The early August day started off like so many others for Franklinville’s Jason Flood. A pilot and aerobatic competitor, he had taken a summer job flying advertising banners along the Jersey Shore coastline. On this particular afternoon he had one last banner to fly before meeting up with some friends in Hammonton. He stopped at the Ocean City Municipal Airport to refuel. After that, his life was never the same.

Shortly after heading back into the sky, engine failure caused Jason’s plane to crash and the impact left him wedged inside the crumpled wreckage. It took 45 minutes...
to extract him from the plane and he emerged with several broken bones—both ankles, his right fibula, right femur, a bunch of ribs—and other massive internal injuries, including a lacerated liver. Once at the hospital, he lost his left kidney and his spleen. But the biggest threat to his life was a ruptured aorta, a problem that the hospital wasn’t equipped to fix.

It was then he would take his second flight of the day, this time on a helicopter transport to Cooper University Hospital. Within 30 minutes, he was on the operating table in the hands of Dr. Joseph Lombardi. Using a special device specifically designed for the aorta disruption—but not yet commercially available—the doctor and his team were able to repair the issue so that his competing injuries could get attention.

Jason would spend three weeks in ICU in an induced coma, recovering from the crash. “The type of injury he had, a lot of people don’t make it to the hospital,” says Dr. Raymond H. Green, a trauma surgeon who also treated Jason, who went from bed to wheelchair to learning how to walk again.

“He was fortunate.”

“Waking up and figuring out my whole life has changed and the struggles I was up against, I went from living a 20-year-old life where you want to be independent and on your own to all of a sudden you need people,” Jason says.

Despite his tough recovery, Jason was remarkably back in the cockpit 10 months later, competing in an aerobatic contest in Cape May County. He finished second. “I thought numerous times I would never do that again,” he says. “I told my dad countless times to sell the airplane. I thought it was all over.”

It’s no wonder Jason hasn’t forgotten the people who helped get him back up in the air. “I’m very thankful they have a great team and everyone pulled together to put me back together and give me a second chance at life,” he says. To this day, he stays in regular contact with the doctors and nurses and visits Cooper frequently.

“Just seeing him here is pretty amazing,” says Lombardi. “If I could give you a glimpse of what this kid looked like. Even three months afterwards …. it’s amazing.”

Though he can’t remember a portion of that day, that August afternoon is firmly implanted in Jason’s mind every time he navigates the clouds above. “There are moments just before sunset and I’m up there crying to myself because I never thought I’d be able to fly my airplane again.”

LATOYA WRIGHT

On Easter Sunday 2012, LaToya Wright woke up with a throbbing headache. The Maple Shade resident was four-and-a-half months pregnant and was afraid she was having a miscarriage because she was vomiting and couldn’t get her bearings. She went to the emergency room at Kennedy in Cherry Hill where she was told the shocking news: Her brain was bleeding in two places.

Wright had suffered a ruptured arteriovenous malformation (AVM), a rare congenital condition that consists of an abnormal collection of blood vessels in which arterial blood flows directly into draining veins without normal vessels in between. Emergency brain surgery was scheduled and she was airlifted to Kennedy’s campus in Washington Township.

“I didn’t know if the baby was going to make it,” LaToya recalls.

“We were concerned certainly because she was pregnant, [because of] the tendency for these AVMs to bleed more during pregnancy,” says Dr. Anil K. Nair, a neurosurgeon who operated on Wright along with his colleague, Dr. Ethan A. Benardete.

“The pregnancy doesn’t change the surgical approach, but it definitely changes the management because a fetus can be very fragile and may not respond favorably to prolonged surgery or blood transfusions,” Benardete says.

Prior to surgery, LaToya was made aware of possible complications from the procedure. She was told she may be blind, or that she could lose some of her speech. She would wind up needing to learn how to walk and talk again, but four months later, she delivered a healthy baby girl weighing 7 pounds, 10 ounces. In a tribute to the hospital and the doctors, she named her daughter Kennedy.
LaToya will need to remain on anti-seizure medication for life, but her medical triumph has left her with a renewed outlook. “It was honestly the worst experience of my life, but also humbling. I always threw myself into work and I’ve slowed down a lot more. To learn how to walk again at age 33, you never think in a million years that you would go through something like this.”

