



Commissioner O'Dowd testifies before the Assembly Budget Committee on April 14. Also testifying are Colette Lamothe-Galette, MPH, Executive Assistant, Policy and Strategic Planning, Dr. Arturo Brito, Deputy Commissioner, Health Systems Branch, William Conroy, Deputy Commissioner, Public Health Services Branch and Eric Anderson, Director, Management and Administration.

Commissioner, Senior Team Testify on Key Department Initiatives

By Mary E. O'Dowd, MPH, Commissioner
New Jersey Department of Health



Earlier this month, I participated in the first of two annual hearings before legislative budget committees presenting the Department's \$1.8 billion budget, which reflects Governor Chris Christie's priorities to strengthen the health care safety net, build healthier communities, and work smarter.

The budget strengthens our leadership on public health issues. New Jersey was the first state to ban the use of e-cigarettes in public places in 2010 as part of the Smoke Free Air Act. This year's budget proposes tax parity for e-cigarettes. E-cigarette use among middle and high school students has doubled between 2011 and 2012, according to the CDC, which considers increasing prices an effective strategy to curb youth smoking. This initiative is about protecting our children from a life-long addiction to nicotine.

In the area of health care, the budget continues to invest more than \$1 billion in hospitals and Federally Qualified Health Centers (FQHCs), specifically \$650 million in Charity Care, \$100 million in Graduate Medical Education and nearly \$167 million for the Delivery System Reform Incentive Payment (DSRIP) program. DSRIP is the first state subsidy program to reward hospitals for improving quality. The Department also continues to support FQHCs at the same rate for their care to the uninsured.

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Meningitis B vaccine clinic at Princeton University.

Cancer prevention and research is another priority for the Department with a total of \$44 million in funding for direct patient services, research and prevention. In terms of state dollars, it is the third largest component of the Department budget—after hospital funding and \$135 million for Early Intervention Services, which provides screening and therapeutic services for babies and toddlers who are developmentally delayed.

The Rutgers Cancer Institute of New Jersey receives \$18 million in state funding and the South Jersey Cancer Program-Camden receives \$5.4 million. The New Jersey Cancer Education and Early Detection Program

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Governor's Council for
Medical Research and
Treatment of Autism

Autism is estimated to affect 1 in 45 children in New Jersey, according to the Centers for Disease Control and Prevention.

Department Attends Autism Summit

April is Autism Awareness Month, and with CDC recently releasing a study estimating that autism impacts 1 in 45 children in New Jersey and 1 in 68 children nationally, the importance of ongoing research into the care and treatment of autism is critical.

On April 9, experts committed to advancing autism research attended the "Translational Research in Autism Conference," hosted by the Governor's Council for Medical Research and Treatment of Autism (Governor's Council), at Montclair State University, home of the New Jersey Autism Center of Excellence (ACE) Coordinating Center.

The Department of Health, through the Governor's Council has, since 2008, provided nearly \$25M in grants to fund new treatments and research into autism.

The ACE shares and promotes clinical research that advances best practices in the understanding, prevention, evaluation and treatment of autism, as well as providing oversight, technical assistance, research design and evaluation to position New Jersey as a leader in research nationally. The ACE is providing a collaborative model to build autism research capacity in New Jersey.

Cathleen Bennett, Director of Policy and Strategic Planning, for the Department delivered remarks at the conference where she noted:

"New Jersey is one of only four states with an Autism Registry that requires reporting by neurologists, pediatricians, nurses and other autism providers so children can be referred for resources and services. Approximately, 12,400 individuals through age 21 are registered.

During the past year, the state has worked closely with Montclair to build out ACE capabilities to help researchers translate what they have learned in their controlled lab studies to other settings, such as schools or provider offices. The ACE's Translational Research capability is the critical next step toward real world application of research discoveries."

Other topics discussed by attendees of the conference included:

- The new DSM classification system for autism spectrum disorder: What does it mean for the clinician and researcher
- Early Identification of ASD – Animal Models and Human Behavior: What are the latest advances in genetics and behavioral research which may aid us in identifying early ASD
- New Methods of Intervention: the role of technology for the delivery of services

For more information on Autism Awareness Month and efforts to improve the lives of those with autism, please visit:

<http://www.state.nj.us/health/news/2014/approved/20140401a.html>



Cathleen Bennett, Director of Policy and Strategic Planning, discusses the Department's Autism initiatives at the Autism Conference at Montclair University.

