There are *moments in time* when the human connection 
touches us most.

A life event – whether expected 
or unexpected – *affects us all.*
The medical community of nearly 10,000 individuals makes a conscious decision to renew a commitment to providing exceptional patient-centered care each time they walk through the doors of Hackensack University Medical Center (HUMC). It’s a calling. It’s a personal choice. They do it for all the people who choose HUMC for their care. They do it to make a difference in the lives of others. They do it for people like Jason Kendall Ray.

Jason Kendall Ray, (October 7, 1985 – March 26, 2007), has profoundly touched the hearts and the lives of all who knew and loved him as well as those who have come to know him through his legacy. His heart is reverberating nationwide and it all began with a decision.

Jason Ray made many decisions in his lifetime. He chose to be involved in his church and to go on mission trips to Haiti and Honduras. He chose to be an eagle scout, to major in business and minor in religious studies at the University of North Carolina (UNC) in Chapel Hill. At the age of 19, he chose to be an organ donor. He chose to tryout for the Rameses mascot supporting the UNC’s Tar Heels basketball team, nailed it, and wore the yellow-horned mask for three seasons. He chose to be a member of the Nine PM Traffic band. And Jason chose to live his life the very best he could.

March of 2007 was an exciting time for the Tar Heels. The team traveled to New Jersey to compete against Southern California in the NCAA® March Madness Men’s Division I Basketball Tournament scheduled for Friday, March 23, at the Meadowlands. The UNC team and its entourage stayed in a Fort Lee hotel on Route 4. It was the day of the big game when Jason ventured outside the hotel to get a bite to eat and was involved in a pedestrian/vehicle accident that brought him to the HUMC emergency room.

Sanjeev Kaul, M.D., co-chief of the Trauma/Critical Care and Injury Prevention Section of Emergency
Medicine, took Jason through the doors. “Jason had injuries inside his brain and his chest; he was bleeding from his nose. He had a fractured skull and a large cut in his scalp. A lot of work was done on him in the emergency room,” said Dr. Kaul. “It was quite devastating. We knew that the odds were against him and it wasn’t going to be a good prognosis, but we didn’t know to what degree. When he arrived, he had some brain function. Brain injuries are unpredictable, but there’s always a chance there’s hope.”

Jason’s parents who reside in North Carolina needed to be contacted. “I was the person that spoke to Jason’s father (Emmitt Ray). I made the call from the emergency room,” said Dr. Kaul. “It was quite devastating. We knew that the odds were against him and it wasn’t going to be a good prognosis, but we didn’t know to what degree. When he arrived, he had some brain function. Brain injuries are unpredictable, but there’s always a chance there’s hope.”

Surreal turned into reality as the Rays faced every parent’s worst nightmare – no one could possibly prepare them for seeing their boy, so full of life when he left home, hooked up to all sorts of machines in the Surgical Intensive Care Unit (SICU) nearing the end of his life. “I remember walking through the double doors,” said his mother, Charlotte. “It was a night I will never forget.”

As medical professionals and the Ray family focused on doing everything possible for Jason, the Tar Heels went to the Meadowlands for the game. Lisa said, “Dr. Kaul, we need to put the game on for Jason. It was a day he looked forward to. We turned his television on and placed the control next to his ear so he could hear the game.”

“I met Mr. and Mrs. Ray in the SICU as soon as they arrived and we sat and talked. I was very involved with the family,” said Dr. Kaul. “It was such tragedy. The circumstances in which it could occur were terrible. Jason was from another state – a guest in New Jersey. It must have felt so awful for his parents to have this happen so far away from home. Everyone at the medical center did whatever they could to make the Rays feel at home.”

March Madness took on a whole different meaning as the media reported Jason’s plight. Family, friends,
the UNC community, and well-wishers across the nation prayed for a miracle. “Even I wanted a miracle. I believe in miracles. I have seen them happen. I know they happen,” said Dr. Kaul. “You just never know which one is going to be the miracle.”

Thirty of Jason’s friends caravanned from North Carolina to be with him. “We were so concerned about what the hospital would do with so many people coming to see Jason,” said Charlotte. “The hospital went above and beyond the call of duty. Everyone was so wonderful to us. They arranged for a waiting area and provided pillows and toothbrushes.” Jason’s friends took turns sleeping and visiting with him around the clock.