Two years later, Madison is attending Bishop Eustace and back to playing the sports she loves. And despite not being fully cured of the cancer, she remains resilient, even raising money to give back to CHOP. “My friends and I made hair ribbons and sold them to give all the money to the Child Life program, which gives all the children [at CHOP] toys and stuff to play with.”

Dr. N. Scott Adzick, CHOP’s surgeon-in-chief and the one who performed the surgery, seeing a girl like Madison on the road to recovery is the ultimate reward to the profession. “We have a saying at CHOP: You save a child, you save a lifetime,” Adzick says.

NADIA MARANSKY
Merchantville’s Nadia Maransky was 23 weeks pregnant with her second child, a girl to be named Grace, when she began to feel out of sorts. Concerned, she went to her OB/GYN to get checked out. That’s when things took a dramatic turn.

“They told me things were going to get really bad,” she recalls. Nadia was rushed to the hospital and told she was going to deliver the baby. When they checked for the heartbeat, they couldn’t find it. Grace was delivered stillborn.

Helping Nadia and her husband Jim navigate through this difficult time was Dr. Ronald J. Librizzi, medical director of specialty care at Virtua. “I don’t think it’s any different if you lose a baby at three weeks or 23 weeks,” he says. “You’ve bonded with that baby. You don’t anticipate that’s going to happen.”

“It was the worst time in our lives, but Dr. Librizzi was honest and could use words we could understand,” Nadia says of the doctor’s straightforward approach. “He also held my hand in getting pregnant again and encouraging us to try again, and then comes our youngest son, who is going to be 3 in a couple of days.”

And Nadia is now pregnant with the couple’s third child. A far road from that fateful afternoon, she fully credits the professional care and personal compassion Dr. Librizzi gave her family with helping them return to a sense of normalcy. They have formed a bond that extends well past office hours. Dr. Librizzi finds time to text Nadia out of the blue or just call to say “hello” and check in on her.

“My strength is Dr. Librizzi,” Nadia says. “He talks from his heart and he doctors from his heart. There’s nobody else’s care I’d rather be under.” It’s high praise to be sure, and it’s had a direct effect on some of Nadia’s girlfriends.

“I know girls who are trying to get pregnant now just so they can be under his care,” she adds.

MADISON POWELL
Medford’s Madison Powell was just like many other 12-year-olds. She had lots of friends, enjoyed spending time down the Shore, and was active in sports, especially soccer and field hockey. Then she got the news that no one wants to hear, whether they are 12 or 112—she had cancer.

Specifically, Madison was diagnosed with thyroid cancer and underwent surgery at the Children’s Hospital of Philadelphia to remove her entire thyroid and more than 25 of her lymph nodes. She then received multiple radiation treatments and had to go on a special low iodine diet that consisted of mainly fruits and vegetables.

For most 12-year-olds, this could seem overwhelming, but Madison took things in stride. “I feel like it was more annoying than awful,” Madison says of the experience, claiming the only thing that’s changed in her life really is when “people ask, ‘Why are you taking pills?’ or what the scar on my neck is.”

“It’s a very treatable form of cancer, but it’s still cancer, so it needs to be followed closely,” says Dr. Andrew Bauer, medical director of CHOP’s Pediatric Thyroid Center. “Things can happen really slowly, which is an advantage, but it can take a lot of patience for the family.”
LEILA KOTLER JOFFE

Leila Kotler Joffe was 36 when she felt something in her breast. After a mammogram and an ultrasound, she was told to come back in six months. When Leila asked to speak to a doctor, she was denied.

That’s when she placed a call to her husband, a cardiologist at Lourdes, in hopes he could call in a favor with one of his colleagues. That colleague was Dr. Kathleen Greatrex, the hospital’s chair of radiology and nuclear medicine.

“I found another mass and it was at that point I said, ‘We can’t wait. This is not something we can just sit on,’” Greatrex recalls. “I was afraid for her.”

Leila had a biopsy on a Friday and after a nervous weekend, received the results the following Monday: She had breast cancer. A week later she had a double mastectomy, followed by chemotherapy and radiation.

“This woman saved my life,” Leila asserts. “If I waited six months, it could have been a worse scenario.”

Over time, the two have formed a great bond, often turning up at the same breast cancer awareness events to help spread the message.

