Living with Heart Failure

Guide for Patients and Families



ENGLEWOOD HEALTH

You've taken the first step towards recovery.

Let's walk through this journey together.

About this patient guide

This patient guide is an important resource for you and your family throughout your recovery. By learning to take good care of yourself, it is possible to lead an active life with heart failure. This book is designed to help you learn to live with heart failure. We want you to learn about your disease and treatment. You can take control over heart failure by following proper medication recommendations and healthy lifestyle changes.

This patient guide provides basic information on heart failure. It will help you:

- Understand your disease and treatment plan
- Learn how to work with your doctor or nurse to feel better
- Learn how to overcome common barriers in following your treatment plan

General Information

PATIENT NAME:		
ALLERGIES:		
DATE OF DISCHARGE:		
PRIMARY CARE PHYSICIAN	TELEPHONE	
CARDIOLOGIST	TELEPHONE	
PULMONOLOGIST	TELEPHONE	
NEPHROLOGIST	TELEPHONE	
OTHER PHYSICIAN/SPECIALTY	TELEPHONE	
OTHER PHYSICIAN/SPECIALTY	TELEPHONE	
PHARMACY	TELEPHONE	
REHABILITATION FACILITY	TELEPHONE	

Emergency Contacts & Family Members

NAME	TELEPHONE	
NAME	TELEPHONE	
OTHER IMPORTANT PHONE NUMBERS AMBULANCE, FIRE DEPARTME	ENT, OR EMERGENCY SERVICES: 911	
ADDITIONAL INFORMATION		

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Overview and Introduction

Welcome to Englewood Health.

We are committed to providing the highest-quality care in a compassionate environment – and getting you back to an active life, doing the things you enjoy with friends and family.

This patient guide you are receiving has general information you may find helpful in dealing with your condition, or your loved one's condition. We also have handouts for medications, which may be given to you while you are admitted or before you go home.

Your nurse or your healthcare provider can answer any questions you may have. We encourage you to write down your questions or comments on the "Notes" section provided at the back of this booklet. Please use these pages to speak to your nurse or healthcare provider about anything regarding your hospital stay at Englewood Health.

We want your experience to be as pleasant as possible. If we can help you with anything, please do not hesitate to ask. For any questions, comments, or concerns, please call the nurses' station directly for immediate assistance.

Englewood Health will be with you every step of the way!

MEET OUR TEAM

During your hospital stay, you will be cared for by a team of healthcare professionals to address your medical and practical needs. Your team may include:

Your primary care provider or a hospital doctor, who manages your care.

Cardiologists to provide specialty care and consultation.

Navigator nurse practitioner to help coordinate your care from admission to discharge.

Registered nurses who provide ongoing assessment and support.

Registered dietitians to help create a tailored diet.

Pharmacists who ensure you're receiving the right medications.

Palliative care specialists who provide supportive care for patients with chronic illnesses to help improve your quality of life and manage symptoms

Care coordination team, made up of registered nurse case coordinators and social workers who coordinate your discharge plan and arrange for services you may need after you go home.

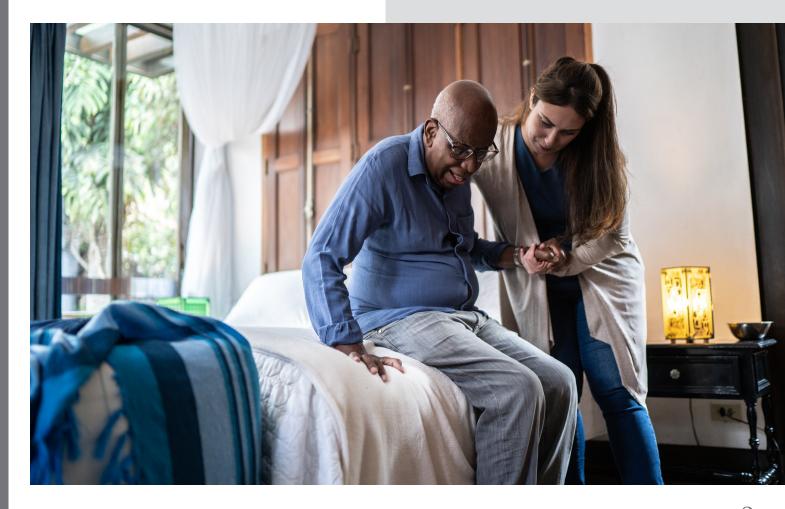


After you are discharged from the hospital, our team continues to support you in your recovery depending on your individual needs. Services may include health education, linkage to community resources for social needs, psychotherapy for mental health issues, and nutrition counseling and diabetes self-management. You may also participate in our cardiac rehabilitation program to help you regain independence and live the most active and healthy life possible.

