



**PROFILES
IN
CARDIOLOGY**

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CARDIOLOGY:
*How a Cup of
Coffee Saved
a Life*

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Hospital NewsTM and HEALTHCARE REPORT

Volume 22 • Issue 8 • \$5.00 February 2026

THE REGION'S MONTHLY NEWSPAPER FOR HEALTHCARE PROFESSIONALS & PHYSICIANS
OUR 22TH YEAR SERVING THE HEALTHCARE COMMUNITY!

Education



Dr. Howard K. Butcher

Advancing Nursing Research Through Caring Science at the Christine E. Lynn College of Nursing

BY DANIEL CASCIATO

As healthcare grows more complex, the need for rigorous nursing research grounded in compassion and human experience has never been greater. From improving care for an aging population to transforming healthcare environments, nurse scientists play a critical role in shaping the future of care delivery.

At Florida Atlantic University's Christine E. Lynn College of Nursing, doctoral education is rooted in a philosophy that integrates scientific inquiry with caring science. Now in its twentieth year, the Doctor of Philosophy with Major in Nursing (Ph.D.) program prepares nurses to generate new knowledge that advances practice, informs policy, and improves health outcomes across diverse communities.

A Doctoral Program Grounded in Caring Science

Under the leadership of Howard K. Butcher, RN, PhD, FAAN, the program emphasizes research that is both

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Cardiology

Innovating the Future of Heart Health *Caring for Your Heart with All of Ours*

Broward Health is expanding cardiac services across the system, adding new technology, procedures and specialists to increase access to advanced heart care, reflecting its commitment to caring for your heart with all of ours.

Heart disease remains the leading cause of death in Florida, according to the Centers for Disease Control and Prevention. Heart disease encompasses many conditions, including coronary artery disease, arrhythmia, heart failure and heart valve disease.

Coronary artery disease, the most common type, occurs when plaque builds up in the coronary arteries and reduces or blocks blood flow to the heart. If left untreated, the condition can lead to a heart attack. Arrhythmia refers to an abnormal heart rhythm, while heart failure occurs when the heart is unable to pump enough blood to meet the body's needs. Heart valve disease occurs when one or more of the heart's four valves do not function properly.

"We are further enhancing the multispecialty cardiac care we provide so our patients have access to innovative thera-



Dr. Pablo Rengifo-Moreno



Dr. Jonathan Nieves with Owen Creighton



Dr. Jose Baez-Escudero

Continued on page 22



Dr. Carlo Zeidenweber

KIDZ' Pediatric Cardiologists Improving Outcomes for Children with Heart Problems

BY VANESSA ORR

Approximately one out of 100 babies is born with a heart defect. While that diagnosis can be terrifying for parents, the good news is that outcomes for these pediatric patients have improved significantly over the years.

"Forty or fifty years ago, what we would consider a lethal heart defect was no longer the case; we very rarely see patients that we can't help," said KIDZ Medical Services' Pediatric Cardiologist Carlo Zeidenweber, M.D. "Every day, new technologies and new devices are helping to improve outcomes."

KIDZ Medical's team of pediatric cardiologists—who cover Miami-Dade, Palm Beach, St. Lucie, and Collier counties—deal with several heart issues, including congenital heart defects present at birth, arrhythmia, tachycardia, endocarditis, benign heart murmurs, hyperlipidemia, hypertension, fainting, obesity, heart damage caused by infections or viruses, pediatric chest pain, and more.

While adult symptoms may include chest pain, fainting, or difficulty breathing, children present heart problems different-

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Baptist Health Miami Cardiac & Vascular Institute Sets New Benchmark With 100th Robotic Heart Surgery

BY DANIEL CASCIATO

At Baptist Health Miami Cardiac & Vascular Institute, a major milestone in cardiac care was reached less than a year after launching a new robotic cardiac surgery program. World-renowned Makoto Hashimoto, M.D., a cardiac surgeon with Baptist Health Miami Cardiac & Vascular Institute and professor and director of robotic cardiac surgery at Florida International University (FIU) Herbert Wertheim College of Medicine, and Tom C. Nguyen, M.D., chief medical executive of Baptist Heart & Vascular Care, director of minimally invasive surgery, and professor and chair of the Department of Cardiovascular Sciences at FIU, recently completed the Institute's 100th robotic heart



Dr. Makoto Hashimoto



Dr. Tom C. Nguyen

Continued on page 21

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Publisher's Note

A Time to Celebrate the Heart and Those Who Care for It

February may be the shortest month of the year, but when it comes to matters of the heart, it carries a very big beat. As Heart Month, February gives us the perfect excuse—if we really need one—to shine a spotlight on cardiology, cardiovascular care, and the people who spend their days (and nights) making sure our hearts keep doing their thing without complaint.



Rumor has it that cardiologists secretly love February more than Valentine's Day florists do. After all, while roses wilt and chocolate mysteriously disappears, the heart never takes a holiday. And whether you're 18, 38, or proudly collecting senior discounts, your heart has been clocking in every day since before you were born. No PTO. No sick days. No excuses.

The truth is, heart health is not just a "later in life" issue. Cardiologists will tell you—often repeatedly—that what you do in your 20s and 30s sets the tone for your 50s, 60s, and beyond. Diet, exercise, stress, sleep, and yes, that annual physical you keep postponing, all play a role. Think of it as preventive maintenance for the most reliable engine you'll ever own.

South Florida is home to world-class cardiology programs, innovative procedures, and clinicians who combine cutting-edge technology with old-fashioned listening skills. From interventional cardiology to electrophysiology, from prevention to recovery, the advances happening right here in our region are nothing short of remarkable. Another rumor floating around hospital hallways? Heart teams are among the most collaborative in healthcare—because when it comes to saving lives, egos don't get a seat in the cath lab.

This month, we salute cardiologists, nurses, techs, and support staff who make heart care possible. But we also salute patients who take that first step—scheduling a screening, asking questions, making small lifestyle changes that add up over time.

So this February, celebrate your heart. Show it some love beyond candy and cards. Walk a little more. Stress a little less. Laugh often. And remember: caring for your heart at every age isn't just smart medicine—it's the best long-term relationship you'll ever invest in.

Here's to healthy hearts, strong beats, and a future that keeps on ticking.

Charles Felix



*You can reach Charles Felix at
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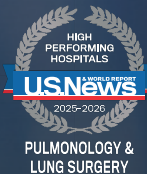
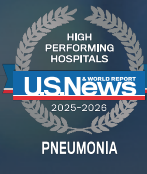
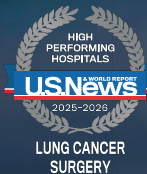


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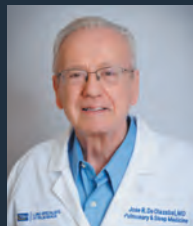
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House Bill Would Provide Non-traditional Path to Full-time Licensure

BY VANESSA ORR

For years, physicians and physician assistants (PAs) who have trained internationally or out of state have been able to work in Florida under temporary licenses in order to provide care in underserved areas. Since the Florida Legislature reconvened on Jan. 13, however, these providers may soon be able to obtain full-time licensure if they meet the proper qualifications.

