



The Institute for Patient Blood Management & Bloodless Medicine and Surgery

ISSUE 2 | 2017 WWW.BLOODLESSMED.ORG



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Pain-Free at Last

The idea of having surgery filled Karen Helmlinger with fear until the 73-year-old heard about The Institute for Patient Blood Management and Bloodless Medicine and Surgery at Englewood Hospital and Medical Center.

Karen's journey to The Bloodless Institute began two years ago. For years, the Indiana resident had struggled with hip pain. Her son, Lee, knew she would eventually need a hip replacement, so he suggested she watch a live broadcast on her computer from Englewood Hospital's Bloodless Institute.

"The seminar was wonderful," Karen says. "It covered every topic imaginable. The thing that stuck with me the most was hearing Ms. Ozawa [Sherri Ozawa, RN, Director of The Bloodless Institute] say, 'You don't have to wait until it's an emergency to come here.'"

Even though Karen was impressed by The Bloodless Institute, Englewood is a long way from her home. She didn't believe traveling to Englewood for surgery was feasible, so she continued to manage her arthritis-related pain and inflammation with cortisone injections. Karen knew she was prolonging the inevitable, so she met with an orthopedic surgeon in her hometown.

"When I went into the office for my consultation, I handed the physician my medical records," Karen says. "He laid them down on the counter without looking at them and proceeded to promise me that my pain would be gone the day after surgery. I already had a terrible fear of surgery, and he didn't make it any better."

Lee talked with Karen after the consultation, and he sensed his mom's hesitation. He asked if she wanted to go to The Bloodless Institute instead.

"After we explained that it was feasible and that we wanted to take her where she would feel safest, she said, 'Of course, I'd like to go there. I'd have no fear there," Lee remembers. "We then started the process to make this happen for her."

A Team Effort

Lee and his wife, Luisa, contacted Nancy Solomon, Coordinator for Program Development at The Bloodless Institute, who connected the Helmlinger family with David Feldman, MD, an orthopedic surgeon and Associate Director of The Bloodless Institute.

Dr. Feldman requested copies of the magnetic resonance imaging (MRI) scans Karen's local physician had taken of her left hip. After reviewing them, he consulted with Karen via phone.

"At other hospitals, total hip replacements are procedures that traditionally have been associated with high transfusion rates," Dr. Feldman says. "We talk with patients about their medical history and any prescriptions and home remedies they use, because some, like fish

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BEYOND JOINT REPLACEMENT

Total hip replacement is just one of many blood-sparing orthopedic surgeries offered at Englewood Hospital and Medical Center. David Feldman, MD, orthopedic surgeon and Associate Director of The Institute for Patient Blood Management and Bloodless Medicine and Surgery, performs a full complement of blood-sparing procedures, including total shoulder and knee replacement, spinal surgery, and arthroscopic surgery.

"Englewood Hospital is unique because bloodless medicine is hardwired into our institution," Dr. Feldman says. "We don't have to say, 'We're operating on a bloodless patient today. Let's switch gears.' This high level of care is standard and offered to everyone, even those who don't specifically request bloodless surgery."

oil, can cause bleeding during surgery. We also recommend screening tests to make sure each patient is in the best possible shape before surgery. If patients have anemia, for example, we can correct it in the weeks before surgery by giving them medications that help the body manufacture red blood cells and rebuild the blood reserves that need to be increased."

Dr. Feldman agreed that total hip replacement was the right choice. Karen completed the necessary preoperative tests at her local hospital, while Lee and Luisa arranged for airfare and inquired about insurance authorization.

"There was always someone in Dr. Feldman's office who could help us if we ran into a stopping point or had questions," Lee says. "Everything went so smoothly that I knew we were heading in the right direction."

The Trip of a Lifetime

On March 22, Karen's brother drove her to the airport in Chicago, where she boarded her flight to New Jersey. Lee and Luisa, who had flown into New Jersey earlier in the day from their home in San Antonio, Texas, met her at the gate. It was finally time for Karen to leave years of pain and fear behind her.

In the days between her arrival and surgery, Karen met Dr. Feldman in person. She, Lee, and Luisa also met with a nurse who discussed Karen's wishes. Englewood Hospital has a full complement of tools that enable physicians to perform bloodsparing surgery. The nurse reviewed Karen's options and noted the techniques she would accept.

"As Jehovah's Witnesses, we felt very comfortable that her needs would be met," Lee says.

