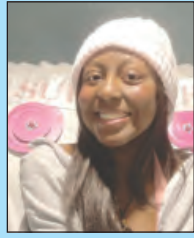




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**ONCOLOGY:** Young  
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Dr. Adriana Bonansea-Frances

## Vaccines: The Cornerstone of Preventive Medicine in Miami-Dade

BY ADRIANA BONANSEA-  
FRANCES, MD

Preventive medicine is more than an approach to health; it is the foundation of healthier, longer lives and stronger communities. As physicians, we understand that prevention is always more effective, more humane, and less costly than treatment. During my tenure as President of the Miami-Dade County Medical Association (MDCMA), I have committed to advancing preventive medicine as a central focus for our community.

At the heart of prevention lies one of the most powerful tools modern medicine has given us: vaccines.

### Why Vaccines Matter in Miami-Dade

Miami-Dade County is one of the most diverse communities in the United States. With our unique mix of cultures, global travel connections, and population density, we are both resilient and vulnerable. These same characteristics that make our county vibrant also increase our risk of exposure to infectious diseases, from influenza to measles to emerging global threats.

Vaccination is not simply a personal choice; it is a public health responsibility. When more of us are vaccinated, we protect not only ourselves but also those most vulnerable: infants, older adults, and individuals with weakened immune systems.

Continued on page 7

## Emergency Room Nursing

### Jon Hodges Maintains Ties With Team Following Promotion

BY LOIS THOMSON

In accepting the position of director of emergency services at Jupiter Medical Center, Jon Hodges was able to advance his career while continuing to work at what he likes to do best.

Hodges was promoted to director in February of this year, after having been with Jupiter since 2005. He first joined as a staff nurse, then became assistant clinical manager for the night shift, and was then promoted to manager in 2017. Regarding his most recent promotion, he said, "I wanted to step up; I love my team, I think you do what's best for your team, and some of them asked me to step up."

He talked about the relationship between himself and his team, saying, "We all get along really well, it's a family atmosphere here, we are open and honest with each other." He said he believes that as a leader, he is very hands-on, preferring to be out working with his team than sitting in an office. "And I think when things are getting rough in the emergency department, part of what they love is that I will come out and help them – in any way they need. If they need me to start an IV, if they need me to triage a patient, if it's just to sit and talk to a patient or jump in to handle a problem. They know they can count on me for that."

Continued on page 23



Jon Hodges

## Oncology

### Al and Jane Nahmad Women's Cancer Center to Focus on Breast and Gynecological Services

BY VANESSA ORR

In early 2027, the Al and Jane Nahmad Women's Cancer Center will open on the campus of Baptist Health Baptist Hospital within the new, four-story Brian and Susan Keeley Pavilion. While cancer services will still be offered at all Baptist Health Cancer Care locations, the new facility will serve as an expansion of existing services with a dedicated focus on breast and gynecological cancers.

"The community in South Florida is growing rapidly, and so is the need for world-class cancer care," explained Steve Holan, vice president of operations and planning, Baptist Health Miami Cancer Institute. "Women currently make up 65 percent of patients being seen at Baptist Health Miami Cancer Institute, and once completed, the center will be specifically tailored to this demographic, offering a comprehensive range of high-quality services all in one location."

The center will include centralized, multidisciplinary clinics staffed by breast and



Steve Holan

Continued on page 15

## Case Management



Cody Shumaker

### Bridging Crisis and Recovery: The Vital Role of a Trauma Case Manager at Broward Health

BY DANIEL CASCIATO

When seconds matter, Broward Health is where some of South Florida's most critically injured patients turn for care. The health system operates two of Broward County's three trauma centers — Broward Health Medical Center, a Level I trauma center, and Broward Health North, a Level II trauma center.

Inside the busy halls of Broward Health Medical Center, the system's flagship hospital, patients often arrive due to life-altering injuries. For Cody Shumaker, trauma case manager, the mission is clear: guide patients and families through the turmoil of trauma toward recovery and restoring their previous life.

"I support patients and families who are suddenly confronted with overwhelming circumstances," Shumaker said. "These injuries impact not only the patients but also their loved ones, and my role is to guide them through this challenging journey."

His work extends well beyond the bedside. "I meet with patients and families to explain what is happening now, identify

Continued on page 26

# Partners in Elevating Care

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## Publisher's Note

### "The ER, the Oncologist, and the Case Manager Walk into a Bar..."

In the great symphony of healthcare, few performances are as complex—and oddly beautiful—as when oncology, emergency medicine, and case management converge around a single patient. It's like jazz: a little unpredictable, occasionally off-key, but when it works, it's magic.

The Emergency Department is where everything begins—or ends or restarts with a bang. The EM doctor and nurse are the conductors of chaos, clinical MacGyvers armed with stethoscopes, a few labs, and the ability to make life-saving decisions with a background soundtrack of beeping monitors and overhead pages. These folks don't blink when ten things go wrong at once—they just chart faster.

Cue the oncologist. While the ED moves in minutes, oncology operates in months—sometimes years. These physicians are equal parts scientist, strategist, and emotional anchor. They understand that cancer doesn't just affect organs; it affects lives. When they arrive at the bedside, it's not just with a plan—it's with perspective. They've walked alongside this patient through appointments, infusions, and scans. They bring calm to the crisis.

And just when you think it couldn't get any more coordinated—bam! The case manager enters. Clipboard in hand, eyes full of foresight, and a mind that somehow tracks everything from insurance authorizations to whether the patient has a working shower at home. Case managers are the secret infrastructure of the hospital. Where others see a diagnosis, they see a roadmap: discharge planning, resources, next steps, and crucially—hope.

Individually, each profession is impressive. Together, they're a powerhouse.

Take a typical scenario: a 72-year-old with advanced lung cancer shows up in the ER short of breath. The emergency doc rules out the scary stuff—PE, sepsis, pneumothorax—then quickly consults oncology. The oncologist, recognizing the progression of disease, helps guide the conversation beyond just treatment: What does the patient want? What does quality look like now?

And right there, seamlessly, the case manager begins laying the groundwork—coordinating hospice, arranging for oxygen at home, setting up caregiver support. The baton is passed not out of exhaustion, but out of trust. This is healthcare as it should be: patient-centered, interdisciplinary, and deeply human.

Sure, there are bumps. A late-night page here, a surprise admission there. But these moments aren't signs of dysfunction; they're proof of dedication. Each specialty brings a different lens, a different skillset, and a different kind of compassion.

What ties them together? A shared mission: Do right by the patient.

So next time you see an ER doc or nurse hustling between rooms, an oncologist deep in a difficult conversation, or a case manager working miracles behind the scenes—remember, they're not just doing a job. They're part of a larger story. A story of healing, resilience, and relentless teamwork.

Because in healthcare, it takes more than a village. Sometimes, it takes three departments, fourteen phone calls, and a miracle before lunch.

Charles Felix



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**Alison Miransky**  
Breast Cancer Fighter

# Overcoming Hurdles to Successful Value-Based Care Implementation

Organizations are more frequently choosing to adopt value-based care (VBC) models because of their ability to improve patient outcomes while controlling costs. But shifting to this type of care model involves significant time, financial, and staffing investments that are difficult for many healthcare organizations to make.

Before taking steps to implement a VBC model, organizations must first understand how prepared they are for the shift and what challenges they could encounter on the way. Without adequate planning, providers may fail to realize the expected return on investment (ROI) from value-based care.

## The Challenges of Implementing a Value-Based Care Model

These are a few of the most common challenges that organizations encounter on their road to VBC:

### Financial Uncertainty

Value-based care requires substantial upfront investments in technology, data analytics, and care coordination infrastructure — all of which have uncertain ROI timeframes. Moreover, frequent policy changes have made it difficult for healthcare providers to develop stable,



BY SABINA KOTELNIK

long-term strategies for VBC implementation. For example, since 2012, the Center for Medicare & Medicaid Services (CMS) has continuously introduced and revised regulations and policies for VBC incentive programs, creating uncertainty and inconsistent outcomes.

Navigating frequent policy shifts can result in hesitation from providers to dedicate significant financial resources to VBC, despite VBC's potential to help improve patient care quality and manage costs over time.

### Provider and Patient Resistance

Because most provider revenue cycles are based on fee-for-service methods and clinicians have practiced them for decades, they may be resistant to shifting to a new financial model. Widespread provider skepticism about whether qualitative metrics like patient engagement scores and reported outcomes capture meaningful clinical outcomes or patient experience also pervade the industry.

For example, if an academic medical center is trying to implement VBC, department chairs may be worried about revenue loss while clinicians are questioning the validity of the associated quality metrics.

Patient alignment also presents a chal-

lenge, as they may have limited health literacy or trust in healthcare — neither of which is conducive to VBC's patient-empowered approach to care. In many cases, patients are accustomed to seeking care only when they are sick, so it may be challenging to convince them to seek regular preventive care.

### Data Integration

Healthcare organizations have massive amounts of data across practices and electronic health record (EHR) systems. Their numerous clinical and administrative systems typically aren't designed to communicate with each other, which can create data integration challenges across the organization.

Given data access is essential to informing VBC program design, implementation, and ROI measurement, data integration issues can often prevent VBC success. For example, if a healthcare organization fails to integrate data before the shift to VBC, it may be unable to show the ROI either financially or in terms of patient care and access. This could result in a lack of buy-in across the leadership team for continuing the VBC program.

### Staffing Constraints

Value-based care models require care coordinator, data analyst, and quality specialist roles that under-resourced organizations, like rural hospitals, often can't fill or afford. Issues like slim mar-

gins and high competition for talent pose challenges for large systems as well. For those that can fill technical roles, these types of positions often lack the necessary authority to influence physician behavior and clinical practices. This disconnect can significantly undermine the effectiveness of VBC initiatives and slow implementation progress.

### Setting Yourself Up for Success

The shift to value-based care is daunting and many healthcare leaders struggle with determining how to get started.

Understanding what resources you need and what gaps your organization needs to address is the first step in determining how to approach your shift to VBC. A VBC readiness assessment can help healthcare organizations gain this knowledge and determine how to leverage their strengths to achieve successful implementation.

With the right preparation, healthcare providers can make meaningful shifts to deliver high-quality patient care.

*Sabina Kotelnik, Assurance Principal, BDO, can be reached at (954) 989-7462 or [skotelnik@bdo.com](mailto:skotelnik@bdo.com).*

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## ACHE of South Florida Spotlight

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# ACHE of South Florida Member Spotlight: Neil Mayo

BY LOIS THOMSON



**Neil Mayo**

Neil Mayo remembers the day he made the decision to go into healthcare as a career. As he explained, "When I graduated college with my bachelor's degree I was discussing with my advisor if I wanted to get my masters. We talked healthcare, and I knew healthcare was never going to go away. At the time, pharmaceutical sales was in its heyday, but something inside of me said, 'I don't want to do that, but I want to be in healthcare.'"

Mayo earned both his undergraduate and his masters in healthcare administration from the University of New Haven in Connecticut, then came back to Florida to start his career. He initially worked in IT staffing and recruiting until he got his first opportunity in healthcare, and then he said, "I knew my calling was dealing with seniors." Mayo has been in the private duty sector for 15 years, and when it was time for a change he pointed out, "Senior Nannies had immense upside so that's why I chose them."

Senior Nannies Care Service has been in business for more than 30 years, and according to Mayo, "We do a lot of things that revolve around seniors – sending caregivers into the home for seniors who need extra help, or sending nurses into homes for those who may need more skilled care. Placing seniors into assisted living, independent living – it's all based around caregivers helping people."

Mayo is vice president of sales for Senior Nannies and oversees the state of Florida. His day-to-day responsibilities include communicating with representatives in the field, building the business, helping with assisted living/independent living facilities, getting contracts for hospitals. "It's a lot of work, but I'm very passionate about it so it doesn't seem like work. Having a client for 10 years and knowing their quality of life was better because of us, there's no price you can put on that."

An organization that is playing an important role in helping to shape Mayo's career is ACHE – the American College of Healthcare Executives. In explaining how he learned about it, Mayo admitted, "I stumbled upon it." He said he attended an ACHE dinner a couple of years ago, even though he had no idea what the organization was all about. "I was with my boss and other reps from my company, and I didn't think I was going to know anybody, but I started recognizing people, and then more people. My eyes lit up like Christmas morning. I'm thinking, 'this is what I want to be involved in, from a business standpoint and a professional growth standpoint.' I love networking, and from that point on I was thinking, 'how can I get more involved.'"

Having joined ACHE two years ago, Mayo said he has benefitted by being given access to people who are very tough to get access to otherwise. "The quality of people at these meetings is incredible – the people you meet, their stories, their roles, how they see healthcare evolving in the next five, 10, or 20 years."

Mayo attends networking events and said he believes he will be able to contribute considerably more once he starts to get involved with the board and membership. "I believe that's where I can make the most impact, by making people aware of this organization, bringing people into this organization."

# Third-party Litigation Funding Has Potential to Affect Malpractice Insurance Premiums

BY VANESSA ORR



**Kyla Murphy**

In 2024, the Florida Senate debated SB 1276, the "Litigation Investment Safeguards and Transparency Act." The act would require a court's consideration of potential conflicts of interest that could arise from the existence of a litigation financing agreement in specified circumstances as well as prohibit specified acts by litigation financiers and require certain disclosures related to litigation financing agreements.

While the bill died on the calendar, increased interest in investing in law firms by third parties, such as private equity firms, may soon bring this issue to the forefront again.

Third-Party Litigation Funding (TPLF) takes place when an external investor funds a lawsuit in exchange for a portion of the potential payout. Third-Party Investment in Law Firms is when outside investors gain ownership or a share of ownership in a law firm itself.

Currently, the only states that have passed laws to regulate third-party litigation funding are Colorado, Arizona, New York, Oklahoma, and Montana. Arizona is the only state that allows direct ownership of law firms by non-attorneys.

"While there is currently a rule in place that technically prohibits third-party litigation funding at this time, that may change in the future," explained Kyla Murphy, AVP National Healthcare Practice, Risk Strategies.