On Dec. 17, Rep. Yvette Benarroch introduced HB 809: Licensure by Endorsement for Temporary Certificate Holders in Areas of Critical Need. The bill, designed to help mitigate Florida's ongoing healthcare workforce shortage, would allow those temporary license holders already working in Florida in places like county health centers, correctional facilities and the Veterans Administration to earn full-time licenses. This license would also allow them to work anywhere in the state.

There are a number of reasons why this bill is important. Florida is projected to experience one of the most severe physician shortages in the U.S., in part because of the increasing demand for medical care as Florida's population continues to age and grow. The physician workforce is also aging, leaving a shortage of providers as these doctors retire.

"We've been seeing an uptick in population since 2020-21 when COVID hit, with a lot of people coming to Florida to retire," said Kyla Murphy, AVP National Healthcare Practice, Risk Strategies. "Many of these patients have been seeing nurse practitioners as there aren't enough physicians to keep up with the growth."

Prospective medical students are also choosing to enter other fields or practice in other states as a result of higher insurance premiums, as well as a lack of residency training spots in Florida.

"Florida doesn't have as many spots as it does residents, even though Florida has many amazing medical schools," said Murphy. "When a person can't get a spot in a residency training program here, they end up moving to another state."

According to FLMedical.org, Florida currently needs almost 4,000 new physicians to meet the current need. By 2030, that number is expected to increase to 22,000 new



Kyla Murphy

practitioners needed.

In order to gain a full-time license, physicians and PAs must have been practicing in the state on a temporary license for four years immediately before applying for full-time status. They must pass a certification exam and obtain a recommendation from a medical director or supervising physician, and be in compliance with board rules and standards.

If HB 809 passes, it would go into effect on July 1, 2026. This is expected to cause some changes in the insurance industry, a number of which would benefit physicians.

"We believe that more insurers would be willing to offer coverage, and that physicians would have more policy options," said Murphy, noting that physicians with temporary licenses typically pay more due to higher risk. "There would also be less reliance on the excess and surplus market

and more access to standard carriers."

Having more full-time physicians in the state could also help reduce physician burnout, provide more job flexibility and stability, result in higher compensation and contract options, and allow physicians to work where they want.

Some drawbacks, according to critics, is that the bill may result in physicians leaving rural areas and county or correctional facilities to move to urban markets, creating more competition for already established doctors. Physicians who have taken the traditional path to full-time licensure may not approve of this nontraditional path, and from an insurance standpoint, it could increase claims frequency by having more providers in the market.

While long-term implications of the bill can't fully be predicated, Benarroch believes that it's time for physicians and PAs who have worked in underserved and high-need areas to earn full-time status.

"HB 809 creates a clear and sensible pathway for doctors who are already serving Florida patients under temporary certificates to obtain permanent licensure and continue providing essential medical care to the people of our state," she said.

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



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Planting the Seeds for Thriving Rural Health Care

Rural hospitals and communities across Florida are getting much-needed support from the federal and state governments. From the federal Rural Health Transformation Fund to the state Capital Improvement Fund and Rural Renaissance legislation, Florida's rural hospitals and communities are entering a new era of possibility.

Five rural hospitals closed in Florida over the last two decades, and three converted to providing emergency care only. And many others cut services, such as labor and delivery and other specialty care. Stemming this tide of closures and service line reductions requires sustained investment and policies that reflect rural communities' unique challenges and demographics.

With meaningful federal and state support, rural hospitals and other healthcare providers can ensure that rural Floridians can access the full range of outpatient and inpatient services close to home when they need it. In addition, robust rural healthcare infrastructure is integral to a healthy rural economy. When hospitals struggle or close entirely, jobs, tax revenue, and local spending are lost. Families move away, schools lose enrollment, churches lose parishioners, industries lose workers, and once thriving communities are diminished. Main Streets become ghost towns.

Federal and state policy developments are hoping to change that.

The federal One Big Beautiful Bill Act, enacted in July of last year, makes a once-in-a-generation investment in rural healthcare with the Rural Health Transformation Program. It appropriates \$50 billion over five years to states to invest in rural healthcare innovation and transformation. Florida received \$209 million for this year, representing the single largest federal investment in rural health care in Florida.

Florida's three primary focus areas for funding are improving access to care, strengthening the health care workforce, and advancing health care innovation. Among the state's proposals are expanding clinical training and rural rotations; providing start-up funding for rural and satellite clinics; and investing in mobile health



BY MARY C. MAYHEW

units, remote patient monitoring, behavioral health telehubs, and advanced tele-specialty services.

On the state side, the Rural Hospital Capital Improvement Program provides ongoing infrastructure support for rural hospitals. Created in 1999, the Rural Hospital Capital Improvement program's funding lapsed in 2008. In 2023, the FHA strongly advocated with the Legislature to revive

this fund. The Legislature agreed and appropriated \$10 million to the program and in 2024, made that investment recurring to support the ongoing needs of rural hospitals to modernize and invest in the latest medical equipment, needed renovations, and new facilities to effectively meet the healthcare needs of their communities.

This year, the Legislature has the opportunity to build on that investment. In January, the Senate passed Sen. Corey Simon's 2026 Rural Renaissance legislative package. The \$145 million multi-sector package would improve roads, invest in schools, and expand healthcare resources. The healthcare provisions include increasing Medicaid reimbursement for critical access hospitals to align with costs and expanding the FRAME program to include emergency medicine physicians employed by rural hospitals. It would also create the Office of Rural Prosperity at the Department of Commerce to help local governments secure state and federal grants.

Investments in our rural hospitals are investments in a healthy Florida. Taken together, these various federal and state policies and funding vehicles reflect a renewed focus on our rural communities, infrastructure, and residents. They will support increased investment in the facilities, the people, the technology, and the partnerships that enable timely, accessible preventive, primary, and specialty care; advanced life-saving trauma care; chronic care management; behavioral health care; and post-hospitalization rehabilitation. They are the seeds from which healthy rural communities will grow and flourish.

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

Expanding Care to the Underserved Goal of Camillus Health's New Administrative Medical Director

BY VANESSA ORR

In December 2025, Dr. Ana Viamonte Ros became the new administrative medical director at Camillus Health. Long associated with the private, nonprofit organization dedicated to delivering comprehensive, affordable medical, dental, behavioral health and social services to underserved people in Miami-Dade County, Dr. Ros is a strong proponent of providing care to those who are often overlooked.

"The health of any one individual impacts the health of the whole community," she explained. "We can't put our heads in the sand and think we are shielded from the needs of others."

"Every time I see these individuals, I think about what happened in their lives that led to this place," she continued. "Many are struggling with addiction, mental health issues or tremendous poverty. I don't think people who have had regular advantages in life choose to live like that. And I think that anything you can do to help your fellow man, you should."