Pillows weren’t the only way to rest weary heads. MaryAnn Donohue, Ph.D., administrative director of Nursing Professional Services and Clinical Affairs, arranged for a grievance counselor to be available at one in the morning for all the UNC visitors who were already at the medical center and for those who arrived after the NCAA game.

While UNC won the game, Jason’s prognosis diminished.

On Sunday, March 25, “it became clear that Jason’s injuries were not going to be survivable,” said Dr. Kaul. “We arranged for a family meeting.” The Rays met with neurosurgeon Roy Vingan, M.D., neurologist John Noigueira, M.D., and Dr. Kaul and were given distressing news.

“There was nothing we could do for Jason. For all intents and purposes, it was a devastating, fatal injury when he arrived. We focused on comforting the family members at a time that is beyond description as far as grief is concerned,” said Dr. Vingan. “We conveyed to the Rays that their son didn’t suffer any additional pain due to the comatose state he was in. We tried to take away any additional negative images that they might have regarding what their son would suffer after he was hurt. We wanted to give them peace of mind.”

Jason’s decision to be an organ donor was about to come to fruition.

Stephanie Falbo, RN, a transplant nurse with the NJ Sharing Network and coordinator for HUMC’s Organ Transplantation, approached Charlotte and Emmitt Ray to discuss Jason’s wishes and the organ donation process. It was incomprehensible – everything happening so quickly. Losing their boy and procuring his organs. “Emmitt kept saying he wanted to take Jason home,” said Stephanie.

On Monday, March 26, at 8:38 a.m., Jason Kendall Ray was pronounced brain dead.

Jason’s organs needed to be kept alive. “I took care of him the day he was pronounced brain dead – from 7:30 a.m. until 8:30 p.m. – 13.5 hours. My role was to help the NJ Sharing Network in preparing him for his organs to be recovered,” said Lauren Manser, RN, SICU, holding back tears. “I was with him until it was time to remove his heart. It was probably the hardest day of my life here, but one of the most rewarding.”

When it was time for Jason’s organs to be recovered, Emmitt told Stephanie, “This is my boy. Please take care of him.” She did just that and accompanied Jason into the operating room. “There is no greater gift than the gift that Jason gave,” she said.

Jason’s organs were procured and donated to the Sharing Network of New Jersey. Jason helped more than 75 people through organ donation.

Congestive heart failure and cardiomyopathy were slowly taking Ron's life. He was deteriorating, suffering strokes, he was unable to walk, talk and barely breathed on his own. He pretty much was losing all hope of living much past his 58 years. He needed more than the defibrillator or the pacemaker he received. He needed a heart. A heart that matched his 6 ft. 3 in. frame and his type O blood. Jason's heart was Ron's saving grace.

“Organ donation works and it's important for people to see that it works,” said Ciaran Geraghty, RN, nurse manager, SICU.

Ronald Griffin and the people who know him understand just how well organ donation works. He walks into a room and it fills with his presence. He exudes “the gift of life.”

More often than not, when the organs are recovered, the medical community involved in caring for the dying patient doesn't get to meet the organ recipients. They trust that some good has come from the individual's death whenever there is a gift of life donation.

Ciaran and Pam Sniffen, hospital services manager of the NJ Sharing Network, felt it was time to take a look at the outcome and asked Ron and his wife, Stephanie, if they would visit Hackensack University Medical Center. They said yes right away. They wanted to meet the people who took care of Jason.

A day after returning from the Oprah Winfrey Show where he, the Rays, and some of Jason's recipients told the story of the importance of organ donation, Stephanie and Ron, wearing his Oprah cap, made a visit to HUMC.

As soon as the Griffins walked through the SICU double doors – the same doors Jason and his parents came through – the unit seemed changed. It was like watching the sunrise. The man who embodied a “heart of gold” both physically and spiritually connected to everyone in that room in such a spectacular way. Staff gravitated to them, embracing the Griffins – some through tight hugs, some through handshakes that seemed to go on forever and some through the warmth in their eyes as they shared knowing exchanges.

“Congratulations! This is a wonderful miracle that has occurred from tragedy,” said Dr. Kaul as he shook Ron's hand. “It's wonderful to meet you. You truly exemplify the spirit.”

Stephanie made her way over to Dr. Kaul. “Can I give you a hug from the Rays?” she asked as she embraced him.

