

AtlanticView at Goryeb Children's Hospital | Spring 2021

kids



MOMENTS THAT MATTER:
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Atlantic Health System 
Goryeb Children's Hospital

Greetings,

Atlantic Health System is proud to play an important role in the distribution of COVID-19 vaccines to our community through our mega center site in Rockaway and to all our locations throughout our area. While people 16 years old and above who meet the Centers for Disease Control criteria are eligible, we are all eagerly anticipating the day when there is more vaccine available and when it is approved for younger children in order to help get back to a more normal world. Please be sure to visit our web site at atlanticehealth.org/covid19vaccine to sign up for appointment alerts.

We've been listening carefully to your questions and concerns. In this issue, we present tips on how to tell COVID-19 from a common cold in children and when not to delay treatment. There has been much focus over the past year on fever. The magazine covers an important discussion about recurring fevers when other symptoms are not present. What if your child needs to come to the hospital? This can be frightening for a child and a parent. Read about how Goryeb Children's Hospital recognizes this and wants to help. Some tips are covered on ways to lower anxiety and prepare your child for a hospital visit.

You'll meet R.J., an active 14-year-old in Virginia, who had a rare, fast-growing benign tumor. After researching the best specialist to help, R.J.'s family traveled across four states to Morristown to have Dr. James C. Wittig, chair of orthopedic surgery at Morristown Medical Center and medical director of orthopedic surgery, orthopedic oncology and sarcoma surgery remove the tumor and save R.J.'s leg.

We always want to hear from our readers, so please contact us at atlanticview@atlanticehealth.org if you have a story idea or want to share a comment.



WALTER D. ROSENFELD, MD
Chair of Pediatrics,
Atlantic Health System Children's Health
and Goryeb Children's Hospital

Atlantic Health System, an integrated health care network in New Jersey, is comprised of Morristown Medical Center, Overlook Medical Center, Newton Medical Center, Chilton Medical Center, Hackettstown Medical Center, Goryeb Children's Hospital and Atlantic Rehabilitation. The six medical centers have a combined total of 1,841 licensed beds and more than 4,000 affiliated physicians providing a wide array of health care services to the residents of northern and central New Jersey. The medical centers, and Goryeb Children's Hospital as part of Morristown Medical Center, are accredited by The Joint Commission. Specialty service areas include advanced cardiovascular care, pediatric medical and surgical specialties, neurology, orthopedics and sports medicine. Each of these programs has earned top ratings and recognitions in its respective field.

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AtlanticView Kids

Twice a year, Atlantic Health System publishes *AtlanticView Kids*, which includes informative articles on many different health-related topics and events. Issues are available online at atlanticehealth.org/atlanticview or email atlanticview@atlanticehealth.org to receive a hard copy.



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Moments That Matter:
Finding the Right Specialist
– Four States Away



CEO's corner

New Vaccines and the Promise of Togetherness

This month, our state reaches a significant milestone, the one-year anniversary of the first confirmed case of COVID-19 in New Jersey. Twelve months later, we have lost too many loved ones and luminaries to this terrible virus. Yet even in our mourning, we find new reasons for hope. Groundbreaking vaccines to speed and strengthen our fight, promising the return of togetherness and brighter days.

Just like our community, the Atlantic Health System family has worked tirelessly to do our part, healing friends and neighbors, comforting and connecting families across social distances, and protecting one another throughout the pandemic. Never has health care been more of a team sport, reaching far beyond the wall of our hospitals. We will always be grateful for your kind words, gestures of appreciation and unwavering support for our caregivers on the front line.

We are opening new doors throughout our region for vaccinations and the ongoing care you and your family need. We are administering vaccines daily at clinics in Morristown, Basking Ridge, Summit and Rockaway and planning new clinic launches in the coming weeks as our vaccine supply increases. Please visit atlantichealth.org/covidvaccine to sign up for appointment alerts.

As we all continue to coexist with COVID, we will be here to support you with the highest quality, compassionate care. We look forward to reaching the light at the end of the tunnel together. Be well, stay safe and as always, thank you for entrusting Atlantic Health System with your care.



Brian A. Gragnolati

Brian A. Gragnolati
President & CEO,
Atlantic Health System



Is It COVID or a Cold?