When Karen arrived for her procedure the morning of March 28, confidence in her medical team replaced her former doubts. Dr. Feldman performed a successful direct anterior hip replacement, an advanced procedure that is less invasive than a traditional hip replacement, and Karen was able to get out of bed and walk a few steps the next day. After three days in the hospital, she completed 12 days at a rehabilitation center. Lee and Luisa remained by her side throughout her inpatient rehab stay and accompanied her home.

"From the moment I arrived at Englewood Hospital, I felt like royalty," Karen says. "I want other Brothers and Sisters to take away from my wonderful experience that there is an option available. At Englewood Hospital, the team's No. 1 goal is helping you get better and get on with your life."

To find a physician who specializes in bloodless medicine, call 1-888-766-2566.

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ENGLEWOOD HOSPITAL AND MEDICAL CENTER **CARES FOR THE** WHOLE PERSON. THE **TEAM CARES FOR** YOUR EMOTIONAL NEEDS, ALLAYS **ANY FEARS YOU** HAVE, AND TAKES A PERSONAL INTEREST IN YOU, WHICH IS VERY REFRESHING. **MEMBERS OF** THE TEAM TRULY **BECAME FRIENDS** WHO WE STILL KEEP IN TOUCH WITH TODAY.

—Lee Helmlinger, son of patient Karen Helmlinger

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CHOICES 3



Double Trouble

Earlier this year, Pennsylvania retiree Michael Jones faced two potentially fatal cardiac emergencies in as many months. Saving his life took skill, speed, and teamwork—but no blood.



James Klein, MD

In the predawn darkness of January 11,
Michael seemed to be out of options.
Hours earlier, on January 10, the
77-year-old resident of New Milford,
Pennsylvania, had arrived at a hospital in
Binghamton, New York, with stroke-like
symptoms. Tests revealed the cause wasn't
a stroke, but a tear in the aorta, the main
artery through which blood leaves the
heart. Michael needed to be transferred
for emergency surgery, but no other
hospital in the region with the required
expertise would agree to his stipulation of
a bloodless operation.

"As a Jehovah's Witness, I don't agree with blood transfusions," Michael says. "The local hospitals didn't have the willingness or skill to do the surgery I needed without blood."

In the Nick of Time

After all the nearby facilities refused to operate on Michael, the Hospital Liaison Committee for Jehovah's Witnesses tried somewhere a bit farther afield: The Institute for Patient Blood Management and Bloodless Medicine and Surgery at Englewood Hospital and Medical Center, which was nearly three hours away. James Klein, MD, Chief of Cardiothoracic Surgery at Englewood Hospital, agreed to send a helicopter to take Michael to New Jersey. A snowstorm ruled out ground transport, and speed was crucial.

"The majority of patients with the type of aortic dissection Michael had die within 24 hours," Dr. Klein says. "When he arrived at Englewood Hospital, we did a computed tomography [CT] scan that allowed us to swiftly plan the operation, and then we rushed him to surgery. We removed and replaced a section of the aorta from just above the aortic valve to the area where the carotid arteries originate.

"There is probably no bigger challenge in cardiac surgery than performing this open-heart operation on a patient who will not accept blood transfusions," Dr. Klein continues. "The extent of the injury to

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his aorta and the magnitude of the technical components required to fix it made the surgery extremely challenging. Michael is very fortunate to be alive."

Cardiac Crisis, Part 2

Against the odds, Michael lived through a perilous injury and surgery, but he was not out of danger.

It had been so important for Michael to have surgery as soon as possible after his arrival at Englewood Hospital that there had been no time for a cardiac catheterization, a procedure physicians routinely perform before elective surgery on the aorta to check for blockages in the arteries. Had Michael not needed care right away, the medical team would have identified the threat posed by plaque in his blood

vessels. Instead, it went undetected.



Dennis Katechis, DO

In the meantime, Michael's recovery went well. After five days at Englewood Hospital and four in a nearby rehabilitation facility, he returned home to receive care and begin cardiac rehabilitation. On March 10, however, history repeated itself. With heavy snow again on the ground, alarming symptoms—arm, neck, and jaw pain—prompted Michael to seek care in Binghamton, this time at a different hospital. Michael spent several days there. A scan revealed the arterial blockages that had dodged detection earlier. When the hospital refused to commit to a bloodless procedure, Michael's family didn't hesitate—they called The Bloodless Institute, which sent an ambulance for him on March 15.

Dennis Katechis, DO, FACC, FASE, a cardiologist at Englewood Hospital who had helped care for Michael during his postoperative recovery and had seen him for a follow-up appointment in February, coordinated the response to this new cardiac crisis.