Florida Bar Rule 4-1.8(f) states that a lawyer cannot accept compensation for representing a client from a third party unless the client gives informed consent; the arrangement doesn't interfere with the lawyer's professional judgment or the client-lawyer relationship, and the lawyer protects client information under Rule 4-1.6. This rule prevents conflicts of interest by ensuring the lawyer's primary loyalty remains with the client, not the third-party payer.

According to Murphy, if third-parties are allowed to fund litigation or gain ownership shares in law firms, it will not only affect those involved in a lawsuit, but every single commercial insurer, including those who provide malpractice insurance.

"Essentially, there will be a trickle-down effect: because most private equity firms look to make high revenue quickly, their focus may be on the bottom line and could potentially interfere with the way lawsuits are handled moving forward," Murphy said.

"This will also put extreme pressure on plaintiff's attorneys," she added. "Third-party investors will expect them to win big, because they have a lot of money invested in the case. This may result in nuclear verdicts, which will trickle down to affect insurance rates because the insurers have to pay these settlements. That means physicians will be paying more for premiums."

According to a recent article in *The Insurance Journal*, the five-year cost to commercial insurers due to third-party litigation investments is estimated to exceed \$25 billion.

"If settlements start to exceed \$10 million or \$25 million, insurers are going to raise premiums to offset these losses, which means that physicians will pay more," said Murphy. "In the long run, these verdicts may contribute to shortages in healthcare because physicians will stop practicing because they can't afford insurance, and new physicians may decide not to enter the field."

For more information, contact Kyla Murphy at [kyla.murphy@risk-strategies.com](mailto:kyla.murphy@risk-strategies.com) or call (800) 966-2120.



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# A Century of Service: The 100-Year Anniversary and Presidential Installation of the BCMA

It is my honor to announce the official launch of the Broward County Medical Association's (BCMA) 100-year anniversary and presidential installation campaign, a milestone that represents both our flagship celebration and our largest fundraising event of the year. Since its founding in 1926, the BCMA has stood at the heart of Broward County's medical community, uniting physicians, advocating for patients, and partnering with the community to advance healthcare.

As I reflect on this history, I am reminded of the association's role as a trusted convener, bringing together physicians across specialties and institutions to protect the integrity of the physician-patient relationship, strengthen the healthcare workforce, and improve community health. From legislative advocacy and public health partnerships to mentorship and leadership development, the BCMA has long been the voice of physicians in Broward County. During the COVID-19 pandemic, amid the uncertainty, the association provided stability, bridging the gap between physicians, patients, and the public; supplying vaccination resources to community physician offices; and ensuring that underserved populations were not forgotten.

As we enter our centennial anniversary, I would like to recognize our valued partners and community stakeholders, including Baptist Health of South Florida, Broward Health, Cleveland Clinic, HCA Florida, Holy Cross Hospital, Joe DiMaggio Children's Hospital, Nicklaus Children's Hospital, and Nova Southeastern University's Dr. Kiran C. Patel Colleges of Allopathic and Osteopathic Medicine. These organizations have helped strengthen care in our community, and as we move forward, my goal is to bring the leadership of these institutions together so we can continue shaping the future of healthcare in Broward County.

Both president-elect Dr. Christopher Chang and I are proud to serve within the Memorial Healthcare System, reflecting the deep ties between the BCMA and Broward's healthcare institutions. In addition, countless private practitioners have played a vital role in shaping the county's healthcare system. I extend my deepest gratitude to our Board of Directors, past and present, whose guidance has ensured the association's growth, strength, and continuity for nearly a century.

This landmark celebration, to be held on January 31, 2026, is also a time to honor outstanding leadership in healthcare and medicine, spotlighting individuals and organizations whose values of compassion, excellence, and innovation inspire us all. Sponsorship opportunities are now available, and I warmly invite our community partners, many of whom have stood with us for decades, to join us in making this once-in-a-century event a resounding success.

What has always set the BCMA apart is our ability to honor tradition while embracing innovation. As we prepare to celebrate 100 years of service, advocacy, and leadership, I remain committed to advancing preventive medicine, healthcare equity, medical innovation, and physician leadership. Together, we will commence a new century of physician-led impact, ensuring that Broward County remains a model for accessible, high-quality care for our community.

This 100-year milestone reflects the enduring power of physicians united in service to their patients and community. I look forward to celebrating this legacy with those who have made it possible, and with those who will help shape the next 100 years.

*Dr. Kayvan Amini is President of the Broward County Medical Association.*



BY KAYVAN AMINI,  
DO

# Hospice: A Vital Safety Net for Sepsis Survivors

Sepsis remains one of the most complex and deadly medical conditions treated in hospitals today. While many patients survive the acute phase thanks to rapid, evidence-based interventions, their journey is far from over once they leave the ICU. In fact, for patients with advanced illness or multiple comorbidities, the post-sepsis period is often marked by functional decline, emotional distress, and a high risk of rehospitalization or death.

As healthcare professionals, we are trained to respond swiftly to sepsis alerts, initiate aggressive treatment, and stabilize patients. But we must also recognize our responsibility to guide patients and families through the longer, more uncertain path that follows discharge. This is where hospice care can and should play a transformative role.

Hospice is not a last resort. It is a proactive, compassionate model of care that prioritizes comfort, dignity, and quality of life. For sepsis survivors with advanced illness, hospice offers a bridge between high-intensity hospital care and the realities of life at home. It provides interdisciplinary support—including a physician, nurse, hospice aide, social worker, chaplain, volunteer, and bereavement specialist—tailored to the patient's evolving needs.

Consider MJ, a fictionalized but representative patient. A 66-year-old retired teacher with advanced COPD, MJ was hospitalized for pneumonia and later developed sepsis following infected burns. Despite aggressive treatment, her condition deteriorated. She experienced respiratory failure, renal complications, and delirium. Though she was eventually discharged, her functional decline continued. When she developed aspiration pneumonia and expressed a desire to avoid further hospitalization, her physician initiated a goals-of-care conversation. MJ was referred to hospice and admitted the same day.

Through hospice, MJ received coordinated care at home, including symptom



BY LAUREN LOFTIS,  
MD

management, medical equipment, and emotional support. Her family was empowered to honor her wishes, and she passed peacefully four months later, surrounded by loved ones. Her husband and children received bereavement support for over a year.

MJ's story illustrates the value of timely hospice referrals. It also highlights a critical gap in our current approach to post-sepsis

care. Too often, patients like MJ are discharged without a discussion about palliative options. This oversight can lead to unnecessary suffering, caregiver burnout, and costly readmissions.

Hospice can break this cycle. It reduces hospital mortality, improves symptom control, and supports caregivers through one of life's most difficult transitions. Importantly, it aligns medical care with the patient's values and goals—something that should be central to every treatment plan.

In South Florida, where our population includes many older adults with chronic conditions, the need for integrated post-acute care is especially urgent. Sepsis survivors deserve more than survival; they deserve care that honors their humanity.

As clinicians, we must embed goals-of-care conversations into our protocols as a standard of care, rather than an afterthought. The ideal time to refer a patient to hospice is as soon as they are eligible. For patients with advanced illness, this may be during their initial hospitalization, even before sepsis develops.

Hospice is not giving up; it's showing up differently. It's about meeting patients where they are, with compassion, clarity, and commitment. Let's ensure that every sepsis survivor has access to the support they need to live and die with dignity.

*Dr. Lauren Loftis is a regional medical director for VITAS Healthcare, Florida's leading provider of end-of-life care. For more information, visit [VITAS.com](http://VITAS.com) or call (800) 938-4827.*

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## 7

# Maintaining Florida's Economic Success Depends on Extending the ACA Enhanced Premium Support

Congress has a full plate of must-pass legislation before the end of the year. Chief among them is extending the successful enhanced premium support that makes purchasing individual health insurance coverage more affordable.

Without immediate Congressional action, federal funding to maintain this support expires at the end of the year. And, hundreds of thousands of Floridians, many of whom are powering the small business engine of Florida's thriving economy, will lose health insurance coverage.

If Congress fails to extend the enhanced premium support, the number of uninsured Floridians is expected to increase by more than 40 percent. And, Florida's small business success story will come to a close. Florida currently leads the nation in both the total number of marketplace enrollees and the number of small business owners with marketplace coverage. Nearly 800,000 small business owners in Florida and more than 500,000 self-employed Floridians have private health insurance coverage through the marketplace. That's more than any other state.

Enhanced premium support, which comes in the form of tax credits, provides additional subsidies to people who are already eligible for the regular tax credits because of their incomes. With these credits, eligible uninsured individuals can purchase a private health insurance plan with the coverage that works for them and their family. With the enhanced credits, most enrollees at the lowest income level — under 150 percent of the federal poverty level, or an annual income of \$46,800 for a household of four — pay little or nothing for this coverage. Individuals with annual household incomes of \$60,240 or more (\$124,800 for a family of four), meanwhile, pay no more than 8.5 percent



BY MARY C. MAYHEW

of their household income on health insurance premiums.

These enhanced tax credits, in place since 2021, have put affordable private health insurance, not Medicaid, within reach of more than 4.7 million Floridians. These are working moms, dads, and entrepreneurs who run small businesses. Continuing the enhanced tax credits is crucial for maintaining

Florida's economic engine - small businesses. Affordable private health insurance is key to Florida's small business success story and, therefore, to Florida's strong economy. The Sunshine State is home to more than 3 million small businesses. Remarkably, small businesses represent 99.8 percent of all Florida businesses.

The American dream is alive and well in Florida. Florida ranks as the second-best state for business in the country. That ranking is powered by small businesses. Our state's business-friendly regulatory and tax environment combined with the availability of affordable health insurance means entrepreneurship can flourish here. Mom-and-pop family businesses can flourish. Self-employment can flourish. Ideas and innovation can flourish.

Congress still has the opportunity to continue the enhanced premium tax credits before the end of the year, but the window to act is closing quickly. Extending the enhanced tax credits will align with pro-economic growth principles to support Florida's families, workers, and business owners. Maintaining Florida's enviable status as the world's 15th-largest economy and the nation's small businesses leader depends on it.

Mary C. Mayhew is President and CEO, Florida Hospital Association.

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# Arc Educates Launches Healthcare Operations Certificate Program to Prepare Students for Employment in Healthcare Settings

Arc Broward announced the launch of its Healthcare Operations Certificate Program, designed to prepare students with the knowledge and skills to gain employment within healthcare organizations.

The 15-week, 330-hour HOCF course, which includes classroom lessons and a healthcare facility externship, is the newest certificate program under the organization's Arc Educates social enterprise initiative, which provides quality, affordable training and professional services to prepare and upskill individuals of all backgrounds for the workforce, including those with developmental disabilities and other life challenges.

Arc Educates is partnering with local hospitals, including Broward Health, HCA and Memorial Healthcare System, to serve as sites for hands-on learning and provide externship opportunities for qualified students.

Featuring small class sizes with individualized instruction and hands-on learning in the classrooms and on site at local hospital partners and assisted living facilities, students who successfully complete the program will receive American Red Cross CPR/First Aid/AED and HIPAA certifications. Students and graduates will have access to tutoring, job placement assistance and on-the-job supports.

Course topics include basic patient rights and principles of basic patient care in a healthcare setting, food and nutritional services, materials distribution, environmental services, patient transportation, clerical duties and more. Upon successful completion of the pro-

gram, students will know how to administer American Red Cross Certified CPR, first aid and AED care in an emergency.

In addition to classroom lessons, a healthcare facility externship will provide students with hands-on training, including: plating and transporting food to and from patient rooms, maintaining kitchen equipment and assisting cafeteria customers; utilizing PPE, cleaning, sanitizing, and performing laundry functions; transporting patients through hallways, assisting with transferring patients from wheelchair to bed and bed to wheelchair; performing basic data entry, answering phones, scanning and copying documents; reading and fulfilling orders and distributing healthcare materials to various departments; and practicing customer service skills with colleagues, patients and visitors.

For admission to the program, interested individuals ages 18 and older with a desire to work in the healthcare industry must have earned a high school diploma, G.E.D or certificate of completion from a specialized school, provide valid photo identification, complete an admissions interview and pass the designated healthcare facility employability screenings prior to the start of a three-day trial period. Tuition financial assistance and flexible payment plans are available to eligible students.

To register or for more information, visit [arcbroward.com/educates/certificate-programs/](http://arcbroward.com/educates/certificate-programs/), call (954) 746-9400 ext. 2266 or send an email to [arceducates@arcbroward.com](mailto:arceducates@arcbroward.com).

## Baptist Health Brain & Spine Care to Host 2025 Miami Neuroscience Symposium

Baptist Health Miami Neuroscience Institute will host the 2025 Miami Neuroscience Symposium on November 6-7, 2025, at the Hilton Miami Downtown in Miami, FL. The symposium will bring together national and international leaders in neurology, neurosurgery, neurocritical care, and rehabilitation medicine to explore cutting-edge developments in the diagnosis and treatment of complex neurological disorders.

The two-day symposium will feature lectures, interactive panel discussions, and case-based learning led by Miami Neuroscience Institute faculty and experts from across the U.S. and abroad.

Designed for physicians and allied health professionals in neurology, neurosurgery, emergency medicine, critical care, internal medicine, and rehabilitation, the symposium emphasizes a collaborative, multidisciplinary approach to improving outcomes for patients with complex neurological conditions.

Healthcare professionals interested in attending the 2025 Miami Neuroscience Symposium can register at [BaptistHealth.net/MiamiNeuro](http://BaptistHealth.net/MiamiNeuro). CME credits will be offered. Full agenda and speaker information are available on the event website.

**SAVE THE DATE**

## A message from our President **Why It's Important**

According to information shared by the Florida Hospital Association, 4.7 million Floridians get their health insurance through the federal marketplace. Tax credits/subsidies allow families earning between 100 and 150 percent of the Federal Poverty Level (FPL) (for reference, a family of one earning less than \$25,590 (equates to \$12.30 per hour for a full time job) a year is at the upper end or 150 percent of the FPL) to purchase commercial health insurance that requires no monthly contribution. Up to 400 percent of the FPL, some monthly financial contribution is required.

According to the Palm Beach Post, "Approximately 1.5 million Floridians are at risk of losing access and becoming uninsured if Congress fails to extend the enhanced premium support, which expires at the end of this year. One million of these Floridians earn less than 200% of the federal poverty level. For a family of three, that means earning \$54,000 or less a year." Others are estimating that number will be between 1 and 1.5 million people.