Drumthwacket goes Blue for Autism Awareness Month





April Was Minority Health Month Prevention is Power: Taking Action for Health Equity

The 2014 theme for Minority and Multicultural Health Month (MHM) – Prevention is Power: Taking Action for Health Equity is an apt reminder that prevention efforts are often most effective when it comes to battling chronic diseases – especially in minority communities.

The New Jersey Department of Health’s Office of Minority and Multicultural Health (OMMH) has been pursuing and promoting prevention strategies as a way to reduce disparities in New Jersey. In 2013, OMMH awarded 22 organizations a total of \$882,000 in Community Health Disparity Prevention Program Grants to implement evidence-based strategies, often focusing on prevention to reduce chronic disease and other illnesses in minority populations across New Jersey.

The grants were designed to support the goals of Healthy New Jersey 2020, the state’s ten year public health agenda aimed at improving the overall health of New Jersey residents, and focused on chronic illnesses such as asthma, cancer, diabetes, heart disease, and other areas related to chronic disease and illness. More information about the grants and the organizations they support is available at:

<http://www.state.nj.us/health/news/2013/approved/20131114a.html>

These types of grants support the broad efforts made during MHM to highlight disparities and efforts by the health care community to make real differences in the health of minority communities in New Jersey. The need cannot be overstated, especially considering the following:

- The prevalence of diabetes among Blacks (12.4%) and Hispanics (12.4%) is nearly double that of Whites (6.7%); the death rate from diabetes is significantly higher among Blacks (40.6) and Hispanics (22.9) compared to Whites (17.5), and Asians (13.7)
- The death rate from stroke is significantly higher among Blacks (45.1 per) compared to Whites (31.9), Hispanics (20.2) and Asians (18.0)
- The death rate from heart disease is significantly higher among Blacks (205.5) compared to Whites (189.3), Hispanics (106.9) and Asians (87.6)

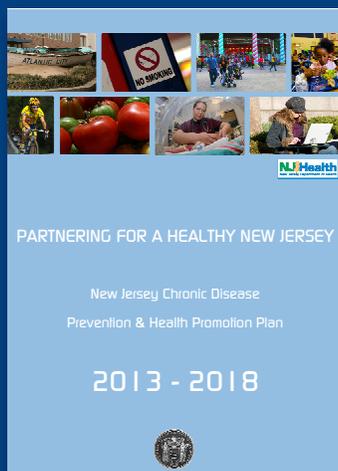
Rate data is per 100,000 population

The Department commends all of the organizations that held MHM events in April to highlight disparities that impact minority groups in New Jersey and the nation.

Additional information about OMMH and its efforts to improve minority health is available at: <http://www.state.nj.us/health/omh/index.shtml>



Dr. Carolyn Daniels, Executive Director, OMMH, NJDOH, (back right) with Dr. James McKinney, Medical Director, Rutgers Robert Wood Johnson Medical School (RWJMS), Dr. Sunanda Gaur, Director, South Asian Total Health Initiative, and Varsha Singh, MSN, APN-C, Advance Practice Manager, RWJMS, in New Brunswick, on April 23rd, at a seminar on health issues impacting South Asian cultures.



Click to read the Department’s *Chronic Disease Prevention & Health Promotion Plan*.

Chronic Disease Prevention and Control Services



Cathleen Bennett, Director of Policy and Strategic Planning, delivers remarks at the New Jersey Stroke Conference in New Brunswick on April 3.



Yong Sung Lee, PhD, Debra Virgilio, RN, MPH, Markos Eza, PhD, Emmanuel Noggoh and Abate Mammo, PhD from the Office of Health Care Quality Assessment, in front of a presentation on hospitalizations for acute stroke trends.

Department Hosts State Stroke Conference

On April 3, more than 585 speakers, exhibitors, staff and healthcare professionals from across the state attended the New Jersey Stroke Conference in New Brunswick to discuss the latest research and treatment options relating to the clinical care of stroke victims in New Jersey. The conference was hosted by the Department, as well as the Northeast Cerebrovascular Consortium, The American Heart Association and The American Stroke Association.

Every 30 minutes someone in New Jersey has a stroke, and 39% of stroke patients die or become severely disabled while hospitalized, according to 2013 data from the New Jersey Acute Stroke Registry. Stroke is the fourth leading cause of death in the State and the number one cause of disability.