Dr. Viamonte Ros, who comes from a family of Cuban refugees, learned strong life lessons from her parents.

"They believed in giving back as a way to express our gratitude for coming to this county and the benefits and privileges we have," said the fifth-generation physician. "There is so much need out there, yet many of us live in bubbles. We have blinders on, all of us, because we are not aware of the tremendous needs literally in our backyard. These are our neighbors."

Viamonte Ros began volunteering with the Camillus Health Initiative while in medical school, and most recently served on its board. A professor at Florida International University College of Medicine, she served as the state's first surgeon general and led the Florida Department of Health from 2007-11.

"We are incredibly excited that after many years of impactful time on the board as the vice chair and Quality Improvement Committee chair, Dr. Viamonte Ros has stepped into a management position," said Camillus Health CEO Francis Afram-Gyening. "Her strategic vision, expertise, and talent are tremendous assets for her new role."

"I was thrilled when Dr. Viamonte Ros agreed to join management," agreed Board Chair Arjun Saluja. "A person of her caliber, skill and dedication to humanity is both personally and professionally inspiring. I will miss her on the board but she is exactly where she is most needed."

In her new position, Dr. Viamonte Ros hopes to expand access to behavioral health services, noting that disproportionately, approximately 95 percent of Camillus' patients have some type of men-



Dr. Ana Viamonte Ros

tal health need

"Every community—even those with the best insurance—have trouble receiving these services," said Dr. Viamonte Ros. "Just try being seen by a psychologist or psychiatrist if the visit is not self-paid. If you call today, they'll give you an appointment in May. That's not good enough."

Dr. Viamonte Ros plans to search for alternative

funding sources, which may include partnering with other organizations in the community to strengthen their candidacy for grants. She also hopes to encourage more volunteerism among medical professionals.

"Many nonprofits, not just ours, are struggling with the elimination of grants and federal funding that they have historically depended upon," she says. "We especially depend on that as only a fraction of the patients we see have Medicaid or any type of insurance, and the vast majority are homeless."

"How do we help organizations such as ours that depend on revenue sources outside their control to provide this vital service?" she asked. "We have to uncover every stone."

Dr. Viamonte Ros is also focusing on continuing to address patients' issues with compassion and humanity, providing the same level of care as those who have the means to pay.

"People who have the privilege of having money get a certain level of care in hospitals, but the quality of care needs to be standard," she said. "Every person deserves that."

While the need can be overwhelming, Dr. Viamonte Ros believes that giving back to the community is key. It not only benefits the underserved population, but those who give of themselves as well.

"You can get discouraged, feeling like you're having so little impact when there are so many needs out there," she said. "But if you help make just one person's life better, focus on that. And then help another person after that."

In addition to volunteering internationally in Haiti, the Dominican Republic and Jamaica, Dr. Viamonte Ros also created a structural rotation for the medical students she teaches to participate in street outreach.

"It has had such an impact," she said. "Not only by helping those in need and hurting, but by empowering the students to help improve the lives of others," she said.

"I hope that my parents and grandparents are looking down at me and happy that this is what they taught me by their example in life," she added. "I am giving back. And I think they would be very pleased to see that."

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Let's Connect: ACHE of South Florida Spotlight

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ACHE of South Florida Member Spotlight: Hunter Hannan

BY LOIS THOMSON

Hunter Hannan joined ACHE – the American College of Healthcare Executives – because he thought it would be a great networking platform, a place to meet new people in the healthcare industry. Hunter found that, but he also gained so much more.

Hunter, the Director of Health System Partnerships for US Acute Care Solutions (USACS), the largest physician-owned provider of Emergency and Inpatient Medicine services in the country, said he learned about ACHE from some of the clinical leaders he worked with who highly recommended it. "They said it's a great place to meet leaders and like-minded individuals in the healthcare space." What he found in addition is that "ACHE is such an incredibly collaborative organization of individuals in healthcare – potentially from competing markets – coming together with the same issues or challenges, and being able to openly discuss the solutions they're finding."

He said the organization provides a platform for everyone to learn and to



Hunter Hannan

grow, and the networking aspect in building new connections is extremely valuable. "ACHE has opened a lot of doors for me to be introduced to individuals in healthcare that align with my organization's mission to care for patients."

US Acute Care Solutions is a physician-owned practice that provides comprehensive, integrated acute

care services to hospitals and health systems, treating more than 11 million patients annually with some of the country's leading health systems. Hunter's responsibilities involve working with the organization's clinical leadership teams to help identify opportunities both for providing support and for expanding services.

Hunter admitted that healthcare was not his first career choice out of college. After graduation from the Florida Atlantic University with a degree in Business Administration, he initially signed on with an insurance underwriting company. However, he explained, "At that time my mother got very sick with cancer. My sister had worked in

healthcare and I saw the value it provided to me and my family – it saved my mother's life. I thought being in healthcare was something I wanted to devote my professional career to."

He went on to say how much he appreciates the work of everyone in healthcare. "The work they're doing is truly saving lives, and my opportunity to be a part of that is a strong motivator for me and something I'm proud of. It's one of the more important things you can do in life, to be of service – that's truly what I feel healthcare is about."

Hunter has emphasized how ACHE has enhanced his work by connecting him with so many new individuals. "I've been able to build relationships where we come in and support, or at least have a better understanding of, the challenges they're facing. I met leaders who I now call close friends and have supported me and my organization. The ACHE has directly increased exposure of the work we're doing to improve patient care from a clinical perspective."

Having been a member of ACHE for 4 years, Hunter is serving on the board of the ACHE of South Florida chapter this year as Sponsorship Chair-Elect. Since joining, he said he has been fortunate to meet a number of board members and

see how engaged they are with the chapter, and he wanted to get more involved. In his position, Hunter said he supports the Sponsorship Chair with maintaining the chapter's sponsors, as well as generating new ones. "Serving on our chapter's board is an incredible honor and one I do not take lightly."

He pointed out that in his role of growth and development with USACS, plus the fact that USACS became a sponsor of ACHE in the past year, "I was able to see value in the sponsorship personally for me and for the organization, and I thought what better person to help grow sponsors than someone who has experience and truly understands the benefits that come with it."

Hunter said he "can't recommend enough" joining ACHE, no matter what stage of career you're in. Those just beginning their careers have the opportunity to interact with a number of healthcare leaders and grow their network while making meaningful connections. Whereas those more seasoned can collaborate with other executives who are experiencing the same challenges. That may result in opportunities to speak with others, learn how they're addressing those challenges, and obtain ideas to apply to their own work.



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Advocacy, Trust, and Prevention: A Mid-Term Reflection from the Miami-Dade County Medical

On June 14, 2025, I had the distinct honor of becoming the seventh female president of the Miami-Dade County Medical Association (MDCMA). Leading a 122-year-old organization rooted in advocacy, professionalism, and service is both humbling and inspiring. As I reflect on the first half of my term, I am proud of the progress we have made and energized by the work still ahead.