To bring this point home, the Miami Herald reports today (09/24/25) that, "There are 527,469 such households in the county (ALICE - asset-limited, income constrained, employed), United Way Miami found in a recent report. That's 54% of Miami-Dade households — a 40,000-household increase since 2023 — and the highest rate of Florida's larger metropolitan areas." These are people who are working, "often earning too much to qualify for state assistance,



**Jaime Caldwell**

but effectively live paycheck to paycheck".

Unable or barely able to afford housing, if tax credits go away and people are forced to pay the full-freight to keep their health insurance, "What decision do you think they will make?" "In the Sunshine State more broadly, 47% of households are financially pressured, according to United Way. In only three states — Louisiana, Mississippi and New York — are greater percentages of residents under more economic strain."

In the current efforts to create a budget resolution that will prevent the federal government from having to shut down, one of the budget items that, "Democrats are seeking to include critical health care provisions in any budget deal, including: Affordable Care Act (ACA) subsidies:

A permanent extension of enhanced health insurance subsidies that are set to expire at the end of 2025. The Congressional Budget Office estimates this would increase the deficit by nearly \$350 billion over 10 years but would also increase the number of people with health insurance by 3.8 million."

It is important to stay informed on this issue and to reach out to your elected officials and let them know your thoughts on including this issue as part of the budget resolution process. We don't want to return to days past when residents over relied on hospitals to provide their primary care in emergency departments. We also don't want this vulnerable population to delay care so routine medical issues become chronic medical issues.

## RECOGNIZING THE BEST OF THE BEST IN THE HEALTH CARE COMMUNITY



The Greater Miami Chamber of Commerce is now accepting nominations for the 2026 Health Care Heroes® Awards Program; deadline is December 15. The 27th Annual Health Care Heroes® Awards Luncheon will take place May 14, 2026.

### WHO IS A HEALTH CARE HERO?

An individual, organization, professional, student, volunteer, or program, who, through their individual or collective actions have made an extraordinary impact in the South Florida health care community. Their acts of heroism represent a display of dedication to excellence in their area of expertise beyond the scope of their jobs. Through their commitment to their profession and community, they serve as an inspiration to others in an effort to improve the quality of health care and discover new ways to assist those in need.

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# Bringing World-Class Heart Surgery Home to South Florida — Meet Dr. Eric Weiss

BY AMANDA PAZ

Heart surgery has evolved. Incisions are smaller, recovery is faster, and in some cases, the heart never even has to stop beating. Leading this transformation is Dr. Eric S. Weiss, M.D., MPH, the new President of Cardiovascular & Thoracic Surgery at Mount Sinai Medical Center. He now joins Dr. Steve Xydas, Chief of the Division, as Co-Director of Valve Surgery at the Barry B. Siadat Heart Institute.

Dr. Weiss brings more than two decades of clinical expertise, academic achievement, and leadership in advancing minimally invasive cardiac care. He joins Mount Sinai from Aurora St. Luke's Medical Center in Milwaukee, where he led the Structural Heart Program and Aortic Center to national recognition, earning a coveted three-star rating from the Society of Thoracic Surgeons.

Over his career, he has performed more than 6,000 successful cardiac surgeries, from complex valve repairs to advanced aortic procedures.

His arrival is expected to further elevate Mount Sinai's cardiovascular program, already one of the busiest in Florida. In



**Dr. Eric S. Weiss**

2024 alone, Mount Sinai surgeons performed more than 9,000 heart procedures—more than any other hospital in the region—according to the Agency for Health Care Administration.

"I'm passionate about not only delivering world-class outcomes, but also making sure patients feel heard, understood, and supported throughout their care,"

says Dr. Weiss.

"That means continuing to bring the most advanced surgical options here, so patients don't have to leave South Florida to get the best treatment."

Dr. Weiss is known for refining minimally invasive mitral and aortic valve surgery, aortic dissection repair, and hybrid surgical-catheter techniques—innovations that reduce operative time, accelerate recovery, and improve long-term results.

His training includes a medical degree and Master of Public Health from Johns Hopkins University School of Medicine, a general surgery residency at Johns Hopkins, and advanced cardiothoracic fellowships at New York-Presbyterian/Columbia and the University of Pennsylvania.

**Q&A with Dr. Eric Weiss**

**Q: What drew you to Mount Sinai?**

Dr. Weiss: It's rare to find a hospital with both an outstanding reputation and a culture that supports innovation. Here, everyone—from leadership to all levels of care providers—shares the same goal: improving patient outcomes every single day.

**Q: What excites you most about cardiac surgery today?**

Dr. Weiss: We are at an interesting time in heart surgery, where technological advances are providing opportunities to move care forward in leaps rather than small increments. This allows us to tailor procedures to each patient, rather than the other way around, often with smaller incisions, less pain, and much faster recovery.

**Q: How do you want to impact South Florida's heart patients?**

Dr. Weiss: I want people here to know they don't need to travel to Cleveland or New York for world-class cardiac care—it's right here in Miami Beach with the added bonus that it's delivered in a way that personalized, compassionate and respecting of each patient's unique needs.

**E-mail Your Editorial Submissions to [editorial@southfloridahospitalnews.com](mailto:editorial@southfloridahospitalnews.com)**



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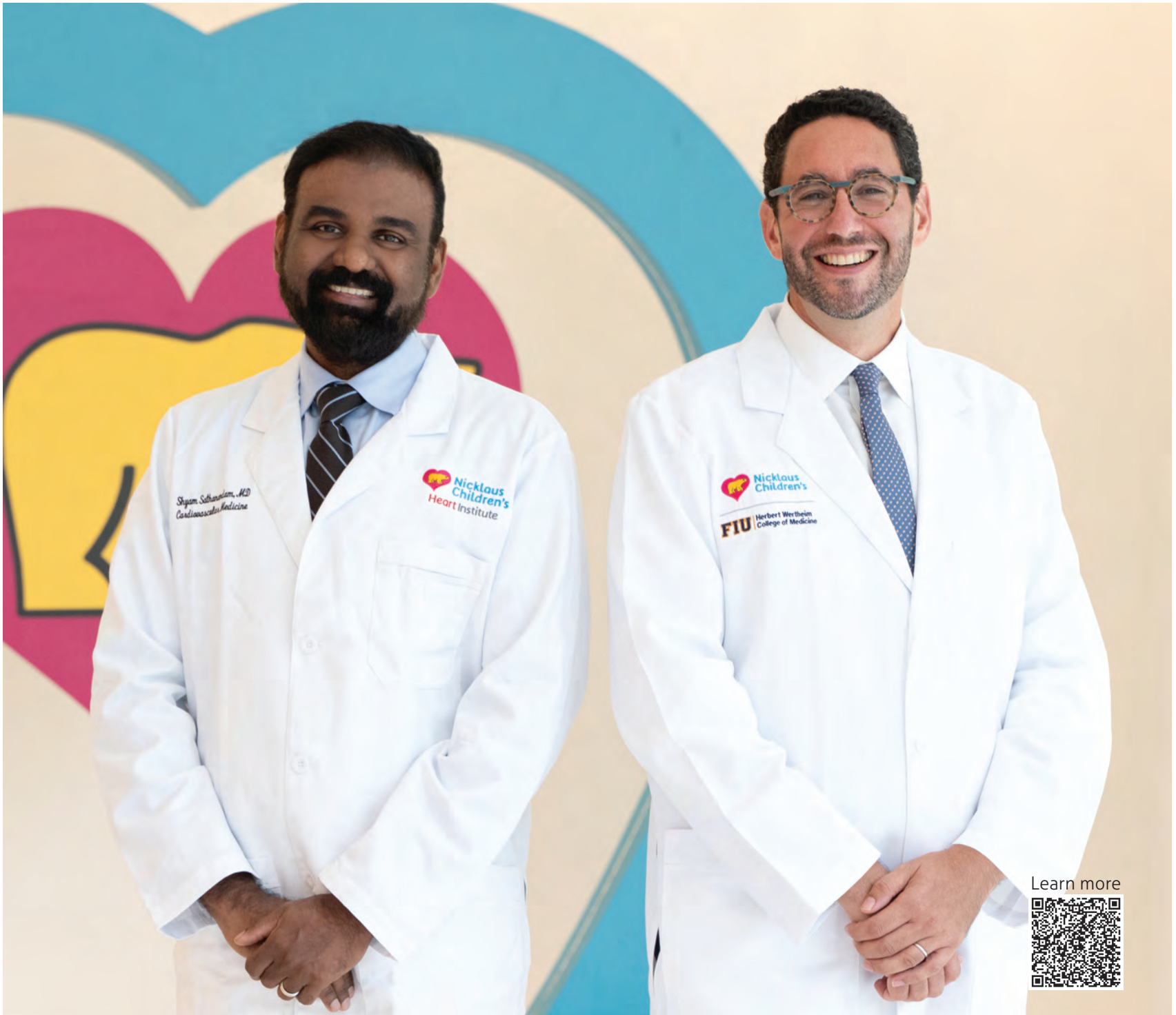
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Dr. Shyam Sathanandam

Dr. David Kalfa

## The Future of Heart Care is Here



The Nicklaus Children's Hospital Heart Institute, ranked **#1 in South Florida for Pediatric Cardiology & Heart Surgery\***, proudly welcomes Dr. David Kalfa.

Dr. Kalfa, our new chief of Cardiovascular Surgery, co-director of the institute and professor of surgery and pediatrics at FIU Herbert Wertheim College of Medicine, is internationally recognized for pioneering minimally invasive surgical techniques that improve outcomes and quality of life.

Alongside him, Dr. Shyam Sathanandam, a trailblazer in interventional cardiology, serves as chief of Cardiovascular Medicine and co-director of the institute, making Nicklaus Children's heart program the only one in Florida led by two co-directors.

Together, they ensure even the most complex pediatric heart cases receive world-class care close to home.

\*highest ranking from U.S. News & World Report



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## Oncology... Oncology... Oncology...

### A Lump, a Diagnosis and a Multidisciplinary Approach to Breast Cancer Care

BY CHRISTINE WALKER

One night, Kathryn Kelly, 31, went to sleep as usual. The next morning, she woke up and felt a lump next to her sternum. Concerned it might be heart-related, she sought medical attention. What followed was her first-ever mammogram—and with it, a diagnosis of Stage One breast cancer.



Dr. Jessica Burgers

Kelly underwent an ultrasound and biopsy with breast surgical oncologist Jessica Burgers, M.D., at the Michael and Dianne Bienes Comprehensive Cancer Center at Holy Cross Health in Fort Lauderdale, where a team-based approach guided her through every step of her care journey.

Kelly was stunned to learn it was cancer. "For my age, I could have gone years without knowing. There was no pain. I just went to sleep, woke up and felt a lump," she explained.

Routine mammography is typically recommended to start at age 40. "Kathryn was a good advocate for her own health by performing self-exams and bringing this quickly to her primary care physician's attention," praised Dr. Burgers.

A dedicated Nurse Navigator helps coordinate appointments, answer questions and provide emotional support, ensuring patients never feel alone. Kelly's story is a testament to the power of teamwork, compassion and communication in healing.

#### Finding Support and Showing Up for Herself

"It was my first mammogram and my first surgery ever," Kelly shared. "I was nervous and scared. I have my kids, family and friends, but when it comes down to it, it's just you and the doctor. You have to have faith and trust that you'll come through on the other side."

And she did. After a lumpectomy and breast reduction surgery, also known as an oncoplastic breast surgery, Kelly continues her treatment with a daily chemotherapy pill, prescribed for 60 months.

Although hesitant at first, Kelly now attends weekly support sessions at Gilda's Club, often bringing her children along. There, she connects with other survivors and finds strength to continue her journey.

"It was like an out-of-body experience," she said as retelling her story. "I kind of checked out. Then I told myself, 'You're always there for your family and friends. It's time to show up for yourself.'"

Accredited by the American College of Surgeons Commission on Cancer and the National Accreditation Program for Breast Centers, the Michael and Dianne Bienes Comprehensive Cancer Center is also certified by the Quality Oncology Practice Initiative, an affiliate of the American Society of Clinical Oncology (ASCO), for meeting the highest standards for quality cancer care and rigorous safety measures established by ASCO and the Oncology Nursing Society.

Learn more at  
[HolyCrossCancer.com](http://HolyCrossCancer.com).

#### The Role of the Multidisciplinary Breast Cancer Team

At Holy Cross Health, the multidisciplinary breast cancer team plays a pivotal role in patient care. This group reviews complex cases and develops personalized treatment plans with input from a wide range of specialists: oncologists, surgeons, radiologists, pathologists, genetic counselors, oncology nurses, registered dietitians, social workers and clinical trial experts.

"We don't just treat a disease—we treat a person," said Dr. Burgers. "Treatment planning involves collaborative decision-making across surgery, chemotherapy and radiation therapy. We also integrate support services like genetic counseling and emotional care."



## How Will Your Malpractice Carrier Fight For You?

It's no longer just a matter of signs hinting at a hardening market. Indisputable evidence is now at the forefront. Malpractice rates are going up across the board. Weaker malpractice carriers are being placed into receivership or sold. Juries are making shockingly high awards. And this is only the beginning.

#### Isn't it time your medical malpractice policy had a checkup?

Risk Strategies will perform a no-obligation comprehensive review of your current malpractice coverage. You need this because so few doctors and administrators have an in-depth knowledge of their coverage or insurer and may not be asking all the right questions. For instance, do you know the following about your coverage?

- Does your insurer fight cases or just settle?
- How strong is your insurer financially?
- How experienced is their claims-defense team in Florida courtrooms?
- Do you have a consent-to-settle clause, or can they settle against your will?

These are just a few of the questions you should be asking in this volatile market. It's not too late for a no-obligation medical malpractice insurance review, just contact Tom Murphy of Risk Strategies 800.966.2120 or [tmurphy@risk-strategies.com](mailto:tmurphy@risk-strategies.com).

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## Oncology... Oncology... Oncology... Oncology...

