

check up



Spring 2006 | NewYork-Presbyterian Hospital/Weill Cornell Medical Center

patients giving back



Pictured left to right: Max and Allan Rose with daughter, Marisa Rose.

If anyone knows about being in the right place at the right time, it's real estate developer Allan Rose. In addition to its being a guiding principle in his successful real estate business—AVR Homebuilders and Realty Company now in its fifth decade—timing saved his life when he suffered cardiac arrest during a physical exam 13 years ago.

"I was having a checkup for an insurance policy when I had the attack. The doctor had the paddles right there in his office and he revived me. If I had been any other place, I probably would have died," explains Rose.

A subsequent visit to the hospital confirmed his worst fears: he needed a bypass operation right away. "My father died of heart disease, so I knew how serious this was, I looked for the best surgeon I could find, which led me to Karl Krieger at NewYork-Presbyterian Hospital."

In 1994 Rose underwent Coronary Artery Bypass Surgery to repair his damaged heart. The successful operation truly gave Rose a new lease on life: he married his second wife and at the age of 77 has become a father again, to baby Francesca, now 2 years old.

"The superb care I received at the hospital made me think that it was really time to give back to the people who had made my new life possible."

In 2005 the Rose family made a substantial unrestricted gift to the Cardiothoracic Surgery Department. "I realized that keeping a great place great meant that people like me had to step up to the plate and make a donation."

The money was used to support new faculty and to redesign and update the patient and family waiting areas. Places like these often are last on the list for refurbishing because hospitals are hard pressed even for funds essential to patient services. The gift has made the waiting rooms

MEET THE RESIDENTS

Providing Exceptional Care to Our Patients

The 2005 Cardiothoracic Surgery Chief Residents are wrapping the first year of their two-year training program at Weill Cornell Medical Center. The six residents spent the year performing cardiac and thoracic surgery, seeing patients and doing rounds.

- **Dr. Daniel Lee** received his MD degree at the University of Chicago, Pritzker School of Medicine. He completed his residency at Yale University and a NIH Fellowship at Columbia University College of Physicians and Surgeons.



Daniel Lee

- **Dr. James Huang** received his MD degree from Columbia University College of Physicians and Surgeons.



James Huang

His residency was at Brigham and Women's Hospital. He

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Laura Seche, Nurse Practitioner

Laura Seche is the Nurse Practitioner Coordinator for the Department of Cardiothoracic Surgery.

I grew up in New Jersey, but my grandparents lived in New York, so I spent a lot of time in New York City as a child. I went away for nursing school, but came back to New York to take my first job in health care. I thought I would stay a year and then go somewhere else, but 28 years later, I'm still here!

When people ask me what a nurse practitioner (NP) does, I always say we're like midwives for adults. We get involved in all aspects of patient care. We treat people from the beginning of their hospital stay through discharge and usually see them again once they've left the hospital, at their post-op visit. Right after heart surgery, patients are transferred to the ICU. The NP keeps a close watch, since there's a 4 in 10 chance that patients will develop a fast or irregular heart rhythm that needs to be treated right away. We also look for symptoms of infection that can sometimes happen after surgery. It's very important to handle quickly any problem that arises. We keep on top of pain management too, ordering all medication and working with patients to make sure they're as comfortable as possible so the healing can begin. Social workers and physical therapists are also a key part of recovery. NPs work with them on a care plan, getting patients ready to go home.

Our relationship with patients doesn't end when they leave the hospital. We're available in case they have any questions about their progress, especially about the medication they've taken home with them.

Patients see the NP one more time when they come back to the hospital for a follow-up visit. It's a good time to review their progress, check their dressing, and get a sense of how their lives are going since their surgery. We can fine-tune their medication and make other suggestions to help them heal faster.

The reason I've stayed in nursing so long is simple: I like patient care. I've been offered other managerial positions through the years, but I like taking care of patients. I guess I get positive reinforcement from caring for people. You know, for me, there is nothing better than when somebody says to you, "Thank you, you helped me." ■



KEEPING A CLOSE WATCH

RESIDENTS *continued from page 1*

had research fellowships at University of California, San Francisco, Division of Vascular Surgery, and the National Cancer Institute, Surgery Branch.

• Dr. Mohir Hedeshian

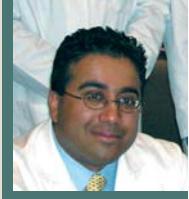
Hedeshian attended SUNY Upstate Medical University for his MD degree. University of Massachusetts-Memorial Medical Center was the site of his residency and research.



Mohir Hedeshian

• Dr. Subhasis Chatterjee

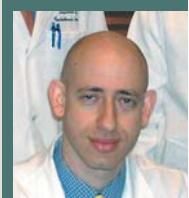
received his MD from the University of Wisconsin Medical School. His surgery residency and research fellowship was at the University of Pennsylvania School of Medicine.



Subhasis Chatterjee

• Dr. Eugene Kukuy

Kukuy attended Tulane University for his MD and his surgery residency. He completed a research fellowship at Columbia University.



Eugene Kukuy

• Dr. Alexander Moskovitz

received his MD degree at the University of California School of Medicine. His surgery residency was at the University of Washington.