Throughout the winter months and spring, children come down with a runny nose and, in the era of COVID-19, this can cause concern. According to Arthur Atlas, MD, chief of pediatric pulmonology for Atlantic Health System, "all respiratory viral infections can present with similar symptoms, and it can be very challenging to differentiate the COVID-19 infection from other causes of the common cold."

Dr. Atlas says in addition to a runny nose, symptoms might include nasal congestion, low-grade fever or a cough. "If a child is having these types of symptoms and no known exposure to COVID-19, it doesn't mean they don't have COVID-19, but more likely, they have another respiratory viral infection such as rhinovirus, RSV, or adenovirus, which are causes of symptoms of the common cold."

Initially, symptomatic treatment, including fever control, good hydration and nutrition are warranted. Dr. Atlas says symptoms may last seven to 10 days and resolve on their own.

According to Dr. Atlas, the percentage of COVID-19 infections in young children is much less than in the adult population. "In children, the symptoms have a very broad

range of presentation, from being totally asymptomatic but testing positive for COVID-19 to having very minimal symptoms like nasal congestion, signs of a cold, fever, cough and sometimes just diarrhea or abdominal pain. Most children diagnosed with COVID-19 infection are treated symptomatically."

Children with underlying chronic conditions, such as asthma, should not delay their regular health care, according to Dr. Atlas. "We are seeing children with chronic conditions, as well as healthy children needing vaccinations, delaying coming into the doctor's office because of COVID-19 fears. The practices in our area have instituted very strict precautions to protect patients and their families and the medical staff, so that children can safely access the medical care that is necessary to maintain good health."

Dr. Atlas says everyone still needs to practice infection control precautions to limit the spread: "Wearing a mask, 6-foot social distancing, and frequent hand sanitizing lessens overall infection rates." ▲

If your child is having underlying respiratory problems, contact The Respiratory Center for Children at 973-971-4142.

Finding the Right Specialist - **FOUR STATES AWAY**

During baseball season last year, Matt and Karen Hamel of Chesapeake, VA, watched from the bleachers as their son stepped up to bat. R.J., 14, had been struggling with what they thought was a sports injury. That day, his limp was alarming.

"He looked like someone who needed a hip replacement," says R.J.'s father, Matt.

That comparison was not very far from the truth.

After testing, the family learned that R.J. had a rare, aggressive tumor. The growth was actually eating through the end of the bone of his leg, at the hip joint.

He needed treatment fast. A local doctor immediately had R.J. use crutches to avoid a break in the weakened joint. He lost motion in the hip.

"In the day or two after the diagnosis, we spent some sleepless nights on the internet, looking for the most highly competent surgeon and medical team we could find," Matt says of himself and his wife, Karen, a registered nurse.

"All of our research pointed to Dr. James Wittig," Karen says. "He was four states away, at Morristown Medical Center. We did not hesitate to reach out."

James C. Wittig, MD, is chair of orthopedic surgery at Morristown Medical Center and medical director of orthopedic surgery, orthopedic oncology (cancer) and sarcoma surgery for Atlantic Health System. He confirmed R.J.'s diagnosis of "chondroblastoma." Though it's a rare tumor that does not spread throughout the body, it does grow. It was quickly destroying significant amounts of R.J.'s bone.

"If R.J. and his parents had waited just three months, we might not have been able to save the joint," Dr. Wittig says.

Amputation (removal of the leg) could have been the only option if the tumor continued to grow without being treated.

Dr. Wittig and the team at Morristown worked quickly. They met with the family during an online appointment, organized testing to be done near their home in Virginia, and set a date for surgery.

The five-hour surgery involved several critical steps: removal of all tumor cells so that the tumor would not grow back and then reconstruction of the joint.

Dr. Wittig performed a special technique called "cryosurgery," using liquid nitrogen to kill any microscopic cells.

"Without cryosurgery, this kind of tumor comes back 60 to 80% of the time," Dr. Wittig says. "But by using it, we know the risk of R.J.'s tumor coming back is less than 5%."

Next, Dr. Wittig reconstructed the joint using donated bone and cartilage (from someone who agreed to be a donor upon their death).

The big challenge was making the ball part of the ball-and-socket a smooth, round surface, Dr. Wittig says. This helps



R.J. (15), Kennedy (12), Kayleigh (18), Brady (14)



“I expect that R.J. will fully recover by the spring and after physical therapy, he can return to strenuous sports next fall.”

– James Wittig, MD

ensure a pain-free joint and limit risks of arthritis later in life.