“I am emotional when I see her... I’m so grateful that I have this purpose on this earth to help,” says Dr. Greatrex.

And Leila is also grateful for Dr. Greatrex’s presence in her life, even if they met due to unfortunate circumstances.

“No matter how hard that first year was with the chemo and the operations and the radiation, the outcome is life and it’s the greatest gift of all, so I’m very blessed.”

CARA GARRISON

Cara Garrison gave birth to her first child last November and she wasn’t at all prepared. Not because it was the first baby for her and husband Bruce, but because her daughter was due three months later, in February.

“People say, ‘The day I had my child was the best day of my life,’” Cara says. “To me, it was the scariest day of my life.”

When Cara’s water broke that November day, she was rushed to the hospital, and with the help of Inspira’s Dr. Muhammad Usman Anwar, gave birth at just 28 weeks. Her newborn daughter weighed 2 pounds, 10 ounces and would stay in the NICU for 73 days. The Garrisons spent Thanksgiving, Christmas and New Year’s Day by her side. The baby was finally discharged a week before her original due date.

“When you try and wrap your head around it... the day before you are fine,” Cara, a Commercial Township resident, says. “You can’t sleep because you’re thinking, ‘What the hell just happened? Am I OK? Is she OK?’”

“It can be challenging,” Dr. Anwar says of premature birth. “[But] mom and dad were very upbeat and supportive, but very nervous. I think it was comforting to them that someone came and talked to them and laid down the facts of what we can do. Interaction with the family eliminates some of their anxiety and helps form a connection and a relationship.”

In addition to crediting Dr. Anwar’s care with helping them get through, the Garrisons also are in awe of the NICU nurses.

“We’re still friends with some of the nurses because they formed such a bond with us. You get to know someone when you spend eight hours a day with them,” Cara laughs. “They’re amazing people; they are real-life guardian angels.”

To hear Anwar tell it, these kind of stories validate his desire to help others.

“Taking care of a premature baby in an intensive care ward, it’s a passion and a desire to make a difference. Seeing what a family goes through emotionally, when the baby goes home, that is very satisfying.”
Patrice Schneider heads up the Congestive Heart Failure Clinic at Lourdes Medical Center of Burlington County. That is where she encountered Fred Hill, an elderly patient with a history of heart issues who hadn’t been feeling himself of late.

“Mr. Hill was deemed to have low blood pressure and a very wide, ugly EKG with symptoms of congestive heart failure. We gave him some medication and sent him home for a few days and he was OK until his subsequent visit,” Schneider says.

That is when they noticed Fred wasn’t making any progress. He arrived at Lourdes Medical Center of Burlington County with low blood pressure and a weak heart.

“He was on the verge of cardiogenic shock,” recalls Dr. Michael Horwitz.

After an examination, it was discovered the Burlington Township resident had a lethal arrhythmia. Doctors tried to speed up his heart rate, but it did not last, and eventually Fred would be shocked by his own defibrillator. Doctors then tried to re-program his defibrillator, but to no avail. He was emergently transferred to a facility to undergo cardio ablation, in an effort to correct his abnormal heart rhythm.

“Right before his transfer,” says Dr. Horwitz, “he started to deteriorate.”

It was at that point that Fred suffered cardiac arrest and had to be administered real membrane oxygen, which provided him with respiratory and cardiac support, as well as a mechanical ventilator.

“He essentially died and was brought back,” Dr. Horwitz says.

“I remember absolutely nothing,” Fred offers.

Since the incident, Fred has seen his
health return. The 80-year-old is very compliant, taking all his medication as directed and following both Dr. Horwitz and Schneider’s orders routinely. And he’s formed a bond with the two, giving them hugs when he sees them and making sure they know how grateful he is for helping save his life.

“All I know is I was blessed enough to be saved by these guys,” Fred says. “I was not ready to go yet. It’s a miracle I’m still here to discuss this and I can attribute it to the care I received.”

**GREG LAWSON**

Some of us brush off our annual doctor’s appointments, but Greg Lawson of Moorestown is living proof that a routine visit can change everything. Lawson, a classic car enthusiast and grandfather who has been active his entire life, decided to start with regular cardiac visits at age 50 because of his family history. And it was that precautionary step that led him to Jefferson University’s cardiac center in Voorhees almost a decade ago.