Where will I go after I am discharged from the hospital?

Home: This is the preferred option for most patients. Home care services will be set up for a visiting nurse, as needed. The visiting nurse and your doctor will determine how long you will need the treatment.

Rehabilitation facility: Occasionally patients require inpatient nursing. In this setting, you will receive nursing care. Insurance plans determine which type of facility you are eligible to attend. Your care coordinator will assist you with this process.



SECTION 1:

Understanding Heart Failure

WHAT IS HEART FAILURE?

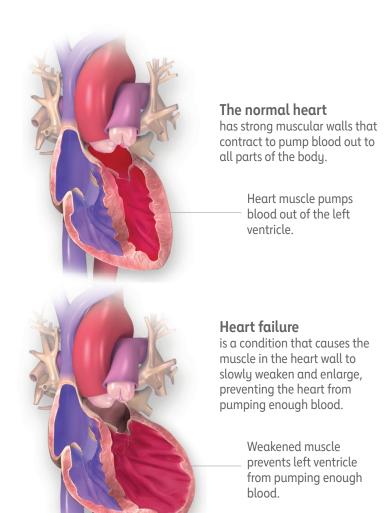
People usually misunderstand the words "heart failure."

Heart failure does not mean that your heart has stopped beating or working. Heart failure means your heart doesn't pump blood through your body as well at it should. Your heart still beats, but it pumps less nutrient-and oxygen-rich blood to the rest of your body. Because your heart beats slower, you may feel tired or weak. Heart failure can also cause fluid buildup in your body, which may result in swelling of your legs and feet. The fluid buildup may also build into your lungs, resulting in shortness of breath.

WHAT CAUSES HEART FAILURE?

- Coronary artery disease (CAD) occurs when the arteries that supply blood (coronary arteries) to your heart muscle become narrowed because of fatty deposits or plaque.
- Hypertension (high blood pressure)
 forces the heart to work harder to pump
 blood to the rest of the body, which may
 result your heart muscle to become thicken
 and hard to pump.
- Heart valve disease affects the heart because it can't pump blood throughout the body. The heart has to work harder to pump.
- Heart defects present since birth may cause more blood to be sent to your lungs, causing pressure to build up, heart muscle to weaken and sometimes to fail.

- Past heart attack or myocardial infarction could damage your heart muscle.
- Other causes of heart failure include infection of the heart and/or heart valves, abnormal heart rhythm (arrhythmias), obesity, diabetes, thyroid problems, alcohol or drug abuse, and certain types of chemotherapy.



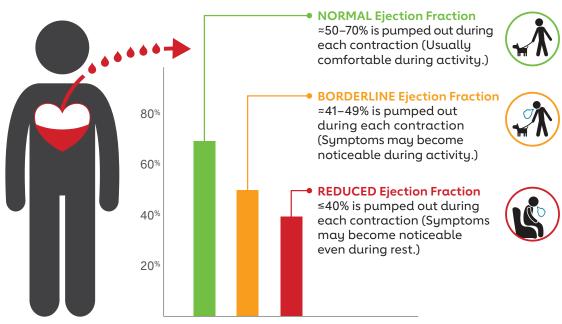
Source: American Heart Association

OTHER QUESTIONS TO ASK

Always ask questions. Talking with your healthcare providers will help to ensure you are receiving the best possible care.

- **Do I have blockages in my coronary arteries?** Blockages in your coronary arteries decrease the blood supply to your heart muscle. It may be possible to open the blockages and restore blood supply to the heart, which can improve your heart function and reduce your symptoms.
- Is my blood pressure high? Is my blood pressure under control? High blood pressure can make your heart failure worse. Reducing blood pressure to normal levels will reduce the work of your heart.
- Are my heart valves damaged? Valve damage can be repaired, and your symptoms of heart failure could improve.
- What is my heart function (ejection fraction or "EF")? Your heart function is assessed by using a number called ejection fraction. The ejection fraction compares the amount of blood in the heart to the amount of blood pumped out. This fraction helps to describe how well your heart is pumping blood to the body. An echocardiogram will be used to evaluate your heart function, and it will tell you and your doctor about your heart and heart valve function.