“Please tell them I said hello,” said Dr. Kaul. He can be certain his message will be relayed because the Griffins and the Rays have an incredible bond – a bond they could never have imagined but nonetheless treasure. A close relationship exists between the families. “We stayed with the Rays over Thanksgiving weekend. Emmitt told me I'm 'welcome anytime – just as long as you bring Jason with you,'” said Ron. “Charlotte and I e-mail. She starts her e-mails with 'How's my heart today?' How do you thank someone who has done so much?”

Ron spoke of meeting Jason's brother, Allen. “He came over to me and told me, 'please don't misunderstand what I'm about to do' and he wrapped me in a bear hug. Then he placed his head on my chest and said, 'I need to hear Jason's heart,'” said Ron.

The Griffins' visit demonstrated the “why” everyone makes a daily commitment to providing exceptional healthcare.
“These are life’s defining moments. The Rays are an amazing family. Every conversation was about what Jason would have wanted,” said Ciaran. “I have been involved with the Organ Donation and Transplantation Breakthrough Collaborative. Today was a great day. Once people see the benefits maybe we won’t have to ask families if they want to donate. Maybe it will become a matter of course.”

Emmitt and Charlotte Ray weren’t big proponents of Jason’s decision to be an organ donor. “When Jason first told us, I told him we come into this world with little parts and we need to leave with our little parts,” said Charlotte. Today, the Rays are committed to being organ donors themselves. They understand what it means to people in need and have found some comfort in knowing others have been helped through their loss.

“The proudest moment for Hackensack University Medical Center was how we came together as a team – from the moment Jason came through the door, to facilitating the news to the family, to taking care of the family, to providing a special place for the family and friends,” said Dr. Kaul. “There was a great deal – an extraordinary amount – of sensitivity and I think the Rays felt it. We treated Jason the way we would treat our own families.”

Jason Kendall Ray’s “heart of gold” lives on in the hearts of all.

Love as deep as the ocean

“Life is filled with so many moments, some we anticipate, and others that come whether we anticipate them or not.”

Our dedicated employees at Hackensack University Medical Center (HUMC), prepare for the known and unknown daily. Patients such as Victoria Helstoski, 79, who did not plan on having two heart attacks, weeks and days before the wedding of her daughter, Renata Helstoski, an attorney at Beattie Padovano, LLC in Montvale, often learn what a continuum of care means for them in an environment that delivers patient- and family-centered care.

“I was never sick a day in my life, and I didn’t go for help immediately when I had the first heart attack,” said Victoria. When the symptoms for the second event began, Victoria had been visiting her daughter, Andrea Cahill, and her grandchildren, Victoria, 10, and Connor, 7. Andrea immediately had an ambulance bring her mom to the Emergency/Trauma Department at HUMC.

“I first met cardiologist Edward Julie, M.D., and he told me he was going to stop my heart briefly and perform an emergency cardioversion,” recalled Victoria. “I had worked at the Meadowlands Racetrack for years and had seen people take risks daily, but I really fought him and the nurses on this – I was afraid. I really couldn’t believe it was possible that I was having another heart attack. I didn’t trust this procedure would save my life.”

“It was our first visit to HUMC and the nurses and doctors were standing by, ready and waiting for us when we arrived – everyone, even the security guards, were wonderful to us that night and I would not dream of bringing mom anywhere else again,” said Andrea. “When I called my family to come meet us, I knew mom was really in trouble, but the team treating her was amazing, and they really won us over.”
Victoria’s heart muscle had sustained significant damage in the inferior wall, and I knew we had to act quickly to restore regular beating of her heart,” stated Dr. Julie. The doctor had performed this procedure many times, but never before in HUMC’s Emergency/Trauma Department. “I came away exhilarated, and called all the nurses together at 2 a.m. to compliment them on an impressive job in delivering phenomenal care in a timely and efficient manner. The night was a win-win for the patient and a win-win for the staff, and convinced me to admit patients regularly through these doors.”

“Victoria’s condition was critical. Her blood pressure was extremely low and her heart rate was very fast. With her family and an anesthesiologist at the bedside, we quickly convinced her of the necessity of the cardioversion. I was both relieved and satisfied by her excellent outcome,” said Jeannie Lancaster, RN, staff nurse in the Emergency/Trauma Medicine Department. “When you put your training to the test, and the patient survives a medical emergency, it is the most gratifying aspect of emergency nursing. It’s a very nice feeling when a patient survives the crisis they came to us for, and that is why I enjoy nursing so much.”

