercise to the point of reaching 85 percent of their maximum heart rate, which can take anywhere from 3 to 15 minutes depending on the patient. “This used to be a half-day procedure involving images, rest periods, etc., but this can now all be done within an hour,” he said of the simplicity and convenience of the process, which can help identify blockages, cholesterol build-up, scar tissue, and more.

“It’s very difficult to fix a problem once it’s happened, so the main goal is prevention,” Dr. Rotatori explained. “Stress tests are important because they can help detect a problem before it causes permanent damage to the heart. Some people are at higher risk of heart disease and not feeling it—including diabetics, smokers, individuals who are obese/sedentary, or those with high cholesterol, high blood pressure, and/or a strong family history of heart disease among first-order relatives—and they must be very vigilant when it comes to preventative screening.”

“Richmond University Medical Center offers all stress test modalities, and compared to years ago, we have a lot of effective tools available to treat blockages in the arteries—from medication to minimally-invasive interventions, surgery, etc.—as well as an experienced team of providers here to help as long as individuals start the process of screening,” Dr. Rotatori said. “Early detection of coronary artery disease can greatly enhance quality of life and lifespan and can be life-changing, especially for those individuals at high risk.”

## Senate Majority Leader Schumer Visits RUMC, Announces Intensified Fight to Cap Rising Cost of Insulin



*Philip Otterbeck, MD, discusses the impact the high cost of insulin is having on diabetic patients alongside US Senate Majority Leader Charles E. Schumer.*

United States Senate Majority Leader Charles E. Schumer visited Richmond University Medical Center on February 24

and announced his intentions to intensify his fight to cap the rising cost of insulin, which is forcing many diabetes to ration their supply of the drug at the risk of their own health. Schumer said he will call for a Senate vote to get the cost down from \$200-\$600 per vial to a cap of \$35. Schumer said that the price of insulin has been rising rapidly for years, with an average increase of 15 to 17% per year since 2012. Schumer further said that 1 in 4 Americans now ration the drug, which is potentially life threatening.

The Senator was joined by RUMC Chair of Medicine and Chief of Endocrinology, Philip Otterbeck, MD, who spoke about the impact the cost of insulin has had on his diabetic patients. "For patients with Type 1

diabetes, daily insulin is indeed life-sustaining. For those with Type 2 diabetes, the absence of required insulin will lead to major medical problems: cardiac disease, stroke, loss of toes and limbs, nerve damage and pain, kidney failure and dialysis, and visual loss/blindness. Additionally, what we've seen over the past two years is that COVID and diabetes together can be a dangerous combination, especially if diabetes is uncontrolled."

Salvatore Turchio, a retired college administrator who is diabetic, joined Sen. Schumer and Dr. Otterbeck. He talked about how the high cost of insulin has made him ration his insulin supply so he can manage his other day-to-day expenses including rent, utilities, and food.

## Bringing essential resources to the residents of Staten Island through Project LAUNCH

Richmond University Medical Center (RUMC) is expanding its comprehensive mental health services with Project LAUNCH (Linking Actions for Unmet Needs in Children's Health).

Project LAUNCH, which provides services to children up to age eight, their parents, or expectant mothers on Staten Island, is funded by the competitive five-year SAMHSA grant, awarded to RUMC in 2019. Project LAUNCH aims to improve health and wellness outcomes for children, allowing them to thrive in school and in life.

According to Project LAUNCH Program Supervisor Danielle Bartolome, the project uses a holistic framework, addressing health and mental health concerns via service screening, prevention, and delivery, as well as promotion of

early childhood mental health education through public awareness campaigns.

"Project LAUNCH also builds parent capacity by providing parenting workshops and assisting with social determinant of health needs," Bartolome said. "The project is working to improve coordination of service across child serving systems through referral pathway creation and hosting provider meetings."

The Project LAUNCH team currently consists of two community health workers, two behavioral health therapists, and one family nurse practitioner. The therapists have specialized training to provide the highest standard of care, including trauma-focused cognitive behavioral therapy and early childhood diagnostic assessments.

To date, Project LAUNCH has enrolled more than 450 individuals, children and caregivers, and has surpassed many of its annual target goals. It has provided these families with referrals to mental health treatment, supportive services, food pantries and any other referrals they may need.

"RUMC provides a complete continuum of integrated behavioral health services for both adults and children," said Joanne Pietro, RN, Assistant Vice President of Behavioral Health Services. "We are progressive in our treatment programs and treat not just the patient, but the family system."



*This iteration of Project LAUNCH differs from others, as it utilizes a mobile van to deliver clinical and non-clinical services in the community.*