Cathleen Bennett, Director of Policy and Strategic Planning spoke at the conference where she noted, "Despite the recent attention given to stroke in New Jersey, stroke response remains low among residents as exhibited by the fact that fewer than 50% of stroke victims arrive to stroke centers by EMS. About 40% continue to use private transportation to get to the hospital instead of calling 9-1-1 as recommended."

During the conference, Department of Health staff members from the Office of Health Care Quality Assessment presented a poster on **Hospitalization Trends for Acute Stroke in New Jersey**. The presentation was based on the Department's analysis of trends in volume of acute stroke hospitalizations, acute stroke-related mortality, and patterns of hospitalization by demographic characteristics of acute stroke patients.

Key conclusions from the study include:

- Acute stroke hospitalizations in New Jersey increased from 2007 – 2012
- Stroke affects all adults with those 65 years and older accounting for more than 70% of hospitalized patients
- The average length of hospital stays from stroke have declined from 8 days in 2005 to 6 days in 2012

The full presentation is available at: <http://goo.gl/XcCUiS>

According to the NJ stroke registry, more than 21,000 hospitalizations in 2013 were due to stroke – a sudden death of brain cells due to lack of oxygen when blood flow to the brain is impaired by blockage or rupture of an artery. More than 1,100 of those patients died while in the hospital.

The signs of stroke are sudden and include numbness or weakness of the face, arm or leg – especially on one side of the body; trouble speaking or understanding, walking or seeing in one or both eyes; dizziness, loss of balance or coordination; or severe headache.

Seconds count. Fewer than 50 percent of stroke victims call 9-1-1, choosing private transportation to the hospital, even though calling an ambulance is recommended because fast response can minimize stroke damage.



What's New at ShapingNJ

Three events highlighted *ShapingNJ* during April. On the 29th, a public screening of "Generation at Risk: Joining Forces to Fight Childhood Obesity" was held at the War Memorial in Trenton. The 15-minute documentary film that includes Commissioner O'Dowd, takes an in-depth look at how experts from across New Jersey are working to combat childhood obesity. The film was produced by the Rutgers Center for Digital Filmmaking.

The screening was part of a program co-sponsored by Rutgers, the New Jersey Council for the Humanities, and *ShapingNJ* that also featured a panel discussion led by Deputy Health Commissioner Arturo Brito. The panel included experts in research and nutrition and emphasized strategies that could improve children's access to healthy foods in New Jersey.

Also on the 29th, Horizon Blue Cross/Blue Shield of New Jersey teamed with the Somerset Patriots and *ShapingNJ* to launch a "Healthy Plate" concession stand at the baseball park in Bridgewater Township.

The event highlighted a new opportunity for Patriots fans to purchase healthy foods at a game. Choices feature calorie and nutritional information and include a fresh fruit cup; grilled vegetable, lean roast beef, and turkey sandwiches; garden and Caesar salads; vegetarian chili and frozen yogurt.

On Saturday April 26th, the NJ Marathon, a *ShapingNJ* partner held the first "ShapingNJ 5K Run" along the ocean front in Long Branch as part of a weekend of events leading up to the full marathon on April 27th. Peri Nearon, Division of Family Health Services, kicked off the event by providing remarks on behalf of the Department.

The marathon draws thousands of participants and spectators throughout the weekend. *ShapingNJ* hopes this event will become an annual tradition.



Mom's Quit Connection Helps Moms Stop Smoking

Mom's Quit Connection (MQC) links pregnant women and new mothers in New Jersey who want to quit smoking with Certified Tobacco Treatment Specialists to help them decrease the number of cigarettes they smoke with the goal of becoming smoke free. Funded by the Department, this free, individualized counseling can make a critical difference in the health of mother and baby.

Smoking during pregnancy increases the woman's risk for serious obstetrical complications, including miscarriage. Maternal smoking can cause birth defects such as cleft lip or palate, premature birth and low birth weight and sudden infant death syndrome.

Of the 471 women served by MQC in 2013, most were referred by their healthcare providers, who learned about MQC through its ongoing outreach program. During 2013 alone, MQC staff conducted 26 training workshops for nearly 350 clinicians and other healthcare professionals.

Once enrolled, a woman can contact MQC for help at any time. Every woman referred to the service receives self-help materials. Those who elect counseling – usually provided one-on-one – can choose face-to-face and/or telephone sessions. While 2-3 sessions is the average, more help is available if needed.

Women may call MQC directly toll-free at 1-888-545-5191 to request information or speak with a counselor.



Camden Food Innovation Grants



"The best way to ensure that your dignity and autonomy are honored should you become unable to make your own health care decisions is by sharing your wishes about end of life medical treatment," said Commissioner O'Dowd.