How much blood is pumped out?



It is also possible to have a diagnosis of heart failure with a seemingly normal (or preserved) ejection fraction of greater than or equal to 50%.

Source: American Heart Association



HOW DOES IT FEEL TO HAVE HEART FAILURE?

Everyone should know these important signs and symptoms.

- Shortness of breath at rest, when lying down, and when moving around
- Feeling weak, tired, or run-down
- Coughing or wheezing when lying down or exercising
- Swelling of legs, ankles, and feet
- Weight gain from fluid buildup
- Increased heart rate, or heart palpitations
- Loss of appetite
- Confusion or can't think clearly

SECTION 2:

Caring for Yourself

WHAT SHOULD CONCERN ME?

Even though you are used to your symptoms, it does not mean you should ignore them! Call your primary healthcare provider for any of the following:

- Worsening shortness of breath at rest, while lying down, or when walking
- Increased leg, ankle, or feet swelling
- Weight gain or loss of 2-3 pounds in 1 day or 4 pounds in a 7 days or less
- Increase in coughing or wheezing
- Increase in fatigue or loss of appetite

Excellent – Keep Up the Good Work!



No new or worsening shortness of breath



Physical activity level is normal for you



No new swelling, feet, ankles and legs look normal for you



Weight check stable Weight:



No chest

GREAT! CONTINUE:



Daily Weight Check



Meds as Directed



Sodium Eatina



Follow-up Visits

Pay Attention – Use Caution!



Dry, hacking cough



Worsening shortness of breath with activity



Increased swelling of legs, ankles and feet



Sudden weight gain of more than 2–3 lbs in a 24-hour period (or 5 lbs in a week)



Discomfort or swelling in the abdomen



Trouble sleeping

CHECK IN!

Your symptoms may indicate:



A need to contact your doctor or health care team



A need for a change in medications

Medical Alert - Warning!



Frequent dry, hacking cough



Shortness of breath at rest



Increased discomfort or swelling in the lower body



Sudden
weight gain
of more
than 2-3 lbs
in a 24-hour period
(or 5 lbs in a week)



New or worsening dizziness, confusion, sadness or depression



Loss of appetite



Increased trouble sleeping; cannot lie flat

WARNING! You need to be evaluated right away.



Call your physician or call **911**

Source: American Heart Association

HOW CAN I TAKE CARE OF MYSELF?

The treatment of your heart failure will involve several steps:

- Take your medications as directed
- Follow a healthy heart diet and low salt diet
- Weigh yourself daily
- Measure your blood pressure twice a day and write down in your blood pressure log (included on page 26 for your convenience)
- Get regular exercise
- Know the warning signs of heart failure
- Avoid alcohol consumption
- Stop smoking
- Keep follow-up appointments

Make this plan a permanent part of your life!

WEIGH YOURSELF DAILY

Sudden weight gain is a sign of fluid buildup in your body.

- Always weigh yourself at the same time every day!
- Always weigh yourself in the morning before breakfast!
- Always weigh yourself after emptying your bladder!
- Always weigh yourself without clothing or in lightweight clothing!

Write your weight down in your daily weight log (included on page 18 for your convenience).

Bring your weight log with you to your next doctor's visit.

IMPORTANT

Call your healthcare provider if you have weight loss or gain of:

- 2-3 pounds in 1 day or
- 4 pounds in 7 days or less



LIMIT ALCOHOL CONSUMPTION

You should not drink alcohol. It may damage heart cells and may further weaken your heart muscles. It may also interact with your medications.

STOP SMOKING

Smoking can make your heart failure worse. Smoking is strongly discouraged. Quitting smoking is one of the best things you can do for your health.

If you are ready to take the next steps to stop smoking, the Graf Center for Integrative Medicine at Englewood Health can help you.

Contact the Graf Center for Integrative Medicine 201-608-2377

GET REGULAR EXERCISE

Regular exercise is essential. Exercise will help:

- You feel better, stronger and with less breathing trouble
- You to walk farther, work or shop with less fatigue and enjoy activities longer
- You sleep better at night
- Maintain and/or improve your balance and prevent falls
- You lose weight if needed
- You feel more positive and confident
- You relieve stress

Best Exercises

- Walking
- Riding a bicycle (stationary or regular)
- Swimming
- Water exercise or walking in a pool

Remember to talk to your healthcare provider first before starting any exercise program.