BY ADRIANA
BONANSEA-FRANCES,
MD

Medical Student Research Competition, as well as strong attendance at resident-focused educational and networking events. These initiatives are critical to cultivating future physician leaders and encouraging trainees to remain engaged in organized medicine.

Our membership growth reflects this renewed energy. Despite the many demands on physicians' time, MDCMA has experi-

enced an increase in membership, signaling a shared recognition that unity matters. Organized medicine remains one of our most powerful tools to advocate effectively and sustainably.

Supporting women physicians has also remained a priority. Through Women in Medicine programs and professional networking events, MDCMA has created spaces for mentorship, leadership development, and connection. These gatherings reinforce that community and collaboration are essential in today's healthcare environment.

My own journey with MDCMA began quietly years ago, encouraged by leaders who believed in the importance of showing up. That lesson continues to guide me. Change does not happen all at once, but through steady, collective effort. As we move into the second half of this term, I remain committed to building on this momentum, strengthening advocacy, expanding outreach, and supporting physicians at every stage of their careers.

If we take meaningful steps forward today, we leave a stronger foundation for those who lead tomorrow.

Dr. Adriana Bonansea-Frances is President of the Miami-Dade County Medical Association.

Leading with Purpose: A Year of Progress at the Broward County Medical Association

Serving as President of the Broward County Medical Association (BCMA) during the 2025-2026 year has been one of the greatest honors of my professional life.

Leading an organization with more than a century of history carries both responsibility and opportunity. This past year reaffirmed for me the extraordinary power of organized medicine, not only to unite physicians, but to elevate patient care, strengthen community partnerships, and position BCMA as a leading voice of cooperation and influence in healthcare.

From the outset, my mission as president was clear: to help BCMA shine like a shooting star, highly visible, impactful, and impossible to ignore, while putting our organization firmly on the map as a unifying force for medicine in Broward County. That mission was rooted in unity, advocacy, innovation, and fiscal stewardship.

One of our most significant milestones was achieving the highest fundraising campaign in BCMA's 100-year history, a testament to the trust, engagement, and shared purpose of our members and partners. This success enabled us to strengthen our organizational foundation, guide BCMA through a successful reorganization, and reach a new level of fiscal optimization and sustainability, ensuring the long-term health of the Association.

Community unity and engagement were central to our work. We saw tremendous growth in participation and visibility, supported by enhanced communications and active engagement through our new member newsletter. These efforts helped reconnect physicians to BCMA and to one another at a time when connection is more important than ever.

Innovation also played a critical role in our progress. BCMA expanded into AI-driven discussions, digital engagement, and podcasting, embracing new platforms to educate, inform, and amplify the physician voice. We strengthened the curriculum of our Business of Medicine educational series, equipping physicians with practical tools to navigate leadership, compliance, practice sustainability, and emerging technologies.

A hallmark achievement this year was the launch of The Future of Healthcare Roundtable, which brought together physicians, local and state policymakers,



BY KAYVAN AMINI,
DO

university leaders, executives, and community stakeholders. This initiative positioned BCMA at the forefront of shaping healthcare conversations in Broward County and reinforced our role as leaders in collaborative problem-solving.

Advocacy remained a cornerstone of our mission. BCMA hosted tremendous local gatherings of Broward's legislative delegation, led legislative forums, and advanced

meaningful advocacy efforts in Tallahassee. These engagements contributed to significant progress on critical healthcare legislation, reinforcing that physicians must have a seat at the table when decisions affecting patient care are made.

This year also brought historic recognition. For the first time, BCMA received the Excellence in Healthcare Award from the Greater Fort Lauderdale Chamber of Commerce, validating the collective impact of our members and our growing influence across the region.

Investing in the future of medicine was equally important. We proudly supported medical students and residents through the MDMCA Research Competition and established the Cynthia Peterson Legacy Fund Scholarship, a lasting initiative dedicated to supporting medical students in Broward County while honoring a legacy of mentorship, compassion, and service.

Our commitment to inclusion and wellbeing remained strong through successful Women in Medicine initiatives and professional networking events that fostered mentorship, collaboration, and community.

I am proud to say that our mission was achieved, but the work is not over. We have served as stewards of this remarkable organization, and with continued love, passion, and dedication, BCMA will keep growing on these principles. Together, we will remain the voice of our members, protect our patients and community, and deepen collaboration with all stakeholders who share our vision.

I look forward to passing these values on to future leaders, confident that BCMA will continue to shine brightly as a guiding star for organized medicine in Broward County.

Dr. Kayvan Amini is President, Broward County Medical Association.

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Medical Malpractice Reform in 2026: What Florida Providers Need to Know

As Florida enters 2026, medical malpractice reform has re-emerged as a central issue for physicians, hospital staff, and healthcare administrators statewide. While the debate often plays out in legislative chambers and appellate courts, its consequences are felt most acutely on hospital floors, in emergency departments, and across physician practices, particularly in South Florida's high-acuity care environment.

Florida's current malpractice landscape is shaped largely by judicial decisions rather than legislative caps. In *North Broward Hospital District v. Kalitan* (2017), the Florida Supreme Court invalidated statutory caps on noneconomic damages in medical negligence cases, holding that they violated equal protection principles by disproportionately burdening the most severely injured patients. As a result, Florida remains a no-cap jurisdiction for medical malpractice damages, exposing hospitals and physicians to uncapped jury verdicts.

For providers, the practical effects have been significant. According to the Florida Office of Insurance Regulation, medical malpractice claim severity, particularly in cases involving catastrophic injury or death, has increased over the past decade, even as overall claim frequency has remained relatively stable. High-risk specialties such as obstetrics, emergency medicine, surgery, and anesthesiology continue to account for a disproportionate share of large indemnity payments. This has contributed to rising insurance premiums, increased self-insurance retention levels for hospitals, and added pressure on recruitment and retention of clinical staff.

Against this backdrop, 2026 reform efforts in Florida are not focused on reinstating broad damage caps, an approach widely viewed as constitutionally untenable, but instead on procedural and structural reforms aimed at reducing unnecessary litigation and improving predictability. Legislative discussions have centered on tightening expert witness qualification standards under Chapter 766, strengthening pre-suit investigation requirements, and expanding alternative dispute resolution tools such as mandatory mediation and early neutral evaluation.

For physicians and hospital employees, these changes could

have tangible benefits. Stronger expert witness requirements may reduce claims supported by marginal or non-specialty testimony. Enhanced pre-suit screening could lead to earlier resolution of weak cases before significant defense costs accrue. Expanded mediation mechanisms may allow providers to resolve disputes faster and with less disruption to clinical operations and staff morale.

National trends are also influencing Florida's reform conversation. Policymakers are increasingly examining "safe harbor" concepts that provide liability protections when providers adhere to well-established, evidence-based clinical guidelines. While not yet codified in Florida law, these models reflect a broader shift toward aligning malpractice standards with quality-of-care metrics rather than outcomes alone.