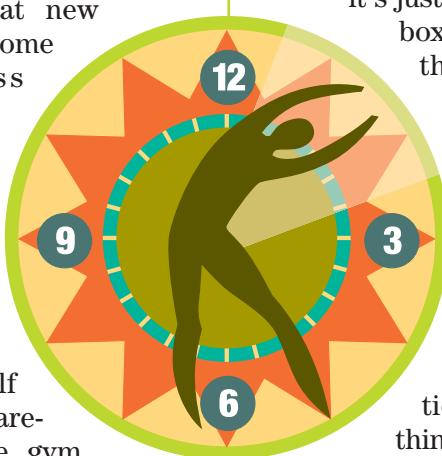
Alexander Moskovitz

After their second year of training, the residents will be eligible for the American Board of Thoracic Surgery Examination. During this first year, these residents have made valuable contributions to patient care in the department of Cardiothoracic Surgery.

Integrative Exercise makes getting in shape a walk in the park

If you had to pick one area where most people fall down in maintaining their health, it's staying with a long-term exercise program. It hasn't helped that new guidelines from some physical-fitness experts now recommend an hour and a half of activity each day. You can almost hear the collective outcry across the country: "An hour and a half every day! I can barely make it to the gym once a week!"

But there is hope for those not gym bound. Recent studies from the Mayo Clinic and other institutions have shown that the activities of everyday life—cleaning the



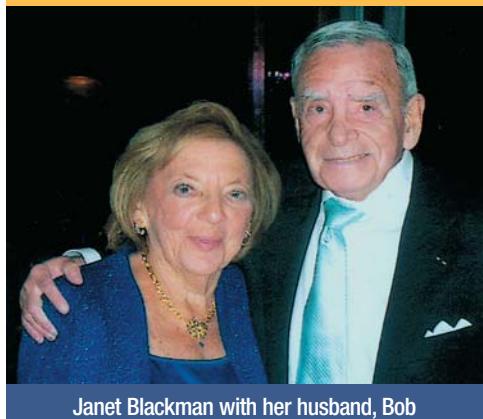
house, gardening, playing with children, walking the dog—if done on a regular basis throughout the day, provide as much benefit as intense workouts at the local health club. The important thing, experts say, is to avoid being sedentary. Keep moving, even if it's just to walk to the mailbox or park your car at the far end of the street or the mall parking lot, it all adds up to a healthier lifestyle. This new approach is called integrative exercise, and it is poised to revolutionize the way we think about fitness.

Linda Petlichkoff, past president of the Association for the Advancement of Applied Sport Psychology was quoted recently in the New York Times praising the new research. "For all too long

we've thought that being active means going to the gym, no pain, no gain." But with research now showing that nearly all movement done properly and repeatedly over the course of a day is good for people, "[it's] been the greatest positive change that I've seen, a redefinition of what it means to be active."

Want to get started? Try doing five or six activities during the day for about 10 minutes each. At first, you may want to keep a journal to make sure you've done enough, till you've got a routine down.

- Do any type of housework, the more vigorous the better.
- Hand wash the family car.
- Weed the garden.
- Take the stairs instead of the elevator.
- Park a few blocks from your destination and walk the rest of the way.



Janet Blackman with her husband, Bob

has made a remarkably fast recovery. "Two weeks after the operation, I was home making dinner for my family," Janet says. She attributes her rapid healing to a positive attitude, excellent care, and a willingness to give up some of her independent nature and follow Doctor's orders to the letter.

This spring Janet celebrated her only grandson's Bar Mitzvah with 200 guests in New York, and in the summer she and her husband will travel to their vacation home in Rhode Island, resuming an active life with family and friends. Lucky indeed. ■

Patient Profile: Janet Blackman

Nanuet, New York / Date of Surgery: June 21, 2005

Janet Blackman counts herself as one lucky 78-year-old. At a stress test at her doctor's office last year—an appointment she had put off for a long time—her physician found a life-threatening valve problem that needed immediate attention. Her daughter, a local anesthesiologist, contacted Dr. Karl Krieger for a consultation for her mother. Within weeks, Janet had valve replacement surgery. To the relief of her and her family, Janet

"I knew it was fortunate that they found the problem in the first place, so I decided to do everything they told me to do."

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comfortable for families and patients.

Another gift from patient Janet Blackman was a way for her to thank the doctors and nurses who took care of her when she had valve replacement surgery a year ago.

"I wanted to do something to show my gratitude, and my daughter suggested a gift in honor of Dr. Krieger. It was an unrestricted gift. I wanted them to use it for something they thought was important."



The department used the gift from Janet to support its medical education program.

"Donations from patients like Janet Blackman and Allan Rose are a critical part of our efforts to improve patient care and train the next generation of cardiothoracic surgeons," reports Dr. Krieger.

For information on how you can make a contribution, refer to the box below.

MAKE A GIFT

The Department of Cardiothoracic Surgery at NewYork Presbyterian's Weill Cornell Medical Center depends on many sources of revenue to maintain its status as a leading research center, care provider, and educator of future generations of health care professionals. A major source of support is the philanthropic vision of people who have come to know our work.

To make a tax deductible gift, please use the enclosed envelope.

For more information about the department, log on to: www.med.cornell.edu/heartsurgery or call 212-746-5151

Please write to us at: Director of Operations, Office of Development, New York Weill Cornell Medical Center, 525 East 68th Street, Box 123, New York, NY 10021 if you wish to have your name removed from lists to receive fund-raising requests supporting New York Weill Cornell Medical Center in the future.

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