Food Innovation Grant Available

The Community Foundation of South Jersey (CFSJ) has created a new pooled fund – the Camden Food Innovation Grant Fund – to seed innovative projects that create economic opportunity and foster healthy eating habits in the City of Camden. The Fund builds on findings from the Delaware Valley Regional Planning Commission's food system planning efforts and the Campbell Healthy Communities program, both CFSJ partners in this initiative.

In addition to CFSJ support, grant funds are made possible with generous support from the following funders:

Campbell Healthy Communities program
 Delaware Valley Regional Planning Commission (DVRPC)

Request for Proposal

Proposals Due: Friday, May 16, 2014, 5 pm

To download the RFP and register for the pre-proposal meeting, go to:
<http://www.communityfoundationsj.org>

Christie Administration Recognizes National Healthcare Decisions Day April 16

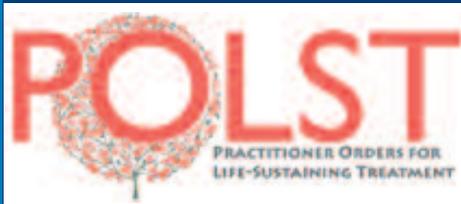
In recognition of April 16 as National Healthcare Decisions Day, the New Jersey Department of Health is encouraging Garden State residents to discuss their healthcare preferences and plan ahead for end-of-life care decisions with their physicians and family. National Healthcare Decisions Day highlights the importance of documenting your health care preferences.

"The best way to ensure that your dignity and autonomy are honored should you become unable to make your own health care decisions is by sharing your wishes about end of life medical treatment," said Commissioner O'Dowd. "By reviewing options for care and having discussions in advance, individuals can alleviate some of the challenges that come along with a serious illness."

Individuals should consider what type of care and treatment they would prefer near the end-of-life. For example, as part of planning they may want to review palliative care and hospice programs. Palliative care focuses on improving life and providing comfort to people of all ages with serious, chronic, and life-threatening illnesses. Hospice programs provide medical services, emotional support and spiritual resources for those with terminal illness. Hospice also offers support to family members as they face the challenge of caring for a loved one with a terminal illness. Individuals may also want to consider specific medical interventions they would like to have when they are near the end of life. Some people would prefer to have every medical treatment taken to prolong their life, while others may not want to have their life sustained with medical support such as the use of a ventilator or feeding tube.

Read the entire press release:

<http://nj.gov/health/news/2014/approved/20140415a.html>





Commissioner O'Dowd presented a proclamation to Cynthia Dixey, President-elect of the American Society for Clinical Laboratory Science - NJ Chapter, recognizing National Medical Laboratory Professionals Week, April 20 - 26.

The Department Welcomes...

Susan Dougherty, who has joined the Department as Assistant Commissioner, Division of Certificate of Need and Licensing. Susan brings over 10 years of public experience representing the Department as Section Chief and as Deputy Attorney General. She has represented the Department on matters including charity care, patient safety, certificate of need, and licensing actions.



Dr. Arturo Brito, Deputy Commissioner, hosted a panel discussion on the documentary, "Generation at Risk: Joining Forces to Fight Childhood Obesity," at the War Memorial in Trenton on April 29.

Community Outreach & Events
April 2014

- April 4** – Commissioner O'Dowd delivered remarks on the Department's Health Information Technology efforts at the "Big Data," conference at Princeton University.
- April 24** – Commissioner O'Dowd gave an address to laboratory professionals for National Medical Laboratory Professionals Week in East Windsor.
- April 24** – Alison Gibson, Assistant Commissioner, presented at the 6th Annual Research Conference for Nurses at Fairleigh Dickinson University.
- April 24** – Commissioner O'Dowd gave a presentation on Health Information Technology at the "Tigerlabs Digital Health Innovation in Context Conference," in Princeton.
- April 29** – Dr. Arturo Brito, Deputy Commissioner, gave introductory remarks and hosted a panel discussion on the documentary, "Generation at Risk: Joining Forces to Fight Childhood Obesity," at the War Memorial in Trenton.
- April 30** – Commissioner O'Dowd delivered remarks at "FQHCs & Hospitals Working Together," conference in Hamilton.