Importantly, current statutes and case law remain fully operative. Providers must continue to comply with Florida's pre-suit notice requirements, documentation standards, and risk-management obligations. No reform under consideration eliminates the need for thorough charting, timely peer review, or early involvement of legal and risk-management teams following adverse events.

For South Florida's healthcare workforce, malpractice reform in 2026 should be viewed as an evolving risk-management tool, not a shield. Legislative changes may offer incremental relief, but sustainable protection will continue to depend on clinical excellence, communication, and proactive compliance.

As reform efforts advance, staying informed is not optional. The decisions made in Tallahassee this year will shape liability exposure, insurance markets, and care delivery for years to come, directly affecting those on the front lines of Florida healthcare.



BY TREVOR BIGLIN

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Precision, Innovation, and Compassion: Advancing Pediatric Cancer Care at Nicklaus Children's

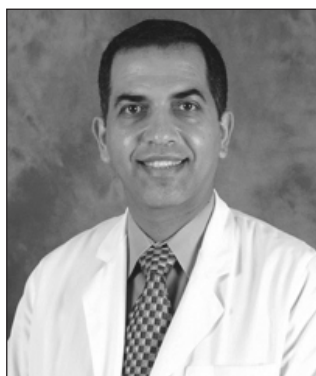
BY DANIEL CASCIATO

Pediatric oncology is undergoing a rapid transformation, driven by precision medicine, advanced technologies, and collaborative research. At the forefront of this evolution is the Nicklaus Children's Helen & Jacob Shaham Cancer & Blood Disorders Institute, where innovation is reshaping how childhood cancers are diagnosed, treated, and managed long term.

"We are proud at Nicklaus Children's Helen & Jacob Shaham Cancer & Blood Disorders Institute to be a leader in pediatric cancer care," says Matthew A. Love, president and CEO of Nicklaus Children's Health System. "Our specialists provide state-of-the-art medical and surgical care for more pediatric cancer patients than any other facility in South Florida, leading the way through investments in groundbreaking research focused on new cures, treatments and diagnostic procedures."

One of the most impactful advances currently improving outcomes is the Ex Vivo Drug Sensitivity Test, a breakthrough research tool that evaluates how a patient's tumor cells respond to a wide range of FDA-approved therapies. This approach allows oncologists to select treatments based on real-time tumor response rather than trial and error. Alongside genetic therapy, immunotherapy, molecular tumor analysis, and targeted treatments, this innovation enables truly individualized care plans.

Precision medicine plays a central role in the Institute's oncology program. "At Nicklaus Children's, our medical experts use a holistic and personalized approach to treat each patient's diagnosis," says Dr. Ziad A Khatib, medical director of the Hematology/Oncology program at Nicklaus Children's. "This includes each one of our patients undergoing genetic



Dr. Ziad A Khatib

testing of their cancer, which helps identify inherited gene mutations that could increase the risk of developing certain diseases."

In more complex or resistant cases, Ex Vivo Drug Sensitivity Testing evaluates tumor cells against more than 120 FDA-approved drugs. "Results are sent back to our oncologists with a rank of the effectiveness of each drug against the cancer," Dr. Khatib says. "The goal is to aid our doctors in finding the best available treatment quickly before having to run down a list of drugs that might not work as effectively."

This approach is backed by compelling clinical evidence. "The study's results, published April 11, 2024, in the peer-reviewed medical journal *Nature Medicine*, found that 83% of patients who received guided treatments showed improvement," Dr. Khatib notes.

Reducing the physical burden of treatment is particularly critical for pediatric patients. To that end, the Institute has adopted therapies designed to minimize long-term side effects while maintaining effectiveness.

"We offer targeted therapy and immunotherapy that's designed to attack cancer cells more selectively than conventional chemotherapy," Dr. Khatib says. "This often reduces damage to healthy tissues and leads to fewer, more tolerable side effects."

Additional protective measures include cardioprotection strategies for children receiving anthracyclines, helping shield the heart from chemotherapy-related damage.

For patients undergoing bone marrow transplants, photobiomodulation therapy is used to lessen the severity of mucositis, a painful and common side effect. "As a way to lessen the severity of this particular side-effect,



Photobiomodulation is used with bone marrow transplant patients which makes the therapy process more tolerable and less painful," Dr. Khatib explains.

Technology also continues to elevate diagnostic and surgical precision. In 2015, Nicklaus Children's Hospital became the first pediatric hospital in Florida to acquire the da Vinci® Xi™ Surgical System. Housed in the Kenneth C. Griffin Surgical Tower, the robotic platform allows surgeons to perform minimally invasive procedures with enhanced control and accuracy.

"With Intraoperative MRIs, our surgeons are able to see in real-time, high-resolution imaging that allows them to more accurately identify tumor boundaries and adjust their approach for safer, more complete removal," Dr. Khatib says. The Institute also employs magnetic resonance-guided focused ultrasound therapy, offering select patients a noninvasive option to treat brain tumors with pinpoint accuracy.

Research and collaboration remain essential to advancing pediatric oncology. "Many of our oncologists are also actively researching new and emerging treatments for different types of tumors, the underlying biology of these cancers, along with supportive care and survivor-

ship best practices," Dr. Khatib says. Through participation in national and global research networks such as the Collaborative Network for Neuro-oncology Clinical Trials (CONNECT) and the National Experimental Therapeutics Consortium (NEXT) Consortium, physicians collaborate across institutions to accelerate discovery and share promising therapies.

As survival rates improve, long-term care has become a growing priority. The Institute's Survive & Thrive survivorship program provides comprehensive follow-up for childhood cancer survivors. "Within the program, survivors meet with dedicated specialty physicians, nurse coordinators, psychologists, school coordinators, social workers and registered dietitians to ensure these children have the best quality of life as they grow into adulthood," Dr. Khatib says.

Through innovation, research, and compassionate care, Nicklaus Children's continues to redefine what is possible in pediatric cancer treatment—ensuring that children and families have access to world-class care without ever leaving South Florida.

For more information, visit nicklaushealth.org.

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

HCA Florida JFK Hospital Announces New Chief Operating Officer, Megan S. Powe

HCA Florida JFK Hospital is proud to announce the appointment of Megan S. Powe as chief operating officer. Megan brings more than a decade of diverse healthcare leadership experience, with a proven record of strengthening hospital operations, elevating performance, and advancing high quality patient care across multiple health systems. Megan most recently served as chief operating officer for Ascension Columbia St. Mary's Hospital in Milwaukee, WI. Prior to her time with Ascension, she held multiple senior leadership roles within Tenet Healthcare, including hospital COO, market chief strategy officer, and chief strategy officer. Megan holds a Master of Science in health care administration from Trinity University in San Antonio, TX, and a bachelor of science in business administration with concentrations in management and marketing from Spring Hill College in Mobile, AL.