### Moving the Needle in Cancer Care with Sylvester Science

The pioneering advances in oncology treatment completed at Sylvester Comprehensive Cancer Center, part of the University of Miami Health System and Miller School of Medicine, are offering hope for cancer patients who don't respond to conventional therapies, have few to no treatment options, or whose recovery is otherwise set back by largely preventable issues.

One way Sylvester is doing that is by using technology to offer a scalable, unobtrusive method to surveil patients. In a new study, Tracy Crane, Ph.D., RDN, director of lifestyle medicine, prevention and digital health at Sylvester, explored the use of digital tools to help monitor patients and catch complications post-surgery.

A randomized trial found remote monitoring via wristband accelerometers improved functional recovery and symptom management, and prevented major complications, in patients who underwent abdominal or pelvic surgeries for gastrointestinal, genitourinary or gynecologic cancers.

This research offers a glimpse into the future of surgical oncology, where digital tools and human intervention converge to support patients during and after treatment.

Sylvester is also at the forefront of studying how drugs approved for the

treatment of one cancer type may be effective for another. Aman Chauhan, M.D., leader of the Neuroendocrine Tumor Program at Sylvester, and Abdulrahman Sinno, M.D., a gynecologic oncologist, are testing whether the immunotherapy drug known as DLL3 BiTE (bispecific T-cell engager)—which is FDA-approved for the treatment of small-cell lung cancer—proves successful in the treatment of gynecologic high-grade neuroendocrine carcinoma (NEC).

This rare yet aggressive cancer has limited treatment options, but because Sylvester is one of the few academic medical centers with expertise in managing NEC, it is able to recruit patients who don't respond to conventional therapies into this trial for another chance at survival.

Additionally, Dr. Chauhan and Dr. Sinno are testing a novel immunotherapy combination for patients with gynecologic NEC cancers in an investigator-initiated phase 1 clinical trial. The treatment begins with conventional immunotherapy drugs and is followed by the introduction of an oncolytic virus injected directly into the tumor, where it grows, divides and eventually kills cancer cells while invoking a positive immune response.

Preclinical data at Sylvester, the only site in the U.S. with access to this combi-

nation therapy, suggests this method could help patients remain cancer-free for much longer.

For some cancers, such as osteosarcoma, the greatest challenge is the lack of tailored treatment options. Emanuela Palmerini, M.D., Ph.D., a sarcoma researcher at Sylvester, is looking into molecular signatures linked to better responses to mifamurtide—a drug approved for osteosarcoma only in Europe—with the hopes of one day tailoring treatment to each patient's biology. Dr. Palmerini helped identify two important genetic signatures in the tumor's immune environment.

The first, a 21-gene signature, is linked to lower risks; patients with this genetic marker had a five-year overall survival of 92%, compared to high-risk patients with a five-year survival of 47%. The second, a 31-gene signature, indicates that patients are most likely to benefit from mifamurtide. As this research continues, doctors will gain a better understanding of who would improve with mifamurtide, sparing those who won't from months of side effects.

Sylvester's efforts in advancing a variety of oncology treatments will help cancer patients in South Florida and beyond live longer, higher-quality lives, turning once-fatal diseases into manageable, chronic conditions.

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## KIDZ Hematologist/Oncologist Shares Why More International Patients Are Seeking Care at Helen & Jacob Shaham Cancer & Blood Disorders Institute

BY VANESSA ORR

While the Helen & Jacob Shaham Cancer & Blood Disorders Institute at Nicklaus Children's Hospital was designed to transform pediatric cancer care by ensuring that no child had to leave Florida for leading-edge cancer treatment, it has also become a haven for families from other countries seeking innovative cancer care.

While the hospital has always treated international patients, this population increased significantly during the pandemic, when hospitals in other countries closed due to the COVID-19 pandemic.

"While you had hospitals in the U.S. that postponed elective cases, some hospitals outside the country basically shut down, putting patients on hold and causing their families to look elsewhere for their child's cancer treatment," explained Dr. Guillermo De Angulo, a KIDZ Medical Services pediatric hematologist/oncologist.

KIDZ Medical Services is a private, physician-owned multispecialty health-care organization committed to excellence in neonatal, pediatric, and women's healthcare whose team of more than 400 clinicians and team members care for patients and families across dozens of hospital partner sites and medical practice locations throughout South Florida.

"In other countries, particularly in Latin



Dr. Guillermo De Angulo

America, there is also a significant disparity in survival in oncology—and even more so in pediatric oncology," Dr. De Angulo added. "They have excellent physicians, but we have certain tools at our disposal that are not readily available to them. That's why many patients come here—for treatments that they can't get where they live."

These treatments include various forms of immunotherapy, such as Blinatumomab anti-CD19/CD22 treatment, among others, which target specific cells or stimulate certain cells in the body to attack those that express antigens or flags.

"Cancer cells are very smart, and some have the ability to become invisible to the body's immune system," said Dr. De Angulo. "Some checkpoint inhibitors and other forms of immunotherapy can get rid of a tumor's invisibility, which allows the body's own immune system to attack those cells."

These "smart drugs" also don't cause as many undesired side effects as conventional chemotherapy, which Dr. De Angulo said has changed the outcome in patients with recurrent refractory leukemia and the outcome of high-risk or standard-risk patients.

"All leukemia patients who are at stan-

dard risk or high risk now get at least two cycles of immunotherapy in their treatment regimen, following the gold standard in the United States," said Dr. De Angulo. "A year ago, this was not occurring, but the change is based on clinical trials that were held here and elsewhere in the U.S."

The center has also held Phase 1 and 2 trials for recurrent solid tumors or sarcomas, neuroblastoma, and brain tumors.

Dr. De Angulo notes that gene therapy is also changing the landscape for sickle cell and thalassemia patients through the use of CAR-T therapy, in which a patient's lymphocytes are engineered to target and attack cells that express the CD19 protein.

### Making the Trip Less Taxing

Most of the institute's international patients come from Latin America and the Caribbean, although some also come from Central America and South America. Recurrent malignancies - whether leukemia, sarcoma, or neuroblastoma - affect the majority of patients, though the center also treats newly diagnosed patients.

"We have a success rate of 95 percent for leukemia; in some of these countries, it averages less than 50 percent," said Dr. De Angulo, who is often invited to give talks in these areas to share information on cutting-edge treatments.

He notes that he is not in competition with oncologists from other countries; instead, they work as a team. "We collaborate on a video conference call, and if the doctor feels that what the patient

needs can't be done in their country, they send their patient to us to do the heavy lifting, and after treatment, we send the patient back."

The process is not as easy as just checking into the hospital, however. Families often require VISAs to enter the U.S., and the center will provide a letter explaining the necessity of the U.S. visit.

If there are financial issues, the clinic may reach out to philanthropic individuals or foundations to help find coverage. These same institutions, such as the Ronald McDonald House, may help with or provide lodging for family members. For more severe pediatric cases, the clinic may arrange for an air ambulance to transport the child.

"While there are always challenges with these patients, one of our biggest hurdles is dealing with the bacterial infections they bring with them," said Dr. De Angulo. "The flora, or bacteria in the intestine, is very different over there. There are theories that it may come from the water, or that some patients there are overtreated with antibiotics, so they build up a resistance, but regardless, it makes it tough to fight these infections."

As pediatric oncology continues to evolve, an increasing number of international patients may find themselves traveling to Nicklaus Children's Hospital for treatment.

The Helen & Jacob Shaham Cancer & Blood Disorders Institute is waiting to welcome them.

## Cover Story: Al and Jane Nahmad Women's Cancer Center to Focus on Breast and Gynecological Services

Continued from page 1

gynecologic cancer specialists, as well as on-site infusion therapy suites designed for patients' comfort and convenience. Women will have access to fertility preservation services integrated into their care planning as well as clinical trial programs and precision medicine tailored specifically to women's cancers.

The center is named in honor of Al and Jane Nahmad, who provided a transformational gift in support of Baptist Health Miami Cancer Institute.

"Al and Jane Nahmad's extraordinary generosity transformed what was once just a vision into a reality," said Holan. "As longtime champions of women's health, their support reflects a deep belief in the groundbreaking work of our physicians and cancer care support teams."

When the Women's Cancer Center opens, breast, gynecologic oncology, plastics and reconstruction, dermatology/ MOHs, and breast imaging physicians and staff will move into the facility. The health system plans to backfill the space at Miami Cancer Institute with increased capacity for GU, GI, thoracic, neuro, and head and neck disease sites, hiring physicians and staff incrementally to meet these needs.

Leading the charge at the Al and Jane Nahmad Women's Cancer Center is one of Baptist Health's newest hires, Dr. Anastasia Tousimis.

"Dr. Tousimis' vision and enthusiasm for this new facility brings us all much excitement," said Holan. "With her renowned expertise in breast surgery, her commitment to advancing women's cancer care, and her passion for innovation, she is helping shape the Women's Cancer Center into a destination where patients will find not only world-class treatment, but also hope, compassion, and support at every step."

He notes that the health system's vision is to expand imaging modalities so women have access to the full spectrum of breast cancer imaging options, including mammograms, contrast-enhanced mammography (CEM), ultrasounds, and additional advanced technologies. In line with the model at Baptist Health Miami Cancer Institute, the system plans to integrate on-site lab services, giving patients the convenience of receiving both treatment and laboratory care in one location.

Clinical trials focusing on breast cancer, gynecological cancer and melanoma will also be available to patients at the Women's Cancer Center.

"Baptist Health Cancer Center has continued to expand its clinical trial program to enroll patients in the most innovative trials so as to support our mission: 'No one has to leave South Florida for world-class cancer care,'" said Holman.

In addition, the health system is committed to broadening its Arts in Medicine

program, recognizing the transformative impact these programs have on the well-being and healing journey of cancer patients. It also hopes to enhance dietary services, ensuring patients have access to nutritious, high-quality meal options throughout their time at the Women's Cancer Center.



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## Sylvester Comprehensive Cancer Center at the Leading Edge of Breast Cancer Research and Treatment

Sylvester Comprehensive Cancer Center, part of the University of Miami Health System and Miller School of Medicine - South Florida's only National Cancer Institute (NCI)-designated cancer center - is at the leading edge of breast cancer treatment and research. The following highlights showcase how Sylvester's experts are shaping the future of breast cancer care.

For the roughly 30% of breast cancer patients who develop lymphedema, for example, Sylvester breast cancer surgeon Eli Avisar, M.D., has pioneered a surgical procedure that reconnects lymphatic vessels with a vein in the armpit to restore drainage. The procedure has been shown to reduce the rate of this serious complication by about two-thirds. Dr. Avisar has so far completed about 500 of these Simplified Lymphatic Microsurgical Preventing Healing Approach (SLYMPHA) procedures, offered through Sylvester's Comprehensive Lymphatic Center, the only South Florida Center of Excellence in lymphedema care. Today, surgeons worldwide are performing Dr. Avisar's technique.

But breast cancer treatment isn't just about procedures - it's also about understanding how lifestyle and biology interact to influence outcomes. As part of the FastER trial, Sylvester and Dana Farber Cancer Institute researchers are collaborating to study the impact of circadian alignment in breast cancer patients who recently started cyclin-dependent kinase 4 and 6 (CDK4/6) inhibitor therapy. This NCI-funded study, led by Tracy Crane, Ph.D., RDN, principal investigator and director of lifestyle medicine, prevention and digital health at Sylvester, is exploring how to reduce treatment-related fatigue in people with advanced or metastatic breast cancer by aligning patients' internal body clocks with their meals and exercise routines.

While aligning treatment with patients' biological rhythms may help reduce fatigue, researchers are also tackling the physical side effects of therapy - like hair loss - that



**Dr. Eli Avisar at the operating table.**

impact patients' confidence and well-being. Xiangxi "Mike" Xu, Ph.D., a radiation oncologist at Sylvester and assistant professor of radiation oncology at the University of Miami Miller School of Medicine, is studying how non-invasive ultrasound may help restore division among the non-cancerous cells in our hair that are affected by chemotherapy drugs like taxanes. Preclinical studies have demonstrated his technique's effectiveness, and more work is underway to test it on a larger scale.

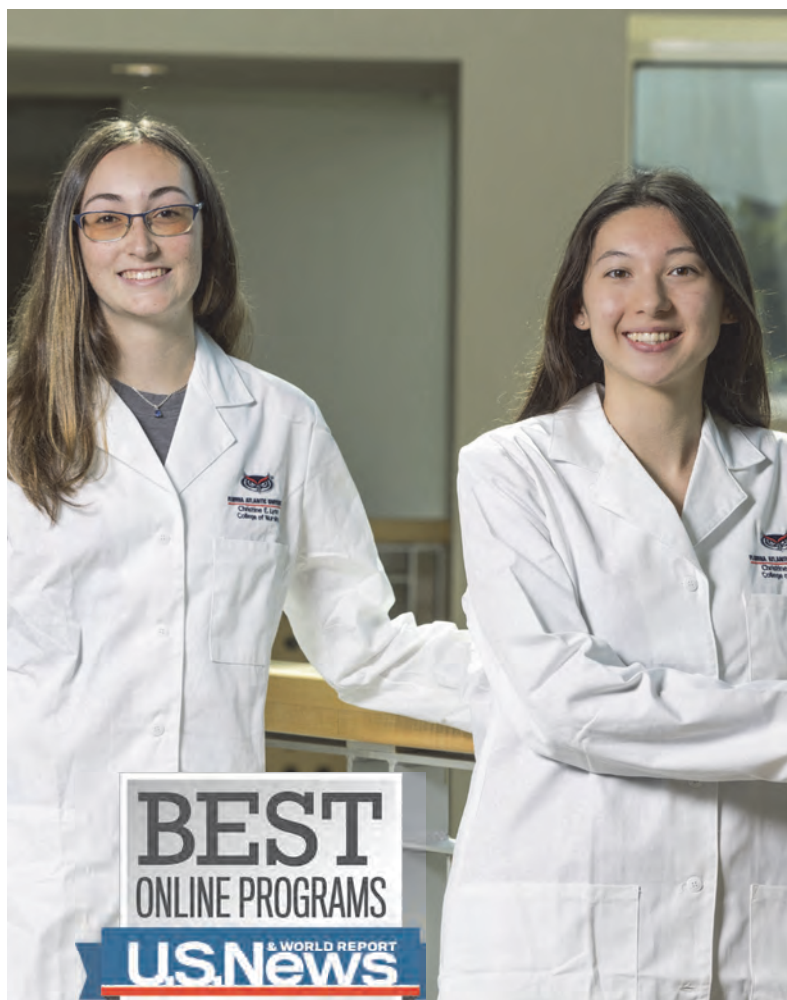
Sylvester surgeons are also learning and testing advanced reconstruction techniques for patients post-mastectomy that result in more natural and long-lasting outcomes. Juan Mella-Catinchi, M.D., M.P.H., a plastic surgeon at Sylvester and an assistant professor of surgery in the Miller School's Division of Plastic Surgery, performs

breast reconstruction using a patient's own tissue, including fat, skin and blood vessels. The technique requires specialized microscopes and sutures finer than a strand of hair to sew tiny blood vessels together - and ultimately provides patients with a reconstruction option that does not involve implants.