SUGGESTIONS FOR ENERGY CONSERVATION

Plan ahead and organize your work

- Delegate when needed
- Combine activities and simplify details

Schedule rest

- Balance periods of rest and work
- Frequent and short rests are beneficial

Pace Yourself

- Moderate pace is better than rushing through activity
- Reduce sudden or prolonged strains
- Alternate sitting and standing

Practice Proper Body Mechanics

- Use well-supporting chair when sitting
- Bend at knees and hips, not at back
- Carry several smaller loads or use a cart

Identify Effects of Your Environment

- Avoid extremes of temperature
- Avoid long and hot showers or baths

Reduce Stress

- Learn relaxation techniques
- Be mindful that physical exercise reduces stress
- Anticipate fatigue and stress and plan ahead to reduce stress

Prioritize

- Decide what activities are important to you, and what could be delegated
- Use your energy on important tasks

SECTION 3:

Medication Management

TAKE YOUR MEDICATIONS AS DIRECTED

Taking your medications as directed is key for your recovery and your treatment success.

- Always take your medications as directed.
- Never stop taking your medications without your healthcare provider's advice.

Use your medication list (included on page 22) to keep track of the medications you take, how often you take them, why you take them, and if there are any special instructions for taking them.

Bring your medication list with you on your next doctor's visit.

	COMMON HEAR	T FAILURE MEDICATIONS	
TYPE OF MEDICATIONS	MEDICATION NAMES	HOW IT WORKS	POSSIBLE SIDE EFFECTS (Report to your healthcare provider)
Angiotensin Receptor Neprilysin Inhibitor (ARNI)	Combination of two medications: Sacubitril and Valsartan (Entresto)	Treats heart failure by lowering blood pressure and getting rid of excess fluid. Together, these medicines reduce the work of the heart and may improve your heart pump function.	Dry cough, swelling of the face, or dizziness
Angiotensin Converting Enzyme (ACE) Inhibitor	Ramipril (Altace), Enalapril (Vasotec), Lisinopril (Prinivil), and Quinapril (Accupril)	Treats heart failure by causing blood vessels to relax, allowing your blood to flow more easily. This reduces the work of your heart and lowers your blood pressure.	Dry cough, swelling of the face, lips, and tongue, or skin rash
Angiotensin II Receptor Blocker (ARB)	Candesartan (Atacand), Losartan (Cozaar), and Valsartan (Diovan)	Treats heart failure by causing blood vessels to relax, allowing your blood to flow more easily. This reduces the work of your heart and lowers your blood pressure.	Dizziness and lightheadedness
Beta Blocker	Bisoprolol (Monocor), Carvedilol (Coreg), and Metoprolol (Toprol)	Treats heart failure by relaxing the heart muscle and slowing down the heart rate. They also block your stress hormones. This relaxes your blood vessels and makes it easier for your heart to pump.	Feeling tired, slow heart rate (may cause dizziness), and shortness of breath

(CONTINUED)			
TYPE OF MEDICATIONS	MEDICATION NAMES	HOW IT WORKS	POSSIBLE SIDE EFFECTS (Report to your healthcare provider)
Mineralocorticoid Receptor Antagonist (MRA)	Spironolactone (Aldactone) and Eplerenone (Inspra)	Treats heart failure by reducing water and salt in the body, and prevent the heart muscle from stiffening and weakening	Urinating often, dehydration due to loss of fluid, and dizziness
Sodium/Glucose Cotransporter 2 Inhibitor (SGLT2i)	Dapagliflozin (Farxiga) and Empagliflozin (Jardiance)	Treats heart failure by making it easier for the heart to fill with blood and pump it throughout the body by removing excess water and salt.	Dehydration, urinary tract infections, and low blood sugar
Diuretics	Furosemide (Lasix), Hydrochlorothiazide (HydroDiuril), Bumetanide (Bumex), Torsemide (Demadex), and Metolazone (Zaroxolyn)	Treats heart failure by helping your kidneys get rid of any extra water and extra salt in your body. Many people call these medications "water pills."	Urinating often, dehydration, feeling light headed, and muscle cramps
Inotropic Drugs	Digoxin (Lanoxin)	Treats heart failure by helping to control some of the electrical impulses in the heart. This slows the heart beat down and helps it to beat with a more regular rhythm. This adds to the effects of a stronger pumping action.	Confusion, dizziness, and vision disturbances

ORGANIZING YOUR WEEKLY PILL BOX

Organizing your weekly pill box can help your treatment regimen to be more successful.