Megan S. Powe

Mount Sinai Medical Center Elects Paul Steven Singerman as Chairman of the Executive Board of Trustees

Mount Sinai Medical Center announced the election of Paul Steven Singerman as Chairman of its Executive Board of Trustees. Singerman is a respected attorney, civic leader, and long-standing supporter of Mount Sinai. A member of Mount Sinai's Board for more than a decade, Singerman has provided strategic guidance on major initiatives that have strengthened the medical center's mission and reach. His leadership has contributed to Mount Sinai's continued advancement in clinical innovation, patient-centered care, community access, and philanthropic engagement.

Singerman is the co-founder and co-chair of Berger Singerman. Known for his integrity, insight, and deep commitment to community service, he has long been involved in philanthropic and civic initiatives throughout South Florida. His decades of engagement reflect a strong dedication to strengthening local institutions and supporting the needs of a rapidly evolving region.



Paul Steven Singerman

Cover Story: Advancing Nursing Research Through Caring Science at the Christine E. Lynn College of Nursing

Continued from page 1

methodologically rigorous and deeply grounded in human dignity, compassion, and real-world impact.

“Caring philosophy integrates the art and science of nursing,” Dr. Butcher says.

This framework encourages scholars to examine complex health challenges by considering the experiences of patients, families, and communities. “Caring science guides our Ph.D. students to ask questions that are grounded in human experience and real-world impact, not just technical skills,” Dr. Butcher explains.

Many foundational caring theories used in nursing education and research globally were developed by faculty at the college, shaping how doctoral students design studies, interpret findings, and translate research into practice.

“Caring science provides a structure for research that remains centered on compassion, mutual healing, and human dignity,” he says.

The college’s educational culture was shaped by Dr. Anne Boykin, the founding dean of the college and a nationally recognized caring science scholar. Today, resources such as the Anne Boykin Institute for the Advancement of Caring Science and the Archives for Caring continue to support doctoral education and research.

This emphasis on caring science shapes not only how students conduct research, but how they apply it beyond the academic setting.

Preparing Nurse Scientists for Real-World Impact

The Ph.D. program prepares nurse scientists, educators, and leaders who apply this philosophy across a range of settings. While many graduates pursue academic careers in research and teaching, others conduct patient-centered clinical research or work in areas such as healthcare administration, health policy, data science, biotechnology, and consulting.

“I see graduates of our Ph.D. program

as stewards of the nursing profession,” Dr. Butcher says. “The program equips them to address real-world nursing and healthcare challenges with both scientific rigor and a deep commitment to improving human well-being.”

Traditional Doctor of Nursing Practice (DNP) programs are practice-focused and designed to prepare nursing leaders who improve care delivery and health outcomes by translating existing research into practice. In contrast, a Ph.D. in Nursing prepares nurses to generate new knowledge through original research that shapes nursing practice, education, policy, and healthcare systems.

While Ph.D. programs are research-centered, their impact extends well beyond academia. Nurse researchers design and lead funded studies implemented in clinical and community settings, influencing patient care, population health, and system-level decision-making. At the same time, many DNP-prepared nurses are increasingly interested in deeper research training to contribute to generating evidence, not just its application.

As a result, there is growing interest in dual DNP/Ph.D. pathways that prepare nurses to function as both advanced practice clinicians and nurse researchers, strengthening the connection between practice and discovery.

“Within this broader landscape of doctoral nursing education, the Ph.D. program at the Christine E. Lynn College of Nursing is also distinguished by its grounding in caring science,” Dr. Butcher notes.

That philosophy is embedded throughout the curriculum.

“Our Ph.D. students complete three required caring science courses that integrate theory development, systematic inquiry, and research methods specific to advancing caring-based scholarship,” he says.

The program offers entry tracks for nurses with a Bachelor of Science in Nursing, Master of Science in Nursing, or Doctor of Nursing Practice.

Coursework is completed over two years, followed by mentored dissertation research.

“Our doctoral students are taught to analyze gaps in care, engage in interprofessional collaboration, and create innovative, evidence-based solutions that improve patient outcomes, enhance community health, and influence healthcare policy.”

Research Priorities Addressing Today’s Healthcare Challenges

Healthy aging, health equity, holistic health, and transforming healthcare environments are the four research areas the College prioritizes, because they align with faculty research expertise and the most urgent challenges facing healthcare today.

Healthy aging reflects the growing needs of the global aging population, with research focused on improving quality of life, supporting independence, and helping older adults navigate the physical, emotional, and social challenges of aging. This work is especially relevant as healthcare systems adapt to longer life expectancy and rising rates of chronic illness.

Health equity is a critical focus, particularly in South Florida’s diverse communities. Research in this area examines factors that influence health outcomes and access to care, with the goal of developing and testing interventions that improve patient outcomes across settings. Grounded in caring science, this work emphasizes ethical responsibility, community engagement, and ensuring that all individuals can achieve their highest level of health.

“Caring science is inherently holistic, meaning mind, body, emotions, spirit, and environment are viewed as an integral unity,”

Dr. Butcher says, adding that the Christine E. Lynn College of Nursing is the only nursing college in the nation with all degree programs certified in holistic nursing by the American Holistic Nursing Association.

“Our college has a long tradition of educating nurses in a holistic nursing perspective,” he adds. Research in holistic nursing is becoming increasingly important because of its emphasis on prevention and health promotion, non-invasive healing modalities, and quality of life.

Lastly, transforming healthcare environments addresses the systems in which care is delivered. Research in this area focuses on improving organizational and administrative processes, strengthening interprofessional collaboration, integrating technology, and creating healthier work environments for nurses and patients. These factors directly influence care quality, patient satisfaction, and health outcomes.

Together, these four areas reflect a comprehensive approach to nursing research that connects individual patient care with community needs and healthcare system transformation.

Advancing Nursing Through Research and Compassion

There is a growing recognition that caring science is central to nursing—and its influence continues to expand. In 2021, the American Nurses Association updated its definition of the profession to include it, reflecting a broader shift toward emphasizing the human, relational, and holistic aspects of care.

Ph.D. graduates from the Christine E. Lynn College of Nursing, trained in rigorous research methods and grounded in caring science, are uniquely positioned to translate these principles into measurable improvements in patient outcomes, develop evidence-based interventions that address complex health challenges, and inform policies and practices that shape nursing education and healthcare delivery.

Learn more and apply to the Christine E. Lynn College of Nursing Ph.D. program at fau.edu/nursing/academics/phd-program. The Fall 2026 application deadline is March 15.