What's more, Dr. Mella-Catinchi, together with Devinder Singh, M.D., chief and program director of plastic surgery at Sylvester, is exploring new techniques to restore nipple and areola sensation for patients who undergo nipple-sparing mastectomies. The surgeons reconnect the nerve that's cut in the patient's chest during their mastectomy via nerve autografts or allografts; the pair expect to learn how well this technique works in a couple of years once the nerves they've operated on have had time to grow through the graft.

These innovations are just a few of the many that make up the comprehensive breast cancer care at Sylvester, which is recognized by *U.S. News & World Report* as one of the nation's top 50 cancer centers for cancer care.

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## Relacorilant Combination Therapy Marks a Turning Point in Ovarian Cancer Care



BY BRIAN M. SLOMOVITZ, MD

For women with platinum-resistant ovarian cancer, the treatment landscape has long been defined by limited choices and poor outcomes. But a recently published global trial offers a breakthrough — and fresh hope. The phase 3 ROSELLA trial found that adding the investigational therapy relacorilant to nab-paclitaxel (Abraxane) significantly improved survival outcomes without introducing new safety concerns.

### The ROSELLA Trial

The ROSELLA trial (GOG-3073/ENGOT-ov72), conducted across 117 hospitals in 14 countries, enrolled 381 women with platinum-resistant epithelial ovarian, primary peritoneal, or fallopian tube cancer. Patients were randomized to receive either nab-paclitaxel alone or in

combination with relacorilant, a first-in-class selective glucocorticoid receptor antagonist.

The results were striking:

- **Progression-Free Survival (PFS):** Patients receiving relacorilant plus nab-paclitaxel achieved a median PFS of 6.54 months compared with 5.52 months for chemotherapy alone (hazard ratio 0.70;  $p=0.0076$ ).
- **Overall Survival (OS):** At interim analysis, the combination extended median OS to 15.97 months versus 11.50 months, reflecting a 31% reduced risk of death (hazard ratio 0.69;  $p=0.0121$ ).
- **Safety:** Adverse events were consistent with nab-paclitaxel exposure; no new safety signals were observed.

Together, the findings position the combination as a potential new standard of care for women with platinum-resistant ovarian cancer — the first randomized phase 3 study in over a decade to demonstrate both PFS and OS benefit in this high-need population.

### Why It Matters for South Florida

For women in South Florida, these results demonstrate that innovative science is reaching the clinic, providing renewed options in a space where progress has been slow. As one of the trial investigators, I am proud that Mount Sinai Medical Center continues to help bring forward therapies that improve not just survival statistics, but also quality of life.

This is only the beginning. Mount Sinai's investment in cancer care is accelerating with the upcoming Irma and Norman Braman Comprehensive Cancer Center, opening in 2026. The five-story, 200,000-square-foot facility will:

- Increase access to clinical expertise, robust support services, research, and clinical trials.
- Deliver coordinated care through tumor boards, pathology reviews, and radiology consults.
- Provide patients with a personalized, healing environment overlooking Biscayne Bay.
- Offer comprehensive supportive services, including genetics counseling as well as physical, mental, and financial coaching, to guide patients and families through every stage of their journey.

### Looking Ahead

The ROSELLA trial findings published in *Lancet Oncology* point to a future where women with platinum-resistant ovarian cancer finally have more than limited choices. For patients and their families, this represents a long-awaited breakthrough.

At Mount Sinai, we are shaping the future of women's cancer care by combining groundbreaking science with compassionate, patient-centered treatment for our community and beyond.

*Dr. Brian Slomovitz is Director of Gynecologic Oncology, Mount Sinai Medical Center.*



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## Early Detection, Innovative Technologies Help Breast Cancer Patients Move Forward at Lynn Women's Health & Wellness Institute

BY VANESSA ORR



Approximately one in eight women will be diagnosed with breast cancer during their lifetime. Fortunately, since the institution of mammography, the death rate from breast cancer has been reduced by more than 40 percent. It is estimated that between half a million and 1 million deaths have been prevented between early detection with mammography and improved treatments since the technology was introduced.

"The biggest message I have to women this October for Breast Cancer Awareness Month is the one that I have every October—early detection saves lives," said Surya Vaidyanathan, M.D., Baptist Health South Florida.

The health system's Christine E. Lynn Women's Health & Wellness Institute offers some of the most innovative, technological breakthroughs in the diagnosis of breast cancer available. This includes a 3-D, low-radiation mammography unit that allows increased visualization with minimum risk to the patient, and Pristina Dueta™, which allows the patient to be in control her own compression during a mammogram.

The Institute also offers high-definition ultrasound with elastography for increased detection and characterizations of lesions, and diagnostic breast MRI as well as abbreviated breast MRI, which increases breast cancer detection rates in addition to screening mammograms alone.

"Two of the greatest additions to our Women's Institute over the past several years have been the addition of artificial intelligence (AI) as well as contrast-enhanced mammography," added Dr. Vaidyanathan.

Contrast-enhanced mammography

uses an iodine-based contrast agent injected into the vein. The machine takes two sets of images (dual energy mammogram) using different x-ray levels, which are processed by a computer. Cancers that have more blood flow show up brightly, which makes them easier to detect.

"With contrast-enhanced mammography, doctors are able to detect more invasive cancers than standard mammograms, especially in women with dense breasts," said Dr. Vaidyanathan. "Breast cancer detection rates are similar to breast MRI, but contrast-enhanced mammography is more comfortable for the patient and is an easier, quicker, and less expensive alternative."

The Institute has also been using contrast-enhanced mammographic biopsy to biopsy suspicious lesions, which provides as easier, more comfortable alternative to MRI-guided biopsy.

According to Dr. Vaidyanathan, the use of AI in breast imaging has allowed increased cancer detection by detecting subtle abnormalities and increasing the efficiency of mammographic interpretation. AI helps technologists by improving positioning techniques, creating a better quality mammogram for interpretation.

"The development and usage of AI, led

under our director Dr. Kathy Schilling, has fundamentally changed how we as radiologists view and interpret mammograms," said Dr. Vaidyanathan. "AI not only assists radiologists by improving accuracy and increasing cancer detection rates, but reduces false positives or unnecessary callbacks and biopsies by focusing on the suspicious findings and those that have a greater probability

of malignancy.

"As far as breast cancer treatments, immunotherapy and antibody drug conjugates are among the newest and most effective systemic treatments we use for breast cancer, especially in challenging cases such as triple negative and metastatic situations," he added.

The Women's Center of Boca Regional/Schmidt Family Center has been treating women in south Florida since 1990. In 2015, it became the Christine E. Lynn Women's Health and Wellness Institute, which also has satellite locations in Deerfield Beach and Boca Raton.

The Institute offers a multi-modality approach to breast cancer detection including 3D mammography, contrast enhanced spectral mammography (CESM), breast ultrasound including sheer wave elastography, breast MRI, and molecular breast imaging (MBI). It also offers breast biopsies using stereotactic (mammographic) guidance, ultrasound guided breast biopsies, contrast, enhanced mammographic guided biopsies, and breast MRI biopsies.

"While our Institute is comprised of some of the most technologically advanced equipment available in the diagnosis of breast cancer, we are truly

set apart by our extremely knowledgeable as well as caring and compassionate staff," said Dr. Vaidyanathan. "Our doctors are comprised of predominantly fellowship, trained breast radiologists and our technologists have gone through additional extensive breast cancer specific training. In addition, our patient navigators are here to guide patients through whatever steps might be needed."

The Institute also offers same day readings for screening mammograms and can provide same-day diagnostic imaging or ultrasound if the results require follow-up testing. Patients may also become involved in clinical trials; current trials include the Contrast-Enhanced Mammography Imaging Screening Trial (CMIST) to help determine whether contrast-enhanced mammography (CEM) improves breast cancer detection and reduces false-positive exams in women with dense breasts, and the FourLight Trial, looking at novel therapy with endocrine therapy in metastatic disease.

"Women who have a greater than average chance of developing breast cancer may also benefit from the high risk breast clinic, which offers individualized breast cancer risk assessments and clinical breast exams," said Dr. Vaidyanathan. "Based on this risk assessment, they are offered personalized screening strategies, and if one has a personal or family history of breast cancer that may raise their risk, we offer genetic testing and counseling."

The Institute also offers a Moving Forward program designed to aid women whose breast cancer treatment is complete. The program provides resources and support for challenges including fear, anxiety, depression, and side effects of treatment such as bone loss, body image issues, and lymphedema.

## New Hope and Options for Women After Breast Cancer Surgery

BY JENNIFER WILLIAMSON



**Dr. Martin Newman**

Imagine going through breast cancer and having surgery to remove a breast. For many women, this is one of the hardest moments of their lives. But thanks to a special law called the Women's Health and Cancer Rights Act, women now have better choices for rebuilding their bodies and their confidence.

This important law was passed in 1998. It made sure that if health insurance helps pay for a mastectomy (removal of the breast), it must also help pay for breast reconstruction and the implant, as well as balancing procedures for the other side and revisions in the future if needed – no matter when a woman decides to have the procedure. This means women have the right to choose the best time for them,

even if it's years after their first surgery.

Today, more than 100,000 women in the United States have breast reconstruction every year. Some women have their implants replaced, others switch from implants to using their own body tissue, and some have new surgeries to fix or improve results.

"Extending access to reconstruction surgery throughout a women's lifetime is important because implants are not designed to last forever, and surgical and material advancements are continually improving how we restore shape, feel and sensation through breast reconstruction," says Martin Newman, M.D., Regional Head of Plastic Surgery of the Department of Plastic and Reconstructive Surgery at Cleveland Clinic Weston Hospital.

One amazing innovation is called fluo-

rescence-guided surgery. Surgeons use a special laser to see how blood flows in the tissue. This helps them make sure the new breast gets enough blood, which means fewer problems and better results. Dr. Newman was the first surgeon in the world to use this technique which now helps many women heal faster.

Another major breakthrough is being able to provide sensation to the reconstructed breast. "This technique involves the placement of nerve grafts during reconstruction" says Dr. Newman. Although many factors contribute to who may be a candidate for this technique, the literature is promising.

More recently, Dr. Newman's team has employed 3-D technology to create surgical roadmaps of blood vessels for natural tissue reconstruction, both within the patient's chest and the donor site, such as the abdomen, back, buttock or thigh. CT scans are used to produce a 3-D image of the blood vessels, which allows for detailed surgical planning and tailoring

of the procedure to a patient's unique anatomy.

"Combining this type of technological innovation with the advanced, less-invasive surgical techniques we use to harvest and transfer blood vessels during perforator flap procedures is another way to support good blood flow and healthy tissue, essential for a positive outcome," Dr. Newman explains.

Fat transfer is another option that is gaining popularity. Surgeons can take a little fat from the belly or thighs and use it to make the breast look and feel more natural. This process is usually done over a few sessions and helps improve the shape and softness of the breast.

What does all this mean? Women have more choices and better results than ever before. Even women who had surgery years ago can find new hope with today's technology. Thanks to dedicated doctors and smart laws, life after breast cancer surgery can be full of new possibilities, comfort and confidence.

## The Rising Tide: Young Women and the Alarming Increase in Breast Cancer Cases

BY DANIEL CASCIATO

When Jenelle Naar was diagnosed with Stage 3 breast cancer just after her 21st birthday, her world turned upside down. What followed was a whirlwind of PET scans, CT scans, biopsies, chemotherapy, and radiation, all within just a few months.

"I noticed a lump and of course I contacted my doctor right away," she says. "They told me, 'You know, this could be worrisome because you're so young and we're looking out for you, but we're not quite sure what it is.'"

The mass continued to grow. By the time it was fully evaluated, it made up nearly 90% of her right breast, about the size of a baseball.

Jenelle's story is becoming increasingly common, and that alarms clinical experts like Dr. Erica Bloomquist, a breast surgical oncologist at Memorial Cancer Institute. "Breast cancer in young women is a whole different beast, so to speak," she says. "It presents with a usually more advanced stage of disease, a more aggressive subtype such as triple negative or HER2-positive."

### A Rising Trend Among Young Women

National data has confirmed what oncologists at Memorial are witnessing on the ground: more young women are being diagnosed with breast cancer, and often at more advanced stages. While the disease remains more prevalent among older populations, the number of women under 40 facing this diagnosis is steadily increasing.

Dr. Bloomquist points to multiple factors driving this trend. "We live in a world where we're constantly being bombarded with things that damage our DNA," she says. "Also, things that stimulate breast tissue to be more prolific, like increased estrogen related to obesity. Thirty percent of our youth being obese means more estrogen, more stimulation of the breast cells, in combination with an environment that's constantly damaging our bodies."

She adds that alcohol consumption and hormonal changes may also increase the risk.

### Misdiagnosed or Missed: The Awareness Gap

For many young women, a breast cancer diagnosis is delayed simply because no one—including their doctors—expects it.

"When you're in your twenties or teens, you don't think about breast cancer," Dr. Bloomquist says. "You have cysts and hormonal changes that cause your breasts to swell or feel sore. So when you notice something different, you think, 'It's just my cycle.'"

Often, providers are also slower to suspect cancer in young women. "It takes time and trial and error to figure out, hey, this isn't some benign process. This could be breast cancer, and we need to work it up."