Monica Paganessi, D.O., anesthesiologist, acknowledges that patients in medical situations such as Victoria’s often are not in a position with many options. “We recognize the fear and loss of control our patients may be experiencing during a trauma, and reassure them as best we can to put their faith and trust in us to increase their chances of a successful outcome.” With years of experience and sound medical training, she is proud that she and her colleagues truly have an opportunity to make an impact in their patients’ lives.

Victoria had a defibrillator implanted in her chest prior to her discharge. “The defibrillator will treat any further heart rhythm disturbances and minimize future emergency room visits,” said Glauco Radoslovich, M.D., cardiologist, Department of Electrophysiology. “Knowing that a patient’s life can be saved by a defibrillator and the patient following a prescribed treatment plan, gives both families and physicians a sense of reassurance.”

Once up on the unit, Victoria, a generous and caring woman, became depressed. She knew she wasn’t well enough to attend her daughter’s nuptials, and was angry that her body hadn’t been mindful of her calendar. Healing comes in many forms though and she never imagined her daughter and groom William Sommers, a Rutherford Police Department patrolman, would seek the approval of her cardiologists, Bruce Skolnick, M.D., and Dr. Julie, to have a private ceremony in her room on the Critical Care Unit (CCU) on 4 Pavilion East at HUMC, prior to their beach wedding in Long Beach Island (LBI). “It was the perfect solution for us,” said Renata “a chance for a private wedding ceremony with my mom first, to be followed by a reaffirmation of our vows a few days later in LBI as we had originally planned.”

Here comes the bride
Every bride-to-be dreams of her big day, imagining it down to all the details, surrounded by loved ones, a magnificent facility, lush gardens, acclaimed chefs, and outstanding personal service. In their wildest dreams, neither Victoria nor Renata considered that facility would be HUMC. “I just knew I could not go through with my wedding in LBI without my mother present – there was no way I could do it,” said Renata. It was already difficult enough for her because her father, the late Henry Helstoski, a six-term United States Congressman, was not going to be able to walk her down the aisle.
The couple scrambled to buy a second set of wedding attire, including a second wedding dress, a second veil, a second pair of shoes for the bride, and a second set of wedding rings, and canceled their honeymoon arrangements so they could be available to care for Mrs. Helstoski after their LBI wedding. Renata’s friend and co-worker, Judge Gregg A. Padovano, also an attorney at Beattie Padovano, LLC, joined Marianela Iribrane, director of Pastoral Care at HUMC, in performing the ceremony at the medical center, with employees from departments such as Food and Nutrition Services, Photography and Public Relations pitching in. One promise deserved another, and the smiles of relief on Renata’s and William’s faces after their ceremony were evident. “Everything fell into place and the moment was true and defining,” said Renata.

The moment was bittersweet for Victoria, but her son, Kenneth Baldanza, volunteered to spend the couple’s planned wedding day weekend with his mom so she would have company in the hospital while her daughter got married in LBI. He gave the couple the best wedding gift of all, peace of mind, while attending to his mother’s needs. “We were very sad to miss the wedding, but we gave each other lots of hugs and I held her hand a lot,” shared Kenny, who lost his father when he was 14-years-old. He lives in Middletown, Delaware, but he notes, “HUMC is only two hours away, and it’s nice because the CCU nurses were so outstanding in their care of my mother – everyone just wanted to see her get better.”

Dr. Julie continues to care for Victoria and even hopes to reverse some of the damage to her heart muscle, a feat previously thought to be impossible. “Victoria’s plans for the future include continued lifestyle changes such as smoking cessation, joining the Cardiac Rehabilitation and Prevention Center program, and taking medications. We are confident that she will feel progressively better in time and she will improve her energy level.”