Gut Insights for APPs & PCPs / 9th EndoNurse & EndoTech Course

Cleveland Clinic Florida is pleased to present the Cleveland Clinic Gut Insights for APPs & PCPs / 9th EndoNurse & EndoTech Course on April 25 at Margaritaville Hollywood Beach Resort. This one-day course is designed to deliver the latest knowledge and best practices in gastroenterology. Together, two complementary tracks provide a comprehensive, team-based educational experience that advances knowledge, skill and collaboration in digestive health. Register at www.ccfme.org/GUT2026

For more information or to register, visit www.ccfme.org/HOTC2026



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

Tampa General Hospital and Mass General Brigham Launch Joint Ambulatory Care Network on Florida's East Coast

Tampa General Hospital (TGH) and Boston-based Mass General Brigham (MGB) announced a new joint venture creating a coordinated ambulatory network serving Florida's East Coast and expanding access to high-quality outpatient services – including primary care, specialty care, advanced imaging, oncology and outpatient surgical procedures.

"As one of the state's leading academic health systems, Tampa General is committed to meeting the needs of Floridians by expanding access to world-class care," said John Couris, president and CEO of Florida Health Sciences Center | Tampa General Hospital. "With this new ambulatory network, we are building on our strong foundation in Florida to ensure patients along the East Coast have seamless access to the highest-quality outpatient services. This partnership with one of the nation's top academic health systems reflects our vision to lead in delivering innovative, patient-centered care across the state, while strengthening the health of our communities today and for generations to come."

The new joint venture begins with a new radiation oncology center, scheduled to open later this year in Palm Beach Gardens, offering a new option for world-class cancer care to Floridians throughout Palm Beach County. In addition, TGH and MGB will work to expand the Tampa General Physicians Network, currently spanning 20 locations, including providing advanced training initiatives and collaborative clinical research opportunities.SFHN02.26



Jupiter Medical Center and Hospital for Special Surgery Join Forces to Advance Orthopedic Care in South Florida

Jupiter Medical Center (JMC) and Hospital for Special Surgery (HSS) are teaming up to expand access to the highest quality musculoskeletal care in South Florida.

"Jupiter Medical Center and HSS share a commitment to excellence in patient care," said Amit Rastogi, M.D., MHCM, President and CEO of Jupiter Medical Center. "This relationship ensures that people in our community have direct access to the same orthopedic expertise trusted by patients of all kinds worldwide, including professional athletes."

Patients will benefit from a full spectrum of expertise in joint replacement, sports medicine, spine surgery, and rehabilitation. HSS physicians will perform surgeries at Jupiter Medical Center's new Johnny and Terry Gray Surgical Institute. The hospital is also nearing completion of a new five-story Patient Care Tower, featuring dedicated facilities for state-of-the-art orthopedic care and rehabilitation.

"This collaboration reflects a unique depth of shared responsibility and opportunity to increase access to the world's highest quality orthopedic care in Palm Beach County," said HSS President and CEO and Surgeon-in-Chief Emeritus Bryan T. Kelly, M.D., MBA. For nearly half a century, Jupiter Medical Center has earned the trust of the community one patient at a time; HSS brings more than 163 years of unparalleled specialization in advancing care that is foundational to quality of life. Jupiter Medical Center's continued investment in innovation and technology aligns seamlessly with our mission to provide the best orthopedic care available anywhere."



(l-r) Dr. Bryan T. Kelly and Dr. Amit Rastogi
Photo Credit: Lila Photo



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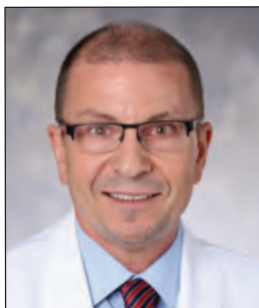
A New Era for Cardio-Oncology

BY JENNIFER WILLIAMSON

As the fight against cancer advances, so too does the understanding that safeguarding heart health is a crucial piece of the puzzle – ushering in the rise of cardio-oncology as an essential medical discipline.

The first cardio-oncology program was established in the United States 25 years ago, and in 2015 the American College of Cardiology (ACC) debuted a Cardio-Oncology Intensive Session at its annual conference. Today the ACC, the American Heart Association, and the European Society of Cardiology (ESC) have dedicated working groups focused on cardio-oncology, while the International Cardio-Oncology Society (IC-OS) boasts 1,100 members from more than 30 countries.

"Tremendous effort has been made in advancing the field of cardio-oncology, which has seen rapid growth here in the U.S. and abroad," reports Diego Sadler, M.D., Section Head of Cardio-Oncology at Cleveland Clinic in Florida. "We've learned a lot about how to prevent, detect and treat cancer treatment related cardiovascular disease, but there is still so much more we don't know and even more that we need to do to improve patient outcomes worldwide."



Dr. Diego Sadler

A bidirectional relationship

Dr. Sadler notes that cardio-oncology today is much more than just treating toxicities. "There is a commonality between cancer and cardiovascular disease, including common risk factors and a bidirectionality between these two worldwide leading causes of mortality," he says.

According to the National Cancer Institute, the number of U.S. cancer survivors is projected to reach 26 million by 2040. Studies indicate that patients with cancer face a 2- to 6-times higher risk of cardiovascular disease mortality compared to the general population.

"Likewise, there is growing evidence that patients with cardiovascular disease, such as heart failure and coronary artery disease, have cancer more frequently than the general population," explains Dr. Sadler. "We need to better understand this relationship."

Establishing quality metrics

One of the initiatives essential to the future of cardio-oncology, notes Dr. Sadler, is defining and measuring quality metrics within the field to improve patient

outcomes and reduce variations in clinical practice. He is part of an international team of specialists from the IC-OS and ACC Cardio-Oncology Section Leadership Council who joined forces to propose a roadmap for establishing quality metrics specific to cardio-oncology.

Published earlier this year in the *JACC: CardioOncology*, the document acts as a guide for future progress. It draws on both the Institute of Medicine (IOM) framework for evaluating healthcare quality and the Donabedian model. The IOM identifies domains critical to health care quality: safety, timeliness, effectiveness, efficiency and patient-centeredness. While the Donabedian model designates quality metrics as either structural, process or outcome focused.

"The subspecialty of heart failure serves as a strong example of how performance and quality metrics can drive improvements in patient outcomes," says Dr. Sadler. "By systematically analyzing cardio-oncology quality metrics, we aim to refine clinical guidelines and ultimately enhance patient care."

Global registry pilot phase

Dr. Sadler points to the important role the Global Cardio-Oncology Registry (G-COR) will have in helping establish the incidence of CTR-CVT, identify risk factors, and lead to the development of val-

idated risk score models to guide treatment decisions in different geographic locations throughout the world.

The G-COR is a multinational, multi-center prospective observational cohort registry launched in March 2023. The registry has enrolled 700 breast cancer patients across 19 U.S. academic and community hospitals during its pilot phase.

"Cleveland Clinic Weston Hospital was the lead enrollment site for the breast cancer pilot and enrolled 120 patients," says Dr. Sadler. He serves as principal investigator of the G-COR and is based at Weston Hospital, which was recently recertified as a Gold Center of Excellence by the IC-OS (2025-2028). It is the only center in South Florida and one of just three in the state to achieve this distinction.

Once fully activated, the G-COR will include 119 medical centers from 21 countries across five continents. These sites will enroll approximately 5,000 patients worldwide within three distinct patient populations: individuals with breast cancer, hematological malignancies, and those treated with check point inhibitors immunotherapy.