## New Hires — Welcome to RUMC!

Maria Alameda — *EMT*

Brittany Baird — *Nursing Assistant*

Celina Beach — *RN*

Olivia Daniel — *RN*

Carri DeBlasi — *RN*

Alexus Donaldson — *Guest Rep*

Panagiota Fiorella — *RN*

Samantha Frinklestein — *Extern*

Justina Gibbs — *LMHC*

Elizabeth Gonzalez — *Lab Tech*

Karina Gonzalez-Ruiz — *Building Service Worker*

Tara Gore — *Staff Psychologist*

Zia Halidu — *RN*

Candace Hevia — *RN*

Tyler Jean-Mary — *Registrar*

Jithu Job — *RN*

Aleksey Kaplunovskiy — *Paramedic*

Joe King — *Building Service Worker*

Tetyana Koulikova — *PA*

Nurje Kraja — *Guest Rep*

James Laub — *Paramedic*

Christina Lavoro — *RN*

Cynthia Lucio — *Clerical*

William Marchese — *EMT*

Jamel McGinnis — *Security Guard*

Ronald Miller — *Asst Project Manager*

AnnaMarie Nardone — *RN*

Qudus Olorunfemi — *Security Guard*

Tiffany Otto — *RN*

Samer Owda — *Extern*

Nikki Pannone — *Supervisor*

Stephanie Parish — *Program Supervisor*

Kurt Paul-Bazil — *RN*

Victoria Pritsker — *Legal File Clerk*

Adrienne Renda — *Social Worker*

Giovanna Ruggiero — *RN*

Neven Saad — *Food Service Worker*

Omar Salim — *Respiratory Therapist*

Emmanuel Santos — *Food Service Worker*

Jalissa Sheppard — *Admitting Clerk*

Jamarr Smith — *MHT*

Tess Studholme — *Paramedic*

Michael Tate — *Administrative Assistant*

Dorottya Tauer — *RN*

Dominique Washington — *Guest Rep*

## March Observances

Please join us in acknowledging the following health-related observances for the month of March:

### Month-Long

Alport Syndrome Awareness Month  
American Diabetes Alert Month  
Bleeding Disorders Awareness Month  
Brain Injury Awareness Month  
Colic Awareness Month  
Deep Vein Thrombosis (DVT) Awareness Month  
Hemophilia Month  
Kidney Month  
Malignant Hyperthermia Awareness and Training Month  
Mental Retardation Awareness Month  
National Breast Implant Awareness Month  
National Cerebral Palsy Awareness Month  
National Chronic Fatigue Syndrome Awareness Month  
National Colorectal Cancer Awareness Month  
National Developmental Disabilities Awareness Month  
National Endometriosis Awareness Month  
National Essential Tremor Awareness Month  
National Eye Donor Month  
National Kidney Month

National Multiple Sclerosis Education and Awareness Month  
National Nutrition Month  
National Poison Prevention Awareness Month  
National Professional Social Worker's Month  
Rosacea Awareness Month  
Save Your Vision Month  
Trisomy Awareness Month  
Vascular Anomalies Awareness Month  
Workplace Eye Health and Safety Awareness Month

### Week-Long Observances

National Aplastic Anemia & MDS Awareness Week: March 1 to 6  
Hearing Awareness Week: March 1 to 7  
Endometriosis Awareness Week: March 3 to 9  
National Glaucoma Awareness Week: March 6 to 12  
Save Your Vision Week: March 6 to 12  
Pediatric Nurse Practitioner Week: March 13 to 18  
Patient Safety Awareness Week: March 13 to 19  
MS Awareness Week: March 13 to 19  
National Sleep Awareness Week: March 13 to 19  
National Pulmonary Rehabilitation Week: March 13 to 19  
World Glaucoma Week: March 13 to 19  
International Brain Awareness Week: March 14 to 20  
National Inhalants and Poisons Awareness Week: March 20 to 26

International Phace Syndrome Awareness Week: March 20 to 26  
National LGBTQ Health Awareness Week: March 21 to 25  
National Physicians Week: March 25 to 31

### Recognition Days

Endometriosis Awareness Day: March 1  
Self-Injury Awareness Day: March 1  
World Teen Mental Wellness Day: March 2  
International Ear Care Day: March 3  
National Hospitalist Day: March 3  
World Birth Defects Day: March 3  
World Hearing Day: March 4  
National Multiple Personality Day: March 5  
Registered Dietitian Day: March 9  
National Women and Girls HIV/AIDS Awareness Day: March 10  
World Kidney Day: March 10  
Intrauterine Growth Restriction Awareness Day: March 13  
World Down Syndrome Day: March 21  
American Diabetes Association Alert Day: March 22  
World Tuberculosis Day: March 24  
National Cerebral Palsy Day: March 25  
Endometriosis Day: March 26  
National Doctors Day: March 30



COMMEMORATIVE  
T-SHIRT FOR ALL  
REGISTERED PARTICIPANTS

ARNOLD OBEY/RUMC

# 5K RUN BIKE OR WALK

**SATURDAY, APRIL 9, 2022**  
Registration begins at 8am with the race beginning at 9am

Clove Lakes Park, 1150 Clove Rd. Staten Island, NY 10301

**Arnold Obey**, a long-time educator and a pillar in Staten Island's sports community. Obey's resume included a career in education; a basketball career that ranged from a Wagner College Hall of Fame player to a coach and referee; and an avid road-racing tenure that included nearly four decades running in the New York City Marathon.

REGISTER, SPONSOR, AND DONATE AT:  
**WWW.RUMCSI.ORG/5K**

**EARLY BIRD  
REDUCED RATE  
REGISTRATION  
ENDS MARCH 1**

## PROCEEDS WILL SUPPORT RICHMOND UNIVERSITY MEDICAL CENTER'S NEONATAL INTENSIVE CARE UNIT (NICU)

RUMC's Neonatal Intensive Care Unit (NICU) is a 25-bed Level III intensive care facility. The unit specializes in the care of high-risk newborns, accommodating neonates as

little as one pound. The NICU's survival rate stands at over 99%, one of the highest survival rates in the nation. Proceeds from this event will help purchase lifesaving equipment for use in the NICU.

355 BARD AVENUE  
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**Richmond University  
Medical Center**

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