Some things to consider:

- When preparing a weekly pill box, it is important to wash your hands to reduce the risk of spreading germs.
- Take your prescription bottles and carefully read the label to determine how often you need a dose and how many pills make up a single dose.
- Prepare 7 days' worth of one single medication by placing one dose into each day of the week, splitting doses between the AM and PM pill box compartments as necessary.
- If you need extra help to fill your pill box, ask a friend or a relative to fill your pill box when they visit.

Talk to your healthcare provider if you need any help.

SECTION 4:

Dietary Changes

FOLLOW A LOW-SODIUM DIET

Most Americans exceed the recommended limits for sodium (salt) in the diet.

Diets high in sodium can increase the risk of developing high blood pressure and cardiovascular disease.

Keep in mind: High blood pressure makes the heart work harder, and the high force of the of the blood flow can harm arteries, and organs, such as heart, kidneys, brain and eyes.

Suggestions for reducing sodium in your diet

- Eat fresh fish, meats, vegetables and fruits
- Avoid convenience (processed) foods like soup, frozen or canned prepared main dishes such as pot pies and pizza
- Avoid sausages, hot dogs, ham, bacon, and other cured or smoked meats, poultry and fish
- Season foods with lemon, onions, spices and herbs such as pepper, or curry
- Avoid seasoned salts like garlic salt and onion salt
- Use low sodium or water-packed canned vegetables, and rinse regular canned vegetables before cooking
- Avoid sauces high in sodium such as soy sauce, steak sauce, teriyaki sauce and barbecue sauce
- Avoid pickled foods
- Avoid salty snacks such as potato chips, salted nuts, salted crackers

DIETARY GUIDELINES RECOMMENDATIONS

Limit sodium intake to less than 2,300 mg per day – that is equal to about 1 teaspoon of salt.

Combine lower sodium intake with the **Dietary Approaches to Stop Hypertension** (DASH) eating plan.

DASH Eating Plan

The Benefits: Lowers blood pressure & LDL "bad" cholesterol.



www.nhlbi.nih.gov/DASH







SODIUM-FR	EE FLAVORING TIPS
FOOD	SODIUM FREE FLAVORING TIPS
Beef	Curry, basil, bay leaf, dill, mustard, onion or garlic (fresh or powder), mushrooms, sage, tarragon, thyme, grape, nutmeg, parsley, pepper
Chicken	Cloves, pineapple, paprika, sage, turmeric, oregano, cranberry, basil, onion or garlic (fresh or powder), pepper, basil
Fish	Dill, curry, lemon rind and lemon juice, tomato, ground pepper, chervil
Pork	Cloves, applesauce, caraway, rosemary, thyme, chives, basil, onion or garlic
Eggs	Paprika, tarragon, parsley, onion, jelly, curry, chervil, tomato, mushrooms
Vegetables	Garlic or onion, basil, dill, green pepper, unsalted salad dressing, vinegar, tomato, mushroom, mint, mace
Desserts	Vanilla, extracts of other flavorings, mace, nutmeg, cinnamon, ginger, allspice



DINING OUT

Suggestions for reducing sodium when eating in restaurants

- Choose foods without sauces or ask for the sauce on the side so you can control the amount you eat
- Select restaurants where food is cooked to order
- Ask if your server could provide cut onions, chives, lemon, or other fresh herbs to use as flavorings
- Ask for low-salt alternatives
- Pick the most simple foods such a plain green salad and baked potato
- Carry your own herb seasoning blend with you

Choose foods carefully when you eat outside your home. Restaurant foods can be very high in sodium.



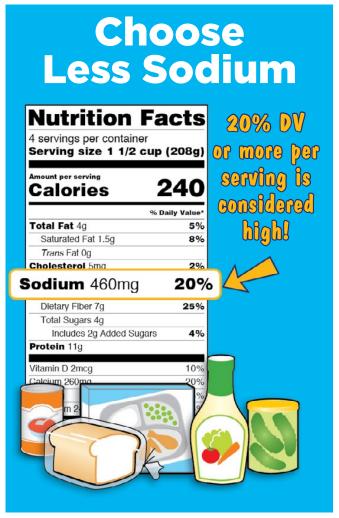
READING FOOD LABELS

Use the Nutrition Facts Label.