Victoria has recently begun participating in Cardiac Rehabilitation, and is looking forward to the opportunity to socialize, and maybe even return to work someday. “We cultivate a healing atmosphere of unconditional understanding of the mind/body connection. Teaching our patients the importance of making better choices and lifestyle changes to extend their life expectancies through mindful awareness is a prospect I love daily,” says Maureen Goodman, RN, staff nurse, Cardiac Rehabilitation and Prevention Center. Victoria is learning that long-term change is made in baby steps, and looks forward to living the benefits, with her constant companion, Missy, a two-year-old Shih Tzu, surrounded by her family and friends. “My family and I are in awe of the care I received during such a difficult and emotional, yet joyous time.”
ANY PARENT KNOWS WHAT IT IS LIKE TO BE AWAKENED BY A TUG ON A SLEEVE. WHEN SEVEN-YEAR-OLD REBECCA YAGER OF MONROE, NY, WOKE HER PARENTS FOR A GLASS OF WATER, SHE HAD NO WAY OF KNOWING THAT SHE WAS SAVING HER FAMILY.

A splice in electrical wiring would destroy their two-story home in the middle of an ice storm. Carol, 30, took Rebecca and Richard, 6, out of the house into the snow, without even retrieving keys for her vehicle, with only a phone to call 911, while Jim, 34, went to the aid of their additional three sons, James, 12, Matt, 11, and Mark, 10. The boys were lying lifeless on the floor of their bedroom, overcome from smoke inhalation and suffering from burns. An hysterical Jim got down in the snow and prayed to God for help. Left without even the clothes on their backs, help is exactly what the Yagers got.

Help from neighbor, Anthony Adamo, who subdued Jim and opened his house during the emergency, along with help from the Hudson Valley Community, the Mountain Lodge Fire Company, the Mountain Lodge Park & Glenwood Hills Residents Association, St. Mary’s Parish Center in Washingtonville, Pastor R. John Winn and The Lighthouse Worship Center in Hillburn, NY, the Washingtonville Boy Scout Troop #416, the Little Ferry Fire Company, The Washingtonville School District, the Wal-Mart Super Center in Monroe, NY, and The Joseph M. Sanzari Children’s Hospital at Hackensack University Medical Center (HUMC), where the children were brought after being stabilized at Arden Hill Hospital in Goshen, NY.

HUMC healthcare team members immediately understood the sense of urgency to respond to their magnified medical and emotional needs that were vast and extreme, and rose to the occasion. Commonly, cases such as these requires employees to pool resources for a family who has experienced a sudden, unexpected and random trauma, and everyone pulls together to heal them.

A snowplow preceded three ambulances bringing the children in critical and serious conditions, on life-support, to the Pediatric Intensive Care Unit (PICU) of The Joseph M. Sanzari Children’s Hospital in the middle of a busy day. Stephen Percy, M.D., vice chairman of the children’s hospital, was on duty in the PICU, ready to admit the boys, along with nurses, Child Life staff, respiratory therapists and emergency equipment. “The first thing we determine is what condition the children are in and what our immediate concerns are,” said Dr. Percy. Most parents ask the same two questions – “Is my child going to be okay?” and “When can they go home?” The Yagers had to ask this question times three. “I was able to reassure the Yagers that we thought the children would be ok and they would go home as soon as they were better,” said Dr. Percy.

“As a team and agents of the healing process, we make decisions inline with family needs and inline with the quality of life as they relate to the children while they are on the unit, after performing comprehensive assessments that include their physical and emotional well-being,” said Susan O. Cohen, CCLS, Pediatric Advanced Illness Care coordinator.
of the David Center for Children’s Pain and Palliative Care. “When you face critical treatment, the preciousness of life is intensified, and the experience itself shifts one’s priorities.” She emphasizes that the family is pivotal and always at the hub. “One of the steps we took was to admit the boys in rooms in close proximity to each other so that the extended family could have better access to each other.” This action later allowed the boys to feel a connection and facilitated visits to each other once they were off life-support. The design of the private rooms allowed for the family to remain together and sleep over.

Mary Shubin, RN, administrative head nurse, appreciates the concept of family-centered care, which has long been a part of the fabric of the children’s hospital. “We all have our roadmaps and we can utilize each other as need be in order to maneuver the family through the first 24 hours, which is traditionally a turning point for them,” said Mary, who was covering the PICU on the day the Yagers arrived. “First, it was important to answer all of the family’s questions and then we enlisted Ester Reyes, LSW, social worker, to address needs such as housing and school. “Medical intervention alone does not mend the whole person,” said Alissa Sandler, LCSW, Social Work supervisor.