Department of Health Staff Notes



- Lisa McHugh**, Research Scientist, attended the Association of Public Health Laboratories Right Size Influenza Virologic Surveillance Stakeholders Meeting. For the past two years, Ms. McHugh has served on the Advisory Group for the Right Size Influenza initiative that has developed guidance documents on influenza virologic surveillance activities throughout the United States.
- Janet Kotkin, and Debra DiCello**, Supervisors of Inspections, Health Facilities Evaluation and Licensing, attended the Expanding Issues in Aging and Mental Health conference. The conference examined issues relating to our aging population and the treatment of dementia and mental health.
- Calliope Alexander**, Environmental Scientist, attended the 66th Annual Interstate Seafood Seminar and the FDA Sponsored Regional Manager's Meeting. Ms. Alexander is the Seafood/Shellfish Project Coordinator of the Food and Drug Safety Program for New Jersey.
- Margaret Lumia, Alicia Stephens and Karen Worthington**, attended the NIOSH/ State Occupational Lung Disease Surveillance Meeting which brings together state and federal occupational health professionals from across the nation for the exchange of important scientific information relating to occupational health surveillance activities.
- Loretta Dutton**, Research Scientist, HIV, STD & TB Services attended the National Alliance of State & Territorial Directors meeting that discussed effective responses to HIV, Hepatitis & Overdose among drug users.



On April 4, Commissioner O'Dowd spoke at the Big Data and Health: Implication for New Jersey's Health Care System conference held at Princeton University.

Under the leadership of the Department, we've also made significant progress in the use of HIT. Three regional planning teams are merging data from public health and hospitals to improve patient outcomes.


 PHAB

*Advancing
public health
performance*

Commissioner's Message, *continued from page 1*

(NJCEED), which receives \$12 million, screened more than 25,000 low-income residents last year, an increase of 4,500 women since last year, due primarily to the Governor's \$3.5 million increase in funding.

Improving maternal and child health is another critical component of our work. We are collaborating with the March of Dimes and the National Governor's Association to reduce premature births and improve birth outcomes. While the Department is taking the lead, this is a coordinated effort among the departments of Education, Children and Families, and Human Services. Our progress was recognized when the state was recently awarded a B on the March of Dimes Premature Birth Report Card, up from a D in 2008, and our initiatives were cited as contributing factors.

The Department has collaborated with communities on successful disease prevention and public education efforts. Recently we worked with Princeton University and other partners to implement infection control activities in a campaign to reduce the risk of meningitis, resulting in more than 90 percent of students receiving a vaccination against the Serogroup B strain of the bacteria. As another example, the Department worked closely with the Monmouth County Health Department to manage more than 50 cases of mumps in an outbreak last summer that affected the entire state. We partnered with local health agencies to monitor for possible new illness and provide vaccinations.

The Department also remains committed to working smarter within our own agency. We are pursuing public health accreditation as part of a national movement to standardize services across local and state health agencies. To date, only two states have achieved accreditation.

Under the leadership of the Department, we've also made significant progress in the use of Health Information Technology. Three regional planning teams are merging data from public health and hospitals to improve patient outcomes. These teams are sharing data to identify frequent Emergency Department users and improve access to primary care to better manage illness and avoid hospitalization. This work will be expanded through our Health Information Network, a statewide exchange that allows providers, hospitals and other stakeholders to share patient information securely and in real-time.

By sharing data, providers can view critical information, track patients' medications and test results, avoid unnecessary procedures and improve outcomes. The network allows providers to access immunization status and exchange information statewide. The network connects 62 hospitals, more than 9,000 physicians, long-term care providers, laboratories and radiology centers. The Department used \$11.6 million in federal funds to develop regional health information organizations and connect them through the network.

Through all these efforts the Department continues to strive to improve and protect the health of our residents.



FDA Proposes to Extend its Tobacco Authority to Additional Tobacco Products, Including E-cigarettes

As part of its implementation of the Family Smoking Prevention and Tobacco Control Act signed by the President in 2009, the U.S. Food and Drug Administration today proposed a new rule that would extend the agency's tobacco authority to cover additional tobacco products.

Products that would be "deemed" to be subject to FDA regulation are those that meet the statutory definition of a tobacco product, including currently unregulated marketed products, such as electronic cigarettes (e-cigarettes), cigars, pipe tobacco, nicotine gels, waterpipe (or hookah) tobacco, and dissolvables not already under the FDA's authority.

"This proposed rule is the latest step in our efforts to make the next generation tobacco-free," said HHS Secretary Kathleen Sebelius.