Of more immediate importance to R.J., Dr. Wittig’s careful reconstruction will give him the chance to take part in the many sports that are so much a part of his life.

The surgery, done in October, was “a great success,” the family reports. R.J. is now back at home in Virginia with family, including sisters Kayleigh, 18, and Kennedy, 12, and younger brother, Brady, 14.

“I expect that R.J. will fully recover by the spring,” Dr. Wittig says, “and after physical therapy, he can return to strenuous sports next fall.”

R.J. will see Dr. Wittig regularly for several years.

R.J. says he’s “all in” for whatever it takes to get back to sports, from swimming to cross-country running and his first love, baseball.

“You can tell that Dr. Wittig and everyone at the hospital had a vested interest to get us where we are today,” Karen says. “They cared about every detail.”

Dad Matt agrees. “When we started our research for the best team for R.J., we wouldn’t settle for anything but the very best. We got it.” ▲

ATLANTIC MEDICAL GROUP

Dr. Wittig and Atlantic Orthopedic Oncology and Sarcoma is part of Atlantic Medical Group, a multispecialty network of health care providers. For more information, visit atlanticmedicalgroup.org or atlantichealth.org/orthooncology. He can be reached at 833-292-2663.

RECURRING FEVERS: A Potential Sign of Periodic Fever Syndrome



Simona Nativ, MD

Fevers are one of many childhood ailments that are worrisome to parents, causing parents to miss work and children to miss school. According to Simona Nativ, MD, director of pediatric rheumatology for Goryeb Children's Hospital, the most common cause of fevers is infection. "Fever can be healthy; they can be good," says Dr. Nativ. "They are an indication that our body is trying to fight off infections."

Dr. Nativ says when a child has a fever, a temperature greater than 100.4, it usually represents some type of infection. But when fevers occur on a regular patterned basis and with recurring symptoms without any clear diagnosis, additional interventions and evaluation with a pediatric rheumatologist may be necessary. This type of situation may be reflective of a periodic fever syndrome, an umbrella term which encompasses numerous distinct disorders that are autoinflammatory in nature. Dr. Nativ states, "During this pandemic we are evaluating a larger than usual number of patients with recurrent fevers, partly due to the lack of school and daycare exposures." The most common of these disorders is PFAPA (periodic fever, aphthous stomatitis, pharyngitis, adenitis), a disorder which typically occurs in younger

children and tends to resolve by early adolescence. Children will experience recurrent patterned fevers in association with oral sores, sore throat, and lymph node swelling.

There are numerous ways to treat PFAPA and the other autoinflammatory periodic fever syndromes, says Dr. Nativ. These treatments range from supportive medications such as Tylenol® and Motrin® to biologic medications which specifically target molecules that cause inflammation. Patients who are suspected of having unidentified recurrent fever syndrome should be referred to and evaluated by a pediatric rheumatologist. ▲

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Dr. Nativ is part of Atlantic Medical Group, a multispecialty network of health care providers. Please visit atlanticmedicalgroup.org for more information. She can be reached at 973-971-4096.



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Getting Your Child Ready for a Hospital Stay

Child Life Team (l to r): Child Life Specialists: Kelly Blanchette, Stacey Herman, Kristin Holtzman, Megan Keogh; Music Therapist: Megan Calabro

Some simple steps can prepare a child – and his or her parent or guardian – for a hospital visit, so that tests or procedures go well. Did you know, for example, that a special toy, stuffed animal, pillow or blanket can help?

“For a one-hour test or an overnight hospital stay, having something like these – something familiar to the child – can make a world of difference,” says Kristin Holtzman, child life specialist for Goryeb Children’s Hospital.

She’s part of a team there with degrees in child development and related areas, plus extensive training in the health care field called “child life.”

They see children and their families at Goryeb during or even before a hospital visit, at the Valerie Center and emergency department.

To help a toddler, for example, a child life specialist might use a doll to show what an X-ray will be like. For older children, a conversation might be all that’s needed. For infants, the parent or guardian is the focus.

“We can help take away some of the mystery or anxiety, so whether a visit is planned or not at all expected, we can support every member of the family.”

– Kristin Holtzman, child life specialist

“We can help take away some of the mystery or anxiety,” Holtzman says. “So whether a visit is planned or not at all expected, we can support every member of the family.”

For more information, contact the Child Life Department at Goryeb Children’s Hospital at 973-971-6795.



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