Johanna Escobar, RRT, was the Respiratory Therapist assigned to the PICU during the boys’ admission. “I am a mother myself and I kept praying for the family. Initially, all I knew was that we had three children arriving from one family, and my heart went out to them.” Johanna notified colleagues Ilene Rosenthal, CRT; Carlos Brancano, RRT; Alicia DiCamillo, RRT; and Grace Pagsambugan, RRT, of the soon-to-be arriving patients, so that each child would be able to be removed from their transport vent and switched to HUMC’s equipment without delay. “We had to make sure the lungs were properly ventilated. It took two days before each child was able to be extubated.”

Controlling the weaning process to ensure the lungs can function on their own again pain free. The extubation process, however, can be uncomfortable and scary. “The children woke up with familiar faces around them, and we reassured them that they were fine and that their lungs needed to rest,” said Johanna. “We monitor their airways and administer oxygen and facilitate getting the secretions to come up, which in the case of a fire victim, can involve a great deal of suctioning. We reassured each child on how their siblings were doing,” stated Jana Tyler, RRT, the therapist who extubated James.

Ronald J. Vander Vliet, CRT, respiratory therapist, extubated Mark and was present on the unit when Matt’s tube was removed. “I get my strength from the children themselves – life throws them a curve, and they accept it at face value. Children learn to deal with what comes and work through it, and it’s very motivating.” Twenty respiratory therapists were involved during the eight days of hospitalized care of this family. “When a situation arises, no matter how large or small, we all funnel our individual emotions and utilize our various experiences to work together as seamlessly as a team, to achieve the greater good for our patients, and we feel like a family, which is why I truly enjoy working here.”

What makes it possible for a nurse, even a magnet nurse, to return to the PICU day after day and deliver outstanding patient care? Thia Bachemin, RN, staff nurse shares that the nurses and doctors all have a great deal of respect for each other, and are very supportive of each other. “We help each other cope, and will fill in for each other if someone needs a day off if there has been a traumatic experience or loss, because we want to keep everyone’s spirits up.”
Lindsey Olson, RN, staff nurse, feels that seeing the children improve and keeping them comfortable and holding the children’s hands is reassuring. When treating the Yager children during extubation, she would tell them how well they were doing and encouraged them not to resist the tube, explaining that perhaps tomorrow it could come out.

John Mondanaro, CCLS, supervisor of Child Life Services/Creative Arts Therapies, acted as one of Santa’s elves by quickly reaching out to assemble holiday gifts for all of the children. “This was one area that the entire Child Life team could address immediately and I was able to concretely tell Carol and Jim their children’s holiday would happen. With Christmas a short two weeks away, it was very important for them to have this stressor removed from their many concerns and to provide the family with hope and acknowledgement of the family’s value of faith.”

Tara Paltridge, RN, PICU, was the nurse-in-charge and worked with the family from the moment they arrived. “It really hit home because I, too, live in Orange County.” Tara recalls the best moment of the hospitalization as the one where she was able to walk the brothers into each other’s rooms. “To see the family finally all sitting together was very special, and I think, finally, the parents were able to relax and accept that they were going to survive this.”

The life-altering tragedy has left Jim a changed man. “I see everything differently now, and am filled with gratitude.” He recollects, “You know how children often interrupt you – before I was not always in the moment, and now I look them in the eye, and really listen to them. To hear what they have to say is the most important thing in the whole world,” says the father who wants to give everyone he meets hugs and kisses.

Family is what matters most to the Yagers, and while their home and pets perished in the fire, Carol’s sister, Alice, and Jim’s grandmother, Helen, have also given all they can. Alice has Rebecca and Richard living with her, while the rest of the family is with Helen, until a new home is built.

Days after the fire, Carol and Jim finally get treated for frostbite at Dr. Percy’s urging. At first, they had refused to take care of themselves and leave their children. “To have three children in the Pediatric Intensive Care Unit (PICU) at once is scary and shocking,” said Carol.

“We are so grateful to all of the nurses and doctors for the wonderful care – they had James, Matt and Mark well enough to join us on Christmas Eve, and it is the best Christmas present we ever received,” an emotional Jim shared.
There were plenty of reasons for the Rivera family to celebrate. Just days earlier it was a frightening time for them when Isabella arrived in the Pediatric Emergency Room.

“Initially, when Isabella complained of symptoms, I thought it was crankiness and dismissed it,” said Geraldo.

“I started feeling sick on Halloween. I didn’t go out trick-or-treating or anything,” said Isabella. A few days later, she was feeling worse. She complained her arms

Happy birthday!