### Unique Challenges: Fertility, Finances, and Emotional Fallout

Being diagnosed at 21 or 25 presents challenges that older patients may not face. "There's so much that comes into play when you're in your twenties or early thirties," Dr. Bloomquist says. "You're thinking about your future—school, your career, starting a family. Breast cancer is the furthest thing from your mind."

Young patients often grapple with fears about fertility, relationships, and career interruptions. "Chemotherapy and certain medications can damage the ovaries," she explains. "Maybe they have a gene mutation they don't want to pass on. We have to think about fertility preservation early, and that window is narrow."

At Memorial, fertility preservation has become a key priority. "The window to have fertility conversations and preservation coordination is very narrow as we want to start treatment right away," says Maray Salina, MSN, APRN, FNP-BC, director of oncology support services. "Memorial Cancer Institute has a team of patient navigators that provide education, screening, and are able to connect patients to resources for fertility preservation."

She explains that these patient navigators also assist with grant applications and even offer financial support through the Memorial Foundation. These services were a central theme at a recent event hosted by Memorial for young breast cancer

patients, where attendees emphasized how essential it was to have early conversations about fertility options.

The emotional and psychological weight can also be overwhelming. "You need someone who specializes in psychology related to cancer," Dr. Bloomquist says. "There's so much angst when you're young, and then you throw this into the mix."

Career development, education, and financial stability are often jeopardized. "How do we prevent them from being hundreds of thousands of dollars in debt when they've just started their life?" she asks. "Financial toxicity is real."

### Genetics and Prevention

Genetic testing plays a more prominent role in younger cases. "We're more likely to find mutations like BRCA1, BRCA2, PALB2, CHEK2, and others in this population," Dr. Bloomquist says.

Still, the majority of young women with breast cancer don't have a family history. "That's why it's so surprising for them and another reason they may not take changes seriously at first."

She recommends that young women prioritize breast awareness over traditional self-exams. "As you're showering, notice the overall contour. Does your breast feel the same? How does the skin look?" she says. "If there's anything that changes, get it evaluated right away."

Women with family history should begin screening 10 years earlier than their closest relative's age at diagnosis, or at age 40, whichever comes first. For younger patients with dense breast tissue, she notes that MRI and ultrasound may be used in addition to mammography.

### Looking Ahead: Hope for the Future

Despite the many obstacles, Dr. Bloomquist sees reason for hope. "This group of young women—our Gen Zs, our Millennials—they're incredibly resilient," she says. "They lived through COVID. They had to adapt and overcome."

She also believes the way young people use social media is helping to break down stigma and foster community. "Even



Dr. Erica Bloomquist



Jenelle Naar

though this is a small group, they can talk to each other all over the world," she says. "Knowing that you're not alone and there's someone else like you—that matters."

She urges more participation in clinical trials. "Because this population is small, they're often underrepresented in the trials we use to guide treatment," she explains. "We need their presence so we can learn how to best care for them."

### Jenelle's Message to Others

Now 22 and cancer-free, Jenelle Naar recently shared her story at the special event hosted by Memorial. She took the opportunity to speak directly to others facing the same unexpected journey.

"I just wanted to come and maybe get the chance to speak to anybody," she says. "Just know that it's really hard to go through, but if I can do it, anybody can do it. I finished my treatment and my journey, so I'm just happy to go through the mindfulness of it all now that the stress is over. Now I can relax and sit with myself."

Although she describes herself as not very religious, Jenelle says the experience taught her a great deal about strength and perspective. "I do think that God gives His toughest battles to His strongest soldiers," she adds. "It builds character and it builds a life story. Sometimes it's something you'd only hear in a TV show, like 'Oh, cancer—the big thing where you lose your hair.' But actually going through it is a much tougher process than TV or movies can ever really capture."

For more information, visit [mhs.net](http://mhs.net).

## MAKINGROUNDS...MAKINGROUNDS...MAKINGROUNDS...MAKINGROUNDS...MAKINGROUNDS...

### Cleveland Clinic Expands Tradition Hospital Gastroenterology Team

Faddy Asslo, M.D., a board-certified gastroenterologist, has joined Cleveland Clinic Tradition Hospital. Dr. Asslo earned his medical degree from the University of Aleppo, Faculty of Medicine, in Aleppo, Syria, where he laid the foundation for his lifelong commitment to patient care and medical excellence. He completed his residency in internal medicine at Seton Hall University and continued his postgraduate training through rigorous fellowship programs in gastroenterology at New York Medical College at Saint Joseph's Regional Medical Center and Seton Hall University School of Health and Medical Sciences. Dr. Asslo's specialty interests include esophagology disorders, inflammatory bowel disease (IBD), colon disorders and hepatobiliary disorders. He is dedicated to advancing the diagnosis, treatment and management of complex gastrointestinal conditions and strives to improve patient outcomes through personalized and compassionate care.



Dr. Faddy Asslo

### Cleveland Clinic Welcomes Vascular Surgeon

Gregory C. Kasper, M.D., is a highly esteemed vascular surgeon and the Division Chair of Vascular Surgery at Cleveland Clinic in Florida. Dr. Kasper earned his medical degree from the University of Cincinnati College of Medicine. He completed his residency in endovascular surgery and a fellowship in peripheral vascular surgery at Good Samaritan Hospital in Cincinnati. Additionally, Dr. Kasper pursued a fellowship in endovascular procedures at the Arizona Heart Institute in Phoenix and he is board certified in vascular surgery by the American Board of Surgery.

Dr. Kasper's specialty interests include aneurysm repair, arterial embolism, carotid artery disease, critical limb ischemia, deep venous reconstruction and lymphedema. He is fluent in both English and Spanish, allowing him to effectively communicate with a diverse patient population.



Dr. Gregory C. Kasper

## Interventional and Structural Cardiologist Michael M. Halista, MD, Joins Palm Beach Health Network Physician Group

Interventional and structural cardiologist Michael M. Halista, M.D., joins the Palm Beach Health Network Physician Group. He is on staff at Delray Medical Center and West Boca Medical Center.

Originally from Massachusetts, Dr. Halista earned his medical degree from Columbia University College of Physicians and Surgeons in New York City after obtaining his undergraduate degree at Emory University in Atlanta. He completed his residency in internal medicine at Mount Sinai Hospital in New York City before pursuing cardiovascular and interventional cardiology training at New York University, where he served as chief fellow during his interventional cardiology fellowship. He completed a dedicated structural heart fellowship with Dr. John Vavalle at the University of North Carolina at Chapel Hill before joining the South Florida Heart Institute team at Delray Medical Center.



**Dr. Michael M. Halista**

## Kimberly Bennett, MD, MPH, Joins Holy Cross Medical Group's Internal Medicine Practice

Internal medicine physician Kimberly Bennett, M.D., MPH, has joined Holy Cross Medical Group.

A graduate of the University of Miami with a Bachelor of Science in Psychology and triple minors in chemistry, biology and business, Dr. Bennett then went on to earn her Doctorate of Medicine and Master of Public Health from the University of Miami Miller School of Medicine, where she was one of two students selected for the AOA Medical Honor Society during her junior year by placing in the top 10% of her medical school class based on cumulative GPA.

Following the completion of her degrees at University of Miami, Dr. Bennett traded the Sunshine State for the Lone Star State for her internal medicine residency at the University of Texas Southwestern in Dallas. She remained in Dallas for several years serving as a hospitalist at Baylor University Medical Center (BUMC) and a teaching attending for the medical center's internal medicine residency program. In addition, she was an affiliate clinical assistant professor for the Texas A&M College of Medicine.



**Dr. Kimberly Bennett**

## Holy Cross Medical Group Welcomes Neurologist Eduardo D. Zamora, MD

Neurologist Eduardo D. Zamora, M.D., has joined Holy Cross Medical Group.

Certified by the American Board of Psychiatry and Neurology, Dr. Zamora most recently served as Director of the Neurology Center of Excellence and prior to that was Director of the Inwood Neurology Clinic at Berkeley Medical Center, both in Martinsburg, WV.

Dr. Zamora earned his medical degree from the University of Buenos Aires School of Medicine in Buenos Aires, Argentina. He completed a fellowship in neuroscience at Georgetown University Medical Center in Washington, D.C. and later completed a fellowship in neuropathology at Johns Hopkins School of Medicine in Baltimore, MD and accepted a junior faculty position there. During his fellowship, he earned an Excellence in Research Award for studying a new model of vaccine for the treatment of Alzheimer's disease. He later obtained a senior research position at National Institutes of Health in Bethesda, Maryland to do research on mental diseases and performed clinical training in dementias at the University of Oxford in the United Kingdom.



**Dr. Eduardo D. Zamora**

## General Surgeon Sebastian Lopez, DO, Joins Palm Beach Health Network Physician Group

General surgeon Sebastian Lopez, D.O., joined the Palm Beach Health Network Physician Group. He is on staff at Florida Coast Medical Center in Port St. Lucie.

Dr. Lopez completed medical school at Lincoln Memorial University, DeBusk College of Osteopathic Medicine in Harrogate, Tennessee. For his general surgery residency, he attended West Virginia University/Charleston Area Medical Center in Charleston, West Virginia. He earned his Bachelor of Science in Microbiology and Molecular Biology from the University of Central Florida.



**Dr. Sebastian Lopez**

## Holy Cross Medical Group Adds Two New Primary Care Physicians

Family medicine physicians Joshua Wright, D.O., and Taylor Smith, D.O., have joined Holy Cross Medical Group.

Both Dr. Wright and Dr. Smith earned their Doctor of Osteopathic Medicine from the Nova Southeastern University (NSU) Dr. Kiran C. Patel College of Osteopathic Medicine in Davie, FL and are certified by the American Osteopathic Board of Family Physicians.

In addition to family medicine, Dr. Wright is also board-certified in osteopathic manipulative treatment. He completed the Puyallup Tribal Health Authority Family Medicine Residency program in Tacoma, WA, where he was elected chief resident and served on the Graduate Medical Education and Quality Improvement Committees. At NSU, Dr. Wright served as secretary of the Student American Academy of Osteopathy and gave tours of the Health Professions Division as a student ambassador on behalf of the Office of Admissions.

Dr. Taylor Smith is a board-certified family medicine physician with a strong foundation in clinical care, medical education and community outreach. As Chief Family Medicine Resident at Broward Health Medical Center, she managed care for over 90 patients in a skilled nursing facility and spearheaded several key initiatives within the residency program.

Since 2021, Dr. Smith has served as a clinical instructor for medical students at Nova Southeastern University (NSU).

Dr. Smith holds dual undergraduate degrees in Biology and Psychology from Florida State University, where she laid the foundation for her career in medicine.



**Dr. Joshua Wright**



**Dr. Taylor Smith**

## Cleveland Clinic Weston Hospital Expands Neurology and Cardiology Teams

Cleveland Clinic Weston Hospital proudly welcomes Zarmina Javed, M.D., to its neurology team and M. Lawson McDonald, M.D., to its distinguished team of cardiologists.

Dr. Javed earned her medical degree from Shifa College of Medicine in Islamabad, Pakistan.

She completed her neurology residency and internal medicine internship at Cleveland Clinic Weston Hospital and a fellowship in neuroimmunology and multiple sclerosis at the prestigious Cleveland Clinic Mellen Center in Ohio.

Dr. McDonald earned his medical degree from Wake Forest University School of Medicine in Winston-Salem, NC. He completed his internal medicine residency at Emory University in Atlanta and his cardiology fellowship at Cleveland Clinic Weston Hospital, where he developed a deep commitment to patient-centered care and clinical excellence.



**Dr. Zarmina Javed**



**Dr. M. Lawson McDonald**

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## BROWARD HEALTH CORAL SPRINGS

### Rockkeisha Tomlin, RN, BSN, MSN

Rockkeisha Tomlin, RN, is a nurse and preceptor in the Emergency Department at Broward Health Coral Springs. She began her nursing career on the medical and telemetry unit, where she built a strong foundation in acute and complex patient care.

"I've always had a deep desire to help people in critical situations in a fast-paced environment, which drew me to the Emergency Department," Tomlin said.

A native of Jamaica, she is motivated by knowing she can make a difference, whether it's stabilizing someone after a serious accident or offering comfort during a health crisis. "I oversee the flow of the unit, support the team in making critical decisions and ensure patient care is delivered safely," Tomlin said. "As a preceptor, I mentor new nurses and help them build confidence, clinical skills and strong communication."

Tomlin earned an associate degree in nursing from Concorde Career College and bachelor's and master's degrees in nursing from Capella University.



### Giselle Rodriguez, RN, BSN

As an Emergency Department nurse at Broward Health Coral Springs, Giselle Rodriguez thrives in the fast-paced environment of the unit.

Unsure at first which career path to take either physician, physician assistant, nurse practitioner or registered nurse, Rodriguez shadowed each role before choosing nursing.

"I like the clinical aspect of nursing and being able to spend more time with patients," Rodriguez said. "I love implementing critical thinking skills and being able to assist someone in their worst times."

With more than two years of experience as a nurse, including one year in the Emergency Department, she finds motivation in the progress she's made and the patients she serves. "It's the small 'thank you's' that keep me going and push me to keep doing my best," Rodriguez said.

A Miami native, Rodriguez earned a bachelor's degree in exercise physiology and a Bachelor of Science in Nursing from the University of Miami.



## BROWARD HEALTH IMPERIAL POINT

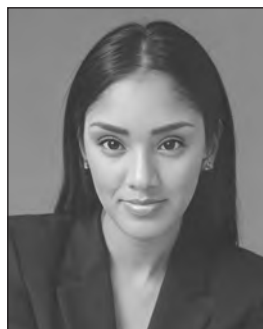
### Kristen Hall, RN, BSN

Kristen Hall is a charge nurse in the Emergency Department at Broward Health Imperial Point, where she combines her passion for service with strong leadership skills. Before becoming a nurse, Hall spent 10 years in law enforcement. "I've always been drawn to serving others, especially in critical moments, and I found that nursing was a natural extension of that same calling," Hall said.

In her role, she coordinates patient flow, supports nurses on the floor, ensures compliance with safety standards, conducts chart reviews, attends leadership meetings and helps her team deliver high-quality care.

"My time in this field has taught me the importance of teamwork, strong decision-making and the ability to remain calm under stress," Hall said. "These skills have helped me succeed and serve others with confidence and compassion."