"National recommendations call for open-heart bypass surgery to treat the type and number of blockages Michael had," Dr. Katechis says. "However, given that he'd had recent open-heart surgery and a repeat operation posed a significant risk of bleeding, we decided it was best to perform cardiac catheterization through his arm and put stents in his cardiac arteries."

From March 17 to 22, Richard Goldweit, MD, Medical Director of Interventional Cardiology at Englewood Hospital, placed a total of seven stents in Michael's arteries. The medical team staggered the procedures to avoid injuring his kidneys with the contrast dye that helped them identify the blockages. Michael stayed in the Cardiac Step-Down Unit until he was able to go home on March 23.

"Michael accepted everything with an upbeat attitude, which solidified our confidence that his treatment would go well," Dr. Katechis says. "I plan to see him every six months. I believe his prognosis is just as good as if he'd had open-heart surgery to eliminate the blockages."

Hope Soars

Michael, a former aircraft mechanic and pilot, is getting his life off the ground again. He is taking an injectable medication to lower his cholesterol and learning about living a heart-healthy lifestyle in cardiac rehab.

"I feel a lot better than I did," Michael says. "I'm not in pain anymore, and I'm comfortable. There aren't enough words to describe how they treated me at Englewood Hospital. Everyone was excellent."

With Dr. Katechis in his corner, Michael plans to do what he can to keep his heart from clipping his wings again.

Complex cardiac surgery without the use of blood is possible. To find out how, call 1-888-766-2566 for a referral to The Bloodless Institute.

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THE PHYSICIANS, NURSES, AND OTHER PROVIDERS AT THE BLOODLESS **INSTITUTE ARE ALWAYS ON THEIR** GAME. EACH PERSON KNOWS HIS OR HER JOB AND WHAT THE **GOALS ARE FOR** EACH DAY OF THE PATIENT'S STAY. **EVERYONE WORKS** AS A TEAM. IT'S A MORE HUMAN **APPROACH TO** MEDICINE.

—Renee Sands, whose father, Michael Jones, twice received lifesaving heart treatment at Englewood's Bloodless Institute this year

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CHOICES 5



Halina and Marian Kazmierczak

A Common Cancer, *An Innovative Solution*

When Marian Kazmierczak of Brooklyn, New York, was diagnosed with colorectal cancer, his first instinct was to consider his treatment options with the same logic he uses in the rest of his life.

"My doctors in New York recommended chemotherapy and radiation, followed by surgery, and they told me the chemotherapy and radiation would affect my body by making me weak and possibly damaging some organs," remembers Marian, who was healthy overall despite having cancer. "I asked, 'What is better, to perform surgery on the strong man or the weak man?"

Marian's New York doctors refused to consider letting the surgery take place before chemotherapy and radiation, so Marian, 60, sought a second opinion. Because he is one of Jehovah's Witnesses, Marian was already familiar with The Institute for Patient Blood Management and Bloodless Medicine and Surgery at Englewood Hospital and Medical Center, which is located just over an hour from his home. He knew the physicians there could perform the surgery he needed without a blood transfusion. Marian was referred to Ronald White, MD, colorectal surgeon with The Bloodless Institute.

"I met with Dr. White and we discussed options," Marian says. "He agreed to perform the surgery while I was strong."

On the Road to Recovery

Marian turned to the right hospital—and the right doctor—for his procedure. Dr. White has been with The Bloodless Institute for 25 years, and the hospital has a well-established protocol in place to manage patients with the type of cancer Marian has.

"We were able to focus on making sure his iron and hemoglobin levels were adequate so he was well prepared for the procedure," Dr. White says. "We have a standard way of managing patients so we can ensure they are as ready as possible to have surgery without much blood loss, and there are no loose ends."

Marian underwent cancer resection surgery on March 3, and he remained in the hospital for four days after the procedure.

"He had no complications at all," Dr. White says. "He's bounced back beautifully."

Marian returned home to New York to recover from his surgery, where he met with the local oncologist who will monitor his case. Recently, Marian learned that he is completely cancer free, and he won't need additional treatment.

"They told me Dr. White took out exactly the right amount of my colon," he adds.

His doctors at Englewood Hospital also continue to follow Marian's case and will provide additional care if it's necessary.

"I had a very good experience at Englewood Hospital," Marian says. "Everyone was very helpful and understood all my needs. I recommend the hospital 100 percent."

Cancer cases can be successfully treated without the use of blood products. For a referral to a physician who can discuss bloodless medicine and surgery with you, call The Bloodless Institute at 1-888-766-2566.