GERALDO RIVERA, FOX NEWS CORRESPONDENT, BROUGHT A VARIETY OF ICE CREAM AND AUNT MARY BROUGHT CARROT CAKE. IT WAS TIME TO CELEBRATE – GERALDO’S DAUGHTER, ISABELLA, WAS TURNING 15 AND BEING RELEASED FROM THE PEDIATRIC INTENSIVE CARE UNIT (PICU) AT THE JOSEPH M. SANZARI CHILDREN’S HOSPITAL ON HER BIRTHDAY.
and legs weren’t functioning properly and she had headaches. The symptoms got progressively worse rather quickly. She couldn’t walk, she couldn’t use her hands, and her ability to speak was impaired. Isabella needed medical attention.

Isabella’s sister, Simone, 13, rang her dad who was in Manhattan and told him they called 911. Geraldo rushed home in time to meet the Edgewater Ambulance Squad. The EMTs suggested they go to The Joseph M. Sanzari Children’s Hospital.

Geraldo agreed. “I knew of the hospital because of Dr. Manny, the health correspondent at FOX,” said Geraldo. “I also knew of Don Imus’s involvement.”

“When Isabella arrived, she couldn’t carry on a conversation. She was confused and agitated,” said Stephen Percy, M.D., vice chairman of The Joseph M. Sanzari Children’s Hospital. “Whenever there’s an acute change in mental status it becomes a medical emergency. It was important to see if there was a medical abnormality that could be reversed or if surgery would be required.”

“We did testing very quickly,” said Usha Avva, M.D., Pediatric Emergency Room. The CAT scan and spinal tap test results indicated nothing operative needed to be done.

“There was an infectious process going on. We treated Isabella as though she had meningitis or encephalitis. She was given antibiotics and anti-viral medications,” said Dr. Percy. “Isabella’s headaches were due to increased pressure in her head. The spinal tap relieved the pressure which was higher than normal.”

Ultimately, testing determined Isabella had a recurrence of the Epstein-Barr Virus (EBV). EBV, one of the most common human viruses, establishes a lifelong dormant infection in some of the body’s immune system cells. Sometimes reactivation occurs with or without symptoms.

“I’ve seen kids do very well and kids do very poorly. Isabella did very well,” said Carol Weber, RN, manager of PICU, who has spent 28 years caring for critically ill children. “We were all glad she was able to be released on her birthday.”

“It was the most positive experience you can possibly have. The care Isabella received was beyond a doubt as good as anywhere on the planet,” said Geraldo. “There was a remarkable level of competence and compassion.”

Before leaving, Isabella’s healthcare team attended her birthday party. “Geraldo was delving out cake to the staff, the patients and visitors. He even brought ice cream for the lactose intolerant,” said Carol.

“Child Life made a huge card that everyone signed,” said Jennifer Brady, RN, PICU. “Isabella was very sweet.”

“The entire staff, physicians, nurses, volunteers sang Happy Birthday. Her Aunt Mary made a carrot cake. I cried,” said Geraldo. “The mending – the kind of attention and care she received while recovering was incredible. I hope to always be involved there.”
The goal: to create the Tomorrows Children's Institute for Cancer and Blood Disorders for world-class medicine that would comprehensively treat children with cancer, conduct cutting-edge research to find a cure, and provide critical support to help children and families manage all aspects of the disease.

It was June of 1987 when the Tomorrows Children's Institute for Cancer and Blood Disorders (TCI), first moved to the campus of Hackensack University Medical Center (HUMC).

Today, TCI ranks among the top programs in America for childhood cancers. It is comprised of an expert team of compassionate doctors, nurses, psychologists, social workers, and child life specialists who work together to bring about the best possible outcome for every child. Among them, leading physician researchers whose work has led to a dramatic increase in those surviving childhood cancer.

Tomorrows Children's relationship with HUMC has been filled with many triumphs that have had a positive impact on the community. “This anniversary is a significant event in HUMC history," said John P. Ferguson, president and chief executive officer at the medical center. "The program has fulfilled many important needs for some of the smallest members of our community, and their loved ones. The highly skilled team, advanced services, and aggressive research activities have made it one of the largest and most comprehensive pediatric oncology programs in the nation.”