She earned her Bachelor of Science in Nursing from Florida Atlantic University and also holds a degree in public administration.



### Elizabeth Thompson, RN

A clinical rotation in the emergency room while in nursing school inspired Elizabeth Thompson to pursue a career in emergency nursing. She was drawn to the fast-paced environment, the variety of patient conditions, and the process of piecing together symptoms and test results to reach a diagnosis. Now a registered nurse specializing in critical care, Thompson has 10 years of nursing experience and has been with Broward Health for the past year and a half.

"My daily motivation is knowing that I have an impact on people's lives," she said. "I provide immediate care and comfort in critical situations."

In her role, she assesses and stabilizes patients with acute conditions, collaborates with fellow clinicians, monitors patient progress, documents assessments and procedures, and provides emotional support to patients and families.

Originally from Central Florida, Thompson moved to South Florida to attend Barry University, where she earned a Bachelor of Science in Nursing.



## BROWARD HEALTH MEDICAL CENTER

### Lina Sarmiento, RN

Lina Sarmiento is an Emergency Department nurse at Broward Health Medical Center with more than 25 years of experience in healthcare. For Sarmiento, the Emergency Department is more than a workplace; it is her life's mission.

"I'm part of a great collaborative team with the mission to support our community by delivering safe, compassionate and high-quality care," Sarmiento said. "Making a positive impact on patients' lives is very motivating."

Her role includes rapid triage, critical patient assessment and emergency interventions in a fast-paced, high-pressure environment. "I love helping others, especially in their most vulnerable moments," Sarmiento said. "Being calm, knowledgeable and a fast thinker can truly make a positive impact in someone's life."

Originally from Colombia, Sarmiento first graduated from medical school in her home country before moving to South Florida, where she earned her nursing degree through Broward College. During a student rotation, she quickly realized that the emergency room was where she belonged.



### Adriana Green, RN

For Adriana Green, nursing began with a spark of inspiration during her teenage years. While working at an animal hospital, she overheard a colleague talk about nursing school. Intrigued, she began asking questions and soon knew she wanted a career in emergency care.

Today, Green has dedicated 24 years to emergency medicine, first as an EMT and now as a registered nurse. She is a registered nurse in the Emergency Department at Broward Health Medical Center, where she manages critical and emergent situations with the goal of providing the best possible outcomes for patients and families.

"My happiness comes from seeing the sick and injured heal and go home feeling better than when they came in," she said. "It makes my heart happy to see patients smile."

Green earned her associate's degree in nursing at Palm Beach State College and has spent her entire nursing career serving patients at Broward Health.



## BROWARD HEALTH NORTH

### Olivia Castellano, RN

A pivotal moment in Olivia Castellano's nursing career came while she was working on a telemetry unit. In 2018, she was floated to the Emergency Department during the Marjory Stoneman Douglas school shooting.

"I was overwhelmed by the chaos but in awe of how the ED team, along with those of us from the floors, came together to triage, care for and support the patients," she said. Inspired by that day, she applied to transfer to the ED a month later and hasn't looked back.

Today, Castellano is a registered nurse specializing in trauma and critical care, managing Level 1 and 2 trauma patients as well as stroke and STEMI cases.

"My daily motivation comes from seeing patients improve, even a little, before moving upstairs," she said.

A native of Margate, Florida, she earned her associate's degree from Broward College and her bachelor's from the University of West Florida.



### Jonathan Richburg, RN

For Jonathan Richburg, serving as an Army medic laid the foundation for a career in emergency medicine. The military taught him to stay calm under pressure, make life-or-death decisions and find fulfillment in providing care to people at their most vulnerable state. That experience sparked his passion for the emergency room where the pace and urgency mirror his time in service.

"Patients are my daily motivation," Richburg said. "They remind me why compassion, skill and resilience matter in this work."

Now a registered nurse in Broward Health North's emergency department, Richburg leads care for Level I trauma patients and is training as a charge nurse. He began at Broward as a nurse extern while in school and has since grown into his role with nearly three years at the health system and almost two as an RN.

Richburg earned his associate degree in nursing from Jersey College School of Nursing.



## HOLY CROSS HEALTH

### Noelia Miller, RN

As a nurse in the emergency department (ED) of Holy Cross Health in Fort Lauderdale for the past four years, Noelia Miller, RN, advocates for patients; communicates changes to care teams; stabilizes patients with lifesaving interventions; supports the flow of the unit with patient intakes, discharges and transfers; documents care; mentors new staff and students; and assists with conscious sedation procedures. She is skilled in triage, acute and chronic care, and perioperative patient management. A strong collaborator, Miller effectively and efficiently works with physicians and interdisciplinary teams to ensure safe, high-quality care for adult and pediatric patients. She was previously with West Boca Medical Center's ED in Boca Raton and outpatient surgery services at Broward Health Imperial Point in Fort Lauderdale. Bilingual in English and Spanish, Miller earned her Associate of Science in Nursing from Keiser University in Fort Lauderdale and Associate of Arts from Palm Beach State College in Boca Raton.



### Michelle Edwards, BSN, RN

Michelle Edwards, BSN, RN, joined Holy Cross Health in Fort Lauderdale as a clinical support coordinator in March 2018. Then, soon after earning her Bachelor of Science in Nursing from Chamberlain College of Nursing in Miramar, she became an emergency room nurse and clinical lead at Holy Cross in March 2020. In this role, she collaborates with interdisciplinary teams of doctors and residents to provide comprehensive care to patients, addresses patient needs and concerns, and reviews organizational policies and procedures with new graduate and experienced nurses. She previously served as an office manager at Sunrise Medical Group in Hollywood, senior patient service specialist and team lead at Select Physical Therapy in Coral Springs and office assistant at Breast Diagnostics in Aventura. Edwards also holds a bachelor's degree in health administration from Florida Atlantic University in Boca Raton and associate's degree in health administration from Broward College in Davie.



## Cover Story: Jon Hodges Maintains Ties with Team Following Promotion

*Continued from page 1*

He pointed out that since he was already doing some parts of the job, and because he wanted to stay at Jupiter, it was a natural evolution. "I was up for a challenge and the challenge was to become a director."

Hodges talked about the changes between the two positions: "As the manager, you're really hands-on with your team, you try to work through problems; you wear scrubs, you jump in when needed. As director, you're more in (regular) clothes, you have more to manage, from finances and budgeting, which I am still learning."

As director, Hodges said he is handling more of the financial part of the work. In fact, he admitted that running the financial and the budgeting portion has been the biggest challenge for him so far, but added, "Luckily we have other great leaders in JMC so I'm very fortunate that they have helped me." He said he has asked questions of both the CNO and the COO, and both have been very responsive and helpful, as have all of the other directors.

Working in an emergency department wasn't what Hodges had planned as a career; he said when he started out, he originally thought he wanted to be a nurse anesthetist. "I had to go to nursing school, but when I got in I found out I

didn't really love the nursing anesthetist part of it." He ended up doing work in an emergency room in Miami, and that's when he realized, "That's kind of where I fell in love with the emergency department, and knew that's where I wanted to be."

Being relatively new to the position, Hodges isn't contemplating any immediate changes to the department. He said, "Right now I'm really just trying to get my feet under me." Having worked in Jupiter Medical Center's emergency room since 2005, he said he has been a part of many of the changes that have taken place in the past two decades, and added, "The manager helps influence some of the changes, so we're pretty happy with it."

He did say that the next big step being considered is trying to change the front-end process where patients are received.

However, no matter what projects are on the horizon, Hodges maintains that what he likes best is to be with his team. "I'm not as close as I was (previously), but I love that I can still get out on days when it's a little bit slow and see patients and help the nurses."

For more information, call (561) 263-2234 or visit [www.jupitermed.com](http://www.jupitermed.com).

## Around the Region... Around the Region... Around the Region...

### Lee Health Announces Promotion of Tracy Pyles to Chief Legal Officer and General Counsel

Lee Health is pleased to announce the promotion of Tracy Stott Pyles to Chief Legal Officer and General Counsel, succeeding Mary McGillicuddy, who has taken on a new role as Special Executive Counsel. Pyles joined Lee Health in 2017 and most recently served in the role of Vice President and Senior Deputy General Counsel where she led the health system's legal affairs and oversaw the legal professionals responsible for regulatory compliance, human resources, litigation, government investigations, and revenue integrity. An honors graduate from The Ohio State University Moritz College of Law, Pyles was a Partner at a large international law firm where she specialized in complex litigation and regulatory matters and represented companies in federal courts across the country, including at the U.S. Supreme Court.



Tracy Stott Pyles

marketing and communications strategies for Nemours Children's Health, which provides pediatric physician services at Wolfson Children's Hospital.

Sanders was educated in New York, earning her Bachelor of Arts in Communications from the Roy H. Parks School of Communications at Ithaca College and her Master of Business Administration from Rochester Institute of Technology. She is a member of the Health Care Executive Forum and the Society for Healthcare Strategy & Market Development.

### Wellington Regional Medical Center Welcomes Two New Members to Board of Governors



Maggie Zeller



Michael Drahos

Wellington Regional Medical Center is proud to announce the appointment of two distinguished community leaders, Maggie Zeller and Michael Drahos, to its Board of Governors.

Maggie Zeller, Founder and Independent Health Insurance Advisor at Zeller Health Insurance Solutions LLC, has been a trusted advocate for individuals navigating the complexities of health insurance since 2013. With a career spanning five decades in banking, business development and health insurance, Maggie is known for her integrity, personalized service, and dedication to helping clients find coverage that meets their unique needs.

Michael Drahos is a seasoned attorney specializing in maritime medical malpractice defense, with over 15 years of experience representing shipboard medical professionals worldwide. He is a recognized expert in jurisdictional defenses and frequently lectures at cruise industry seminars. Michael also brings a broad legal background in product liability and medical device litigation, serving as regional counsel to a global sports equipment and apparel company.

### Baptist Health Welcomes Sarah C. Sanders as Executive Vice President and Chief Consumer Officer

After an extensive nationwide search, Baptist Health has named Sarah C. Sanders, MBA, as executive vice president and chief consumer officer (CCO). Sanders brings more than 20 years of leadership experience in marketing and communications within health care and academic medical environments. She joins Baptist Health from University of California, San Francisco/UCSF Health, where she served as vice president, chief marketing and communications officer for the top-10 rated regional academic health system with seven hospitals. Sanders is returning to Jacksonville, having previously led



Sarah C. Sanders

# Salute to Case Managers...

## MEMORIAL REGIONAL HOSPITAL SOUTH

### Bilan Said, RN

Helping patients in their lowest moments, and seeing their progress during rehabilitation, is a big part of the satisfaction Bilan Said gets from being a case manager in the Memorial Healthcare System.

"I've always worked with medically-complex patients," she explained, which includes a nursing career that began in 2005. "Those who have had strokes or car accidents with multiple traumas can be hospitalized for weeks and months at a time, so deep connections are formed with the clinical team that are part of that person's journey."

When it's finally time for the patient discharge, Said, a native of Somalia, shares that she is always available to answer questions, provide updates, and be an ongoing resource. Growing up in a war-torn country, she knows what it means to be a friendly face and to lend a helping hand.



## MEMORIAL HEALTHCARE SYSTEM

### Eleanor Toyloy, RN

A nurse since 2008, Eleanor Toyloy began her current role as an RN specialist in Memorial's Utilization Management department in 2019, after previously being in case management at Memorial Hospital West. No longer working directly with patients, she still advocates for them behind the scenes by reviewing charts and clinical documentation connected with their care to ensure it meets the system's guidelines. An example of this would be evaluating a patient's hospital stay to ensure it aligns with medical necessity and appropriate level of care.

Toyloy says she counts on clinical judgement and critical thinking developed during a nursing career that included time at the bedside, in home health, and on-site case management to guide her patient advocacy. She then coordinates with the entire team to deliver the high-quality care each individual deserves.



## MEMORIAL HOSPITAL WEST

### Genesis Fuste, RN, BSN

Genesis Fuste began her career in case management in 2020 and has more recently been promoted to leadership positions, first as a manager of the department last year and now as its interim director.

"I'm excited to leverage my experience and leadership skills to drive improvements in patient care, streamline operations, and foster a collaborative and engaged team environment," said Fuste. "The chance to lead a department at this scale offers the opportunity to have a significant impact on facilitating hospital-wide initiatives, including improving patient flow, reducing readmission rates, and enhancing overall care coordination."

Fuste is focused on mentoring and supporting her team while fostering a culture of learning and development. She has also embraced the strategic nature of the director's position, which enables her to work with senior hospital leadership to shape and implement key initiatives that affect the entire organization.



## MEMORIAL HOSPITAL MIRAMAR

### Martha C. Sommovigo, BSN, RN, ACM

Martha Sommovigo has been a case manager in the Memorial Healthcare System for more than 13 years and is more focused than ever on the individuals who look to her for guidance. "I believe every patient deserves a dedicated advocate to help them navigate the complexities of healthcare and I'm committed to being that advocate," said Sommovigo. "My passion for this role continues to grow."

Sommovigo says communication and organization are critically important to ensure patients and families feel supported, informed, and empowered while connected to the hospital. Part of that is delivering a seamless, personalized care plan for each that includes both healthcare providers and community resources. Her ultimate goal and reward? To be a trusted resource for patients every step of their healthcare journey while also living Memorial Miramar's mission to provide compassionate, holistic care to the community.



## MEMORIAL HOSPITAL PEMBROKE

### Melissa Vega, RN, BSN

A former bedside nurse on a pediatric hematology oncology unit, Melissa Vega made the transition to case management four years ago and has found the position to be much different than what people usually expect.

"We influence patient flow at the hospital, work with the revenue department, and have to be in tune with the social needs of patients after discharge," said Vega, now in a supervisor's role. "In that respect, it's critical we understand what community resources are available to access in the tri-county area."

Vega believes critical and creative thinking, time management, and the ability to prioritize tasks are the keys to having success in the case manager's role. She is grateful for a supportive team at Memorial Hospital Pembroke and appreciates the homey feel within the facility, as well as the overall culture with Memorial Healthcare System.