BLOODLESS SURGERY IS NOT SIMPLY A RELIGIOUS CONVICTION; IT'S BASED ON SOUND MEDICAL EVIDENCE. ITS TRACK RECORD IS LONG, WELL-ESTABLISHED, AND SUPERB. ONCE PEOPLE COME TO THE BLOODLESS INSTITUTE AND HEAR WHAT WE HAVE TO OFFER, THEY'RE IMPRESSED.

—Ronald White, MD, colorectal surgeon at The Bloodless Institute

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Legends of The Bloodless Institute:

Dr. Herbert Dardik

Herbert Dardik, MD, who has served as Chief of the Department of Surgery and Chief of Vascular Surgery at Englewood Hospital and Medical Center, took unexpected forks in the road and discovered his calling—treating cancer patients bloodlessly to better their outcomes.

Dr. Dardik, a New Jersey native, had no intention of being a surgeon when he was a teenager—he wanted to be a pianist. A comment from his piano teacher about his talent level, however, had him heading off to college with an open mind about his future, and he later found himself enrolled at NYU School of Medicine. This crossroads repeated itself when he joined the U.S. Air Force—he had no interest in vascular surgery, but because he learned from some of the pioneers of the discipline during his surgical training, he was placed in charge of vascular surgery at Andrews Air Force Base in Washington, D.C. It was there that his love for the specialty began.

Bloodless Beginnings

In 1961, while working at Montefiore Medical Center, Dr. Dardik performed a radical mastectomy on a young woman with breast cancer who received a standard blood transfusion during surgery. A year later, the patient was readmitted, and Dr. Dardik was shocked to learn that the patient's cancer had metastasized. She passed away shortly thereafter.

"Some time in the 1980s, I was reading some of my medical journals, and one article pointed out that when you give transfusions to patients

with colon cancer, the likelihood increases that they'll have recurrence," Dr. Dardik says. "There was another article that said the same thing with regards to breast cancer. So, without being aware of it, I realized that I did something I wish I could reverse on that young lady, and maybe to many others."

After these experiences, he became far more conservative about the use of blood transfusions. In 1993, Dr. Dardik participated in a meeting at Englewood Hospital with representatives of Jehovah's Witnesses, who were looking for a hospital that would agree to offer bloodless medicine and surgery to those for whom blood is not an option.

"Every person who attended was interested," Dr. Dardik says. "We got on board. It was startling to me, because I began to see bloodless techniques applied in other areas. I became a better surgeon because I learned to make sure my patients didn't lose blood, and my trainees learn these technique as well."

For almost 25 years, Dr. Dardik has proudly served as Senior Medical Director of The Bloodless Institute at Englewood Hospital.

To learn more about The Bloodless Institute, visit www.bloodlessmed.org. For a referral to a blood management physician, call 1-888-766-2566.

CHOICES 7



The Institute for Patient Blood Management & Bloodless Medicine and Surgery

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Director's Corner



Sherri Ozawa

Expanding Care and Resources

Each year, The Institute for Patient Blood Management and Bloodless Medicine and Surgery at Englewood Hospital and Medical Center facilitates care for more than 7,000 people—representing all 50 states and more than 40 countries

around the world. The success of this program didn't happen by accident; Englewood Hospital recognized a need in the community for medical care without the use of blood transfusions and built a world-renowned, multispecialty program around honoring patients' desire for bloodless medical care.

Improved Quality of Care for All Patients

"Patients whose care is facilitated by The Bloodless Institute have always been happy because they receive a concierge service of sorts—one where patients have a single resource they can turn to and have all their concerns addressed," says Sherri Ozawa, RN, Director of The Bloodless Institute at Englewood Hospital. "Now, we want to expand the bloodless model to all patients throughout Englewood Hospital."

To expand this program, Ozawa will continue in her role as Director of The Bloodless Institute, but she will also take on an additional role

as Senior Director of Patient and Family Engagement. Ramón Correa, a familiar face at The Bloodless Institute for 17 years, transitioned

into a Manager position to oversee the program's administrative responsibilities.

"Patients who have relied on The Bloodless Institute in the past won't notice any real changes," Correa says. "We work very closely as a team, and patients will get the same high-quality care they always have."

Both Ozawa and Correa—along with several other coordinators—continue to make patient care arrangements and referrals to



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Ramón Correa

physicians affiliated with The Bloodless Institute.

"These changes represent the level of regard Englewood Hospital has for The Bloodless Institute," Ozawa says. "The feedback the hospital has received from our bloodless patients helped us make the decision to expand and devote more resources and recognition to the program."

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