Part of The Joseph M. Sanzari Children's Hospital at HUMC, TCI was the result of a vision shared by HUMC and a small healthcare team based in New York City, that wanted to make a difference in the lives of children with cancer and blood disorders. “In 1987, children in northern New Jersey often had to travel to New York City to receive the care they needed,” said Michael B. Harris, M.D., director of TCI. “The added expense and travel time often aggravated an already stressful situation for young patients and their families. Our goal was to offer New Jersey residents the high level of healthcare quality that was once only accessible to New York residents. The location of HUMC and the enthusiasm and warmth of its administration made it seem like the perfect place to start such a program. The passage of time has confirmed that the partnership we forged 20 years ago was a smashing success. HUMC's consistent support has been instrumental in the realization of what seemed an extremely ambitious dream in the mid-1980s.”

Dr. Harris added that the other critical component in its success was the support of the Tomorrows Children's Fund (TCF), a fundraising organization whose members included the Bivona, Hoffman, and Jurist families. At the time, their own children were battling cancer. TCF celebrated its 25th anniversary and has raised millions of dollars over the years to aid TCI.
in providing services, to fund research, and to help ease the financial burdens of TCI patients and their families.

“Nobody expected Tomorrows Children to become what it is,” Mr. Jurist said. “The magnificence of this place is that it was made possible by the kind of people who have displayed a degree of dedication you rarely see. It's been a great pleasure to be a part of it.

“We have also been fortunate to have wonderful people get involved in our organization,” Mr. Jurist continued, “people like Don Imus, George Martin, Mark Messier, and Karl Nelson, people who have given so much.”

“TCF has sort of taken on a life of its own,” Mr. Bivona said. “When we started out, we just wanted to do a few things to make our kids as comfortable as possible. We never dreamed we'd get a building.”

Lynn Hoffman, now the executive director of TCF, remembers thinking how wonderful it would be if she could just get a cup of coffee while she was with her daughter at the hospital.

“All we knew initially was that we wanted to make a difference in the children's lives,” said Ms. Hoffman. “I am very grateful to acknowledge everyone who has put us on the map, and thank all of our staff, because we still have a dream.”

One of the major accomplishments was the ability to offer a wide range of services to everyone affected by childhood cancer. “TCI brings new meaning to comprehensive cancer care,” said Jeffrey Boscamp, M.D., chairman and physician-in-chief of The Joseph M. Sanzari Children’s Hospital. “It recognizes that the fight against cancer must be fought on a psychological as well as a clinical front. In addition to providing state-of-the-art medical care, Tomorrows Children offers extensive psychological services, including supportive programs for patients, their parents, siblings, friends, grandparents, and others.”

Through the years, physicians and nurses have devoted considerable time and resources to the advancement of cancer care through research, even taking on governing roles with the Children's Oncology Group (COG), an international organization whose mission is to cure and prevent childhood and adolescent cancer through scientific discovery and compassionate care. As a result, patients have the option of participating in the scores of innovative research trials offered in conjunction with COG.

Now that TCI and TCF officials have succeeded in creating one of the nation’s premier pediatric centers, the new frontier has become research. “In the past 25 years, we have come so far, the next logical step is to work on finding a cure. If you don't dare to dream it, you're never going to see it happen,” Mr. Jurist said.

As long as there are children with cancer, there will be TCF and TCI to bring about a cure for every child and to help survivors manage treatment effects. Together they man the frontlines aiding patients who battle cancer every day.
“Working with the wonderful people of Tomorrows Children is so gratifying. I am inspired by their endless compassion,” said Anne Kreminski, operations manager of TCI. “Their dedication to providing outstanding care to children afflicted with cancer and blood disorders is one of a kind.” • “I love working in TCI. Here, I have the opportunity to work with a highly motivated multidisciplinary team of people who have the biggest hearts. You can feel the energy in the air and it makes you want to be a part of it,” said Laura VanDePutte, RN, nurse manager of the Reuten Clinic. • “There is a purpose to each day and I feel that I am working toward an important goal, the care of our patients,” said Ellen Goldring, chief of Child Life and Creative Arts Therapies. “There is a deep feeling that we are all working for the same cause.” • “We are so proud of the relationships we have developed with our patients and their families throughout the years; they have helped us refine the art of nursing,” said Diane Ohme, RN, nurse manager, inpatient unit of Pediatric Hematology/Oncology. “It is our honor and privilege to be a part of their lives and to provide them with exceptional care.”