“I put myself in the care of Jefferson because I thought it was good behavior,” says Lawson. “I had no symptoms, I’ve never had a chest pain. So I never had a reason to believe that anything was wrong with my heart.”

Lawson found himself in the hands of an up-and-coming Jefferson cardiologist, Dr. David O’Neil. Now board certified in cardiovascular disease and internal medicine, O’Neil was just two years into his career when Lawson’s curious case fell into his lap. “It was important to me to have a doctor whose education was fresh and who was associated with a world-class cardiac system,” says Lawson. “When I go to buy an automobile, I figure out the best quality decision I can make. And lo and behold, the best decision in healthcare I could make was David.”

And Lawson’s decision to choose O’Neil soon paid off.

“I convinced him to get a stress test, which came up abnormal, and from there he underwent a cardiac catheterization which found multiple blockages,” explains O’Neil. “He went from having no heart problems to needing bypass surgery relatively quickly.”

The subsequent quadruple bypass may have meant a long and difficult recovery for Lawson, but it also meant a long and happy life—all because of early detection.

“We all develop coronary disease to one degree or another, and most of us don’t have the perfect lifestyles,” says O’Neil. “But to really hook yourself up with doctors that are interested in your heart in the same ways you are makes all the difference.”

Since the procedure, their relationship has developed into a friendship; O’Neil says they even text back and forth to set up regular check-ups. “When I first met him I was pretty early in my career, and the level of appreciation and communication we have had has been such a rewarding experience,” O’Neil says.

Lawson is just happy his doctor—and friend—has kept him doing the things he loves.
“Not only was David keeping me on the field and playing, but he allowed me to meet two more grandchildren and finish the restoration on my ’55 Chevy, and on my ’68 Cadillac,” Lawson says. “So how do you say thank you to that? You keep going, and I go to him. And when he’s made his transitions through his career I’ve gone to him. I’m going to be a pretty tough client to fire.”

**AMY KITER**

The aches that come with arthritis are all-too-familiar for many senior citizens, but for 34-year-old Amy Kiter the pain has followed her through life. Kiter was diagnosed with juvenile rheumatoid arthritis at the age of 4, and her family was told to brace for the worst as she got older. The Woodbine resident’s problems only worsened at age 12, when she was hit by a car while riding her bike to school. The injury, combined with her already damaged joints, mainly affected her ankles and left her practically immobilized.

And that’s a lot to take in for Kiter, a self-professed “outdoorsy” type who loves hiking and traveling with her fiancé and their dogs. “We went out to Wyoming in 2011 and by then I had a hard time even walking up the handicap ramps,” she says. “We love to travel but all we could do was get out of the car to take pictures.

“I needed help, and I had been needing help for a really long time,” she says. The most common procedure to fix a problem like Kiter’s is ankle fusion, which would take away her ability to bend both ankles and limit all mobility for the rest of her life. And for the always-active Amy, that wasn’t good enough. “There were no doctors willing to touch my feet because ankle replacement surgery was relatively new and they only tended to do it on older patients,” she says.

Out of options and almost out of hope, Kiter turned to the Rothman Institute’s Dr. Steven M. Raikin. Raikin is the director of foot and ankle services, board certified in orthopedic surgery and operating out of their Marlton location. For Kiter, he was also a last chance at a pain-free, functional life.

“When I first saw her I was in shock, she had such a big problem,” Raikin says. “We got to talking and I saw how motivated she was and how determined she was, and I really wanted to help her. We decided to do ankle replacements on both ankles, despite her young age, to try and regain her functionality and help her pain.”

Kiter underwent her first full ankle replacement in 2012, followed by another procedure last October. Now almost a year into the recovery process, Kiter has a new lease on life.

She also has no shortage of praise for the surgeon who saved her feet, but Raikin remains modest. “Patients always say to me, ‘What gift can I give you?’ My gift is that look, the pain-free look that shows that my patients are happy and functioning,” he says. “And Amy has been a gift to me, to see her now is the best gift.”

Kiter still credits her doctor with helping her. “Dr. Raikin was the only one that was willing to help me. He gave me my life back,” says Raikin. “We’re planning all new trips, anywhere I can go. Anywhere that life can take me.”