Consistent with currently regulated tobacco products, under the proposed rule, makers of newly deemed tobacco products would, among other requirements:

- ❖ Register with the FDA and report product and ingredient listings
- ❖ Only market new tobacco products after FDA review
- ❖ Only make direct and implied claims of reduced risk if the FDA confirms that scientific evidence supports the claim and that marketing the product will benefit public health as a whole
- ❖ Not distribute free samples.

Read more: <http://goo.gl/7Jum80>

Poison center calls involving e-cigarettes



Report Shows 20-year US Immunization Program Spares Millions of Children from Diseases

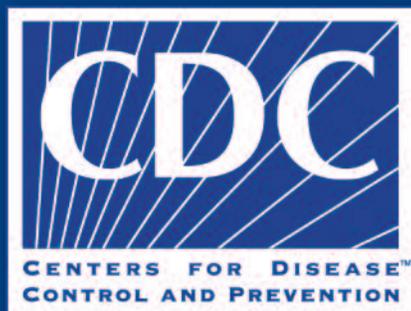
The CDC estimates that vaccinations will prevent more than 21 million hospitalizations and 732,000 deaths among children born in the last 20 years. Despite the U.S. immunization program's success, according to CDC officials, 129 people in the U.S. have been reported to have measles this year in 13 outbreaks, as of April 18.

In 1994, the Vaccines for Children program (VFC) was launched in direct response to a measles resurgence in the United States that caused tens of thousands of cases and over a hundred deaths, despite the availability of a measles vaccine since 1963. The VFC program provides vaccines to children whose parents or caregivers might otherwise be unable to afford them.

This year's 20th anniversary of the VFC program's implementation is occurring during an increase in measles cases in the U.S. In 2013, 189 Americans had measles. In 2011, 220 people in the U.S. were reported as having measles--the highest number of annual cases since 1996.

"Thanks to the VFC program, children in our country are no longer at significant risk from diseases that once killed thousands each year," said CDC Director Tom Frieden, M.D., M.P.H.

Read more: <http://goo.gl/6wthXf>



'Cancer Matters'
Brought To You By:

RUTGERS
Cancer Institute
of New Jersey

Enhancing Clinical Trial Access for New Jersey Cancer Patients

By Rob Forman and Michele Fisher

Cancer patients throughout New Jersey will have greater access to the latest generation of clinical trials, including several never offered before, as part of a research program funded by a \$4.25 million federal grant whose two leading recipients include Rutgers Cancer Institute of New Jersey.

Clinical trials that test new more targeted medications offer patients additional opportunities when standard therapy is not effective for their cancer.

The five-year grant from the National Cancer Institute will allow Rutgers to pool resources and expertise with the University of Wisconsin (UW) Carbone Cancer Center to develop clinical trials, and have access to additional clinical trials as part of a network of cancer centers throughout the nation.

This grant comes at what may be an especially opportune time – when an approach to treating cancer called “precision medicine” has gained traction and importance.

Precision medicine includes treatments that are tailored to the specific genetic profile of each patient’s cancer, according to Robert DiPaola, MD, director of the Rutgers Cancer Institute of New Jersey, and is widely seen as a major advance over previous methods of treatment for many cancers, which often used a one-size-fits-all approach.

Dr. DiPaola, who has overseen his institute’s efforts to develop new forms of precision medicine as well as clinical trials to help put them into use, says the combined resources of the two institutions can both broaden the scope of research on new cancer treatments and move it forward more quickly. “By working together with colleagues at UW Carbone Cancer Center,” DiPaola explains, “we have enhanced opportunities to develop new mechanisms by which to guide more tailored therapies for patients.” The two institutions will also be able to make data from their clinical trials more valuable by drawing patients from the heavily populated states of New Jersey and Wisconsin, as well as from other cancer centers across the country.

As one of the first cancer research collaborations with a fellow Big Ten University since Rutgers became a member of the Committee on Institutional Cooperation (CIC), the academic arm of the Big Ten Conference, this clinical trial project is also part of a major expansion in the overall scope of Rutgers research. The consortium comprises 15 top-tier universities, including the University of Chicago, the members of the Big Ten and the Big Ten’s incoming members – Rutgers and the University of Maryland. Rutgers joined the CIC last July, a year before its entrance to the Big Ten.

The Rutgers Cancer Institute of New Jersey is the only NCI-designated Comprehensive Cancer Center in the state, and one of just 41 across the country.



Robert DiPaola, MD, director of the Rutgers Cancer Institute of New Jersey.



Video: National Institutes of Health - Cancer Clinical Trials: What is a Clinical Trial?