## MEMORIAL REGIONAL HOSPITAL

### Taylor Adams, RN, BSN

Taylor Adams began her Memorial Healthcare System career as a bedside nurse on a neuro telemetry unit but was intrigued by a fellowship program that offered an easy transition to case management. "It provided an opportunity to explore another type of nursing, while still focusing on patient care. Coming from a clinical background, I'm able to anticipate how long their stay may be and what their needs will likely be at discharge."

That discharge plan - whether to home, rehabilitation or skilled nursing facility - begins with listening to patients and understanding their goals. Adams says being the patient's advocate is an important part of the case manager's role, and the opportunity to communicate with families and staff at Memorial Regional what she enjoys most about the position. "It's critical that everyone be on the same page to ensure a smooth transition for those we've cared for."



## JOE DIMAGGIO CHILDREN'S HOSPITAL

### Wesline Modestil, BS, RN, CCM

After beginning her career as a respiratory therapist, Wesline Modestil joined the neonatal intensive care unit (NICU) and has never left. In the two decades since, she has helped care for the sickest newborns as a bedside nurse, discharge coordinator, and now the NICU nurse case manager. It's the kind of work where meaningful connections are formed with families coping with the most difficult circumstances.

"We continue to receive pictures and updates from families of the kids we've cared for," Wesline said. "Parents remember how we were there for their little ones when they needed us the most. They remember how we made them feel, and that it really mattered."

Wesline views her advocacy for and commitment to NICU families as much more than just part of the job. "I love what I do. I see it as a purpose."



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# Salute to Case Managers...

## HOLY CROSS HEATH

### Astride DeSario, RN, BSN

Astride DeSario, RN, BSN, is a dedicated Nurse Case Manager at Holy Cross Health in Fort Lauderdale. Drawing on years of bedside experience across multiple nursing specialties and prior supervisory roles, she delivers clinically sound, patient-centered care. Her broad clinical foundation allows her to navigate complex cases with precision, empathy and strategic insight. DeSario is a passionate patient advocate.

On behalf of patients, she coordinates with physicians, insurance providers, skilled nursing facilities, rehabilitation centers, home health agencies and durable medical equipment (DME) companies to secure essential resources that support safe, effective discharges. DeSario ensures patients transition into the community with clarity, continuity and the tools they need to heal. Known for her warm, professional communication, she makes patients and families feel seen and heard and explains complex discharge plans in clear, compassionate language, empowering them to make informed decisions and navigate the healthcare system with confidence.

DeSario's work reflects not only clinical excellence but also a natural aptitude for leadership. She consistently elevates standards of care, fosters collaboration across disciplines and models the kind of ethical, efficient practice that inspires trust and drives outcomes.



### Alecia West, MSN, RN

Alecia West, MSN, RN, is the Nurse Manager of the Care Coordination Department at Holy Cross Health in Fort Lauderdale. Recognizing the critical importance of safe and appropriate discharges, West transitioned into case management in 2019.

Her dedication and leadership propelled her into a supervisory role within two years. Today, West advocates for seamless care transitions, ensuring every patient receives the support they need beyond the hospital walls. As a servant leader, she prioritizes the well-being of patients, families and her team. Her approach is rooted in empathy, collaboration and accountability. West fosters a culture where every voice is valued, and every action is guided by the mission to improve patient outcomes. She empowers her team by promoting professional growth, encouraging innovation and leading by example, always with integrity and purpose.

More than 25 years ago, West began her healthcare career as a certified nursing assistant and then as a unit secretary. While working full-time and raising three children with her spouse, West returned to school to earn her Master of Science in Nursing from Chamberlain University in Illinois. She also holds associate and bachelor's degrees in nursing from Gwynedd Mercy University in Gwynedd Valley, PA.



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# Salute to Case Managers...

## Cover Story: The Vital Role of a Trauma Case Manager at Broward Health

Continued from page 1

services needed after discharge, and set expectations for the next five or 10 years," he explained. "Providing that roadmap brings stability during a period of fear and uncertainty."

In this way, case managers serve as more than just facilitators of care; they are navigators of a new reality. "We act as the bridge between the acute care setting and the life patients are trying to rebuild," he added.

### Overcoming Complex Challenges

One of the most formidable obstacles Shumaker faces is not medical but bureaucratic, particularly navigating the complexities of the insurance system.

"Coverage often determines access and can delay care," he said. Shumaker takes a proactive approach to minimize delays. "I've built strong relationships with insurance case managers and social workers. That rapport helps secure approvals faster and even overturn denials."

For patients arriving without insurance, his work becomes even more critical. "I assist patients in obtaining coverage through community programs that help with premiums, enabling them to secure insurance and continue their recovery without delay."

### Advocacy That Transforms Lives

Advocacy is a cornerstone of trauma case management. Shumaker recalled a patient who had been struck by a train and remained in a comatose state for months.

"The conversation was shifting toward hospice, but the family opposed it," he recalled. "I advocated for a psychiatry consult and discovered national disorders of consciousness (DoC) programs. With that support, she was accepted to a program and transferred out of state successfully."

The outcome was extraordinary. "She has graduated from the program, is home with her family, and can speak, move, and perform daily activities," he said. "Seeing her progress from a Glasgow Coma Scale of 4 or 5 to reclaiming part of her life reminds me why advocacy is central to case management."

### Interdisciplinary Care in Action

At Broward Health, collaboration is not just encouraged, it's embedded into the daily routine.

"Interdisciplinary teamwork is the standard at Broward Health," Shumaker noted. "Every morning, each floor meets with its physicians, nurses, case managers, social workers and leadership to review every patient. Together, we coordinate inpatient care and prepare for fol-

low-up."

This approach delivers measurable results. "It reduces length of stay and improves patient and family satisfaction," Shumaker said. "With all voices present, care plans are aligned, expectations are clear and patients start their day knowing what to anticipate, whether it's therapy, tests, surgery or preparing for discharge."

### The Future of Case Management

As healthcare evolves, so does the role of the case manager.

"With the focus on value-based care and population health, case management will become more hands-on and proactive," Shumaker predicted. "Case managers will coordinate post-acute care, arrange community supports like Meals on Wheels or shelter discharges, and engage in outpatient care to prevent hospitalizations and ensure consistent follow-up."

The shift is clear, case managers are no longer confined to hospital walls. "We'll be more deeply woven into the patient's daily life, supporting health before a crisis happens," he said.

### Embracing Technology to Improve Lives

Technology has also transformed Shumaker's ability to coordinate care more efficiently.

"Since moving to Epic last November, we've integrated tools that streamline care coordination and improve accuracy," he explained. "We're beginning to use AI to track length of stay and generate patient

summaries, allowing case managers to quickly understand complex cases."

Digital access is transforming how patients engage with their care. With the launch of Epic came MyChart, a secure online portal that allows patients to take a more active role in managing their health. Through MyChart, they can view medical records, message providers, and receive answers in real time. This level of transparency not only strengthens patient engagement but also makes coordination more seamless for the care team.

### A Job Fueled by Hope

What keeps Shumaker going in this emotionally demanding role is the reward of seeing his patients thrive.

"What inspires me most is watching patients regain independence and reclaim their lives," he said. "Many families stay in touch after discharge, and seeing them adapt and grow after trauma is incredibly rewarding."

For Shumaker, success is measured by meaningful outcomes, not metrics alone. "I measure success by safe, effective discharges. I take satisfaction in ensuring patients have what they need, smoothing family challenges, and optimizing safety at home. Every successful transition is not just a discharge; it's the beginning of a new chapter for the patient and family, and I'm proud to play a role in that."

For more information, visit [BrowardHealth.org/Emergency](http://BrowardHealth.org/Emergency).

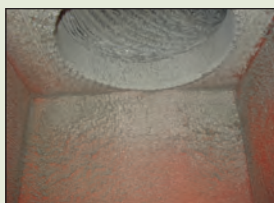
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## WHAT'S NEW...WHAT'S

### Florida Coast Medical Center Officially Opens to the Treasure Coast Community



Florida Coast Medical Center officially opened its doors on September 9, 2025, becoming the first new hospital to open on the Treasure Coast in more than a decade. The \$200 million, 180,000-square-foot facility expands access to high-quality care in St. Lucie County and beyond.

The hospital includes 54 in-patient beds and a 24-hour emergency department, ensuring patients receive timely care in a modern and efficient environment. In addition, an adjacent medical office building houses physician practices and an ambulatory surgery center, supporting a strong continuum of care for patients close to home.

Florida Coast Medical Center features the latest innovations in healthcare delivery, including advanced robotic surgical systems that allow for precision procedures and quicker recoveries. Patient-centered safety features, such as cell phone charging ports built into hospital beds, reduce fall risks by keeping devices within reach.

Beyond today's opening, the property has been designed with the flexibility to grow alongside the community. Future expansions will be tailored to meet the evolving healthcare needs of residents across the Treasure Coast.

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Dabdoub Law Firm specializes in physician disability insurance claims, appeals, and litigation. Dabdoub Law has a track record of success in helping physicians get paid disability benefits. This includes winning a case for a liver transplant surgeon with their own occupation policy who was no longer able to perform liver transplants. Dabdoub Law Firm has successfully represented physicians against all major insurance carriers with individual own occupation policies and group disability policies. Call 888-812-0393 today.

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## **BRACING & POST-AMPUTATION PROSTHETIC CARE & SERVICES**

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## **EDUCATIONAL OPPORTUNITIES**

### **FLORIDA ATLANTIC UNIVERSITY MASTER OF HEALTH ADMINISTRATION / ON-SITE**

Florida Atlantic University is home to the 15-month Executive Master of Health Administration (EMHA) program designed for working professionals looking to enhance their career. The program offers the convenience to complete the master's degree in a structured 15-month cohort program offered on Monday and Wednesday evenings. The EMHA program will expand student's qualifications for challenging leadership positions in various healthcare sectors. Students are given the tools to help foster change in a dynamic, ever-changing environment. Call (561) 297-6000 or visit [www.business.fau.edu/emha](http://www.business.fau.edu/emha).

### **MIAMI DADE COLLEGE - MEDICAL CENTER CAMPUS**

Students at the Medical Campus learn as they build their experience in state-of-the-art facilities. Students practice their skills on human patient simulators - manikins capable of mimicking more than 200 illnesses and conditions. The Campus offers a variety of disciplines in nursing and allied health. There are more than 20 options, including bachelor's degree programs and training certificates that can put you on the fast track to an exciting career in healthcare. For more information, contact 305-237-4141 or visit <http://www.mdc.edu/medical/academic-departments> for more information.

### **SOUTH UNIVERSITY**

South University is a nonprofit institution offering educational opportunities for intellectual, social and professional development. With a 120-year story, our community is one where you can belong, believe and become. Providing excellent student services since 1981, the beautiful West Palm Beach Campus, with its landmark Clock Tower, is ideally located in the Palm Beaches of Florida. Regardless of pursuing an associate degree, baccalaureate, masters, or doctorate, our campus offers something for all. South University - West Palm Beach (561) 273-6500 • Toll-free 1-866-242-1840 [www.southuniversity.edu/westpalmbeach](http://www.southuniversity.edu/westpalmbeach)

## **HEALTHCARE ACCOUNTING AND ADVISORY**

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## **HOMECARE SERVICES**

### **MORSELIFE HOME HEALTH CARE**

MorseLife, a recognized leader in exceptional healthcare, housing and support services for seniors in Palm Beach County, delivers home health care catered to individual needs enabling people to live as independently as possible. Assistance with personal care, homemaking, neighborhood errands and companionship is offered from one hour visits to 24/7 in-home, hospital, rehab centers, nursing homes and independent/assisted living settings. License #HHA21179096. Visit <https://morselife.org/home-health-care/> or call (561) 599-5770.

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## **INSURANCE SPECIALISTS RISK STRATEGIES**

Danna-Gracey, the largest independent medical malpractice insurance agency in Florida, dedicated to providing insurance coverage placement for doctors and other health care providers over the past 20 years, is now a part of Risk Strategies. Risk Strategies is a leading national specialty insurance brokerage and risk management firm offering comprehensive risk management advice and insurance and reinsurance placement for property & casualty, and employee benefits risks. With more than 30 specialty practices, Risk Strategies serves commercial companies, nonprofits, public entities, and individuals, and has access to all major insurance markets. For more information, contact Matt Gracey at [matt@dannagracey.com](mailto:matt@dannagracey.com) or (561) 276-3553.

## **MARITAL & FAMILY LAW ATTORNEY**

### **NEAVE FAMILY LAW, P.A.**

Neave Family Law, P.A., provides legal services in the area of marital and family law. When family law matters must be decided by the legal system, the process can be complicated by heated emotions and financial turmoil. It is the goal of Neave Family Law, P.A., to guide you through the legal process and remove as much financial stress as possible. For a consultation, please call (954) 981-2200 or visit [www.divorcelawyerfortlauderdale.com](http://www.divorcelawyerfortlauderdale.com).

## **MARKETING & PUBLIC RELATIONS BOARDROOMPR**

BoardroomPR is a full-service PR and integrated marketing agency, leveraging the skills of our staff of former journalists, PR and marketing pros and multimedia specialists to provide visibility across numerous platforms to our healthcare clients. We combine PR with digital and branding campaigns to build brand and business. For more information, contact Don Silver at [donsil@boardroompr.com](mailto:donsil@boardroompr.com).

## **MEDICAL ASSOCIATION**

### **DADE COUNTY MEDICAL ASSOCIATION**

Dade County Medical Association (DCMA) – "The voice of Physicians in Miami Dade County." Supporting its members in all aspects of the practice of medicine; to serve physicians and their patients by establishing and promoting ethical, educational and clinical standards for the medical profession, and to advocate the highest principle of all, the integrity of the patient/physician relationship. For more information: visit the website [www.miamimed.com](http://www.miamimed.com) or please call Angel Bosch at (305) 324-8717 or email [Angel@abosch@miamimed.com](mailto:Angel@abosch@miamimed.com)

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### REGISTER FOR AN EMHA OPEN HOUSE

Saturday, October 4, 2025 @ 10:00 AM  
Boca Raton Campus or Live Virtual

### HEALTHCARE PROFESSIONALS NETWORKING EVENT

Wednesday, October 22, 2025 @ 6:30 PM  
Fort Lauderdale Campus

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