Pre-packaged foods may contain high levels of sodium, whether or not they taste salty.

Follow these steps:

- Limit sodium to less than 2,300 milligrams (mg) per day.
- Use % Daily Value (%DV) to see if a serving of food is high or low in sodium and compare food products.
- Pay attention to the serving size and the number of servings you eat or drink to determine how much sodium you are consuming.



Source: Food and Drug Administration

FLUID INTAKE

Most people with heart failure can drink normal amounts of fluid. However, you may be told to limit fluids to six to nine 8 oz. cups per day.

Ask your healthcare provider whether or you need to restrict your fluid intake. And if so, how much?

WHAT IS CONSIDERED A "FLUID"?

Fluid is anything liquid or anything that would melt if left at room temperature. You will need to count any liquid used to take your medications as part of your daily intake.

Some examples are:

- Coffee, tea, or other hot beverages
- Gelatin (Jell-O)
- Ice cream, sherbet, sorbet, and popsicles
- Ice cubes and ice chips
- Liquid creamer
- Nutritional supplements
- Watermelon
- Yogurt
- Soft drinks and juice
- Soups

CONVERSIONS FOR MEASURING FLUID INTAKE Some conversions are approximated.			
MILLILITERS (ML)	LITERS (L)	OUNCES (OZ)	CUPS (C)
1000	1	32	4
1200	1.2	40	5
1500	1 ½	50	6 1/4
1800	1.8	60	7 ½
2000	2	67	8 1/3

SECTION 5:

Making This Plan a Permanent Part of Your Life

Following your treatment plan will pay off!

You will improve your ability to be active and your quality of life by following this treatment plan.

We know that following a treatment plan can be difficult. If you are having trouble sticking to your treatment plan, talk with your nurse or healthcare provider for help.



10 TIPS FOR LIVING WITH HEART FAILURE

- 1. Know the warning signs of heart failure:
 - Worsening shortness of breath
 - Increased leg swelling
 - Weight gain
- 2. Take your medications as directed
- 3. Follow a healthy heart diet
- 4. Minimize dietary salt intake

- 5. Weigh yourself daily
- 6. Get regular exercise
- 7. Avoid alcohol consumption
- 8. Stop smoking
- 9. Keep follow-up appointments
- 10. Make this plan a permanent part of your life

SECTION 6:

Staying on Track



WE ARE HERE TO HELP!

Talk with your nurse or healthcare provider about barriers that may prevent you from sticking to your treatment plan such as cost of medicines, side effects of medicines, lack of time to exercise, complexity of treatment, or challenges following a healthy heart diet.

We can work out solutions together. Remember, we are here for you!

ADDITIONAL LEARNING RESOURCES

American Heart Association - Heart Failure

American Heart Association - Heart Failure Signs and Symptoms

American Heart Association - Diagnosing Heart Failure

American Heart Association – Heart Failure Tools and Resources



DATE	WEIGHT	COMMENTS



DATE	WEIGHT	COMMENTS



DATE	WEIGHT	COMMENTS



DATE	WEIGHT	COMMENTS

Medication List

Use this medication list to keep track of the medications you take, how often you take them, why you take them, and if there are any special instructions for taking them.

IV	IEDICATION	DOSAGE	FREQUENCY	MORNING	NOON	EVENING	BEDTIME
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3 Medication List

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My blood pressure goal:	mm Hc
y a compression of the compressi	
Instructions:	

- Measure your blood pressure twice a day, morning and late afternoon, about the same time everyday.
- For best results, sit comfortably with both feet on the floor for at least two minutes before taking a measurement.
- When you measure your blood pressure, make sure you rest your arm on a table. In this way, the blood pressure cuff will be about the same height as your heart.
- Record your blood pressure on this log and bring with you on your next doctor's visit.

DATE	AM	PM	COMMENTS



My blood pressure goal:	mm Hg
Instructions:	

- Measure your blood pressure twice a day, morning and late afternoon, about the same time everyday.
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DATE	AM	PM	COMMENTS

NOTES

E NUIES	

350 Engle Street, Englewood, NJ 07631 englewoodhealth.org

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