"The research supported by this registry has the potential to shape cardio-oncology treatment strategies that could benefit countless patients," observes Dr. Sadler.



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Tampa General Leads in AI Technology Development and Implementation

Artificial intelligence (AI) continues to play a significant role in health care. But a very human element, the voice, has been central to the groundbreaking AI technologies Tampa General Hospital is helping to develop with key partners.

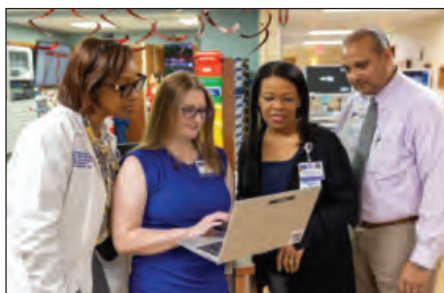
Voice biomarkers diagnose illness, predict decline

Advanced heart failure cardiologist Dr. Debbie Rinde-Hoffman is vice chief of business development and physician networks at the TGH Heart & Vascular Institute. When she learned of a company launching an international study for an app to analyze patients' voices to predict worsening congestive heart failure, she knew Tampa General needed to be a part of it. The app, named HearO, is a proprietary voice analysis technology developed by Cordio, a company based near Tel Aviv, Israel.

"About six million people live with congestive heart failure in the United States," said Dr. Rinde-Hoffman. "Not only is it costly to the system when patients require hospitalizations, but it also increases the morbidity and mortality associated with the disease process."

When the heart cannot pump as it is supposed to — for reasons that can include coronary artery disease, high blood pressure and valvular disease — fluid builds up in the lungs.

To predict worsening heart failure, a patient speaks five sentences into HearO each morning to detect voice changes



Tampa General is a beta site that is helping Microsoft develop ambient-listening technology for nurses. It allows head-to-toe assessments to be spoken aloud and recorded into a patient's medical chart in real time.

caused by increased fluid. The app then notifies medical professionals. These changes typically begin two to four weeks prior to the appearance of clinical symptoms. If it proves to be effective, "the physicians can change medications proactively before the patient gets worse," Dr. Rinde-Hoffman said.

Tampa General participated in the HearO study in 2025. Cordio's next step is analysis, with a goal of making the app available for patients to download to their smartphones.

Dr. Rinde-Hoffman said HearO could prove to be a huge benefit over the current process for managing congestive heart failure, which requires implanting a monitor into the patient's pulmonary artery to track pulmonary pressures.

With the app, patients "don't have to have anything implanted," Dr. Rinde-

Hoffman said. "This is an easier, less expensive way to be able to prevent readmitting patients with heart failure and improves their quality of life."

Ambient listening: An improved focus on patients

In addition to serving as a test site for HearO, Tampa General is one of eight beta sites nationwide to help develop Microsoft's ambient-listening technology for nurses.

According to Amit Patel, chief nursing informatics officer and senior director of informatics at Tampa General, Dragon Copilot for nursing is being used first on a neuroscience medical-surgical floor during nurses' head-to-toe patient assessments, and by patient care technicians. The program is similar to, but more complex than, DAX Copilot, which transcribes physicians' patient notes. Tampa General launched DAX Copilot for use in physician offices both in Tampa and in those serving patients in Palm Beach and Martin counties in 2024.

Instead of manually entering data into the hospital's Epic electronic medical record system at the nurses' station or at a mobile computer, the nurse or tech simply opens the app on their company-issued iPhone, pulls up the patient's record and clicks to begin audio recording.

Wendi Goodson-Celerin, executive vice president and chief nursing executive at Tampa General, relayed how nurses speak their assessments while interacting with

patients. However, if the assessment includes sensitive information and the patient is in a semiprivate room, the nurse completes the dictation in a private setting. Patel said the most difficult transition for nurses is adapting to expressing their assessments aloud. The benefits include having more natural conversations with patients and being more attentive to their needs. Patients are asked if they consent to the recording at each shift change, and there has been wide acceptance. "They like it because the nurses and patient care technicians are spending more time with them and being more attentive to their needs," according to Patel.

Tampa General is expanding Dragon Copilot for nursing to other floors in phases, with the goal of providing it to respiratory therapists, physical therapists, case managers and more.

Patel's team meets weekly with Microsoft developers to provide feedback on the electronic medical record app. "Microsoft has been wonderful about listening to the team about little tweaks they can make and adjusting in real time," Goodson-Celerin said.

Patel sees a future where the technology doesn't just listen but provides helpful feedback. For example, if the AI agent hears a discussion about medications, it could remind the nurse to consider delaying meds for the patient's upcoming procedure or flagging possible side effects.

For more information, visit [TGH.org](https://www.tgh.org).



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Jackson Heart Institute Offers Surgical Cure for Patients with Rare Blood Clotting Condition

BY RUELLE CHAMPION

Jackson Heart Institute, led by Jackson Health System's Chief of Cardiac Surgery Dr. Hari Mallidi, is now offering a specialized surgical procedure for patients with chronic thromboembolic pulmonary hypertension (CTEPH). CTEPH is a rare condition caused by blood clots in the lungs, known as pulmonary emboli.

"In 3 to 5 percent of cases of acute pulmonary embolism, the condition progresses to a chronic problem," said Dr. Priyanka Gosain, medical director of heart failure at Jackson Heart Institute. "The blood clots become part of the blood vessel, causing pressure in the lungs to rise and placing strain on the right side of the heart. Over time, this can cause heart failure."

Challenges diagnosing CTEPH

While most acute pulmonary embolisms dissolve with blood thinners, some patients progress to CTEPH months or even years later.

Symptoms include leg swelling, worsening fatigue, and shortness of breath with little activity. According to Dr. Gosain, many patients don't know it's required to follow up with their doctors after an acute pulmonary embolism, and even fewer know that surgery can be a potential cure.

Some develop CTEPH without ever being diagnosed with an acute pulmonary embolism. "These patients are gradually



Dr. Hari Mallidi



Dr. Priyanka Gosain

having more shortness of breath," Dr. Mallidi said. "Their doctors may struggle to figure out why."

Other patients at risk include those with pacemakers, defibrillators, or catheters, which can form small clots that travel to the lungs. "Recognizing the condition, correctly diagnosing, and understanding that surgery is the gold standard treatment are some of the biggest challenges," Dr. Gosain added. Symptoms can also mirror other lung diseases or the effects of aging.

Identifying patients for surgery

Once CTEPH is suspected, patients are placed on or restart blood thinners. Doctors evaluate lung pressure and heart function.

"This is the only type of pulmonary hypertension with a potential curative treatment," Dr. Gosain said.

Diagnosis is confirmed through

advanced imaging and heart pressure measurements. Doctors evaluate whether the patient is a candidate for pulmonary thromboendarterectomy (PTE), the surgical cure for CTEPH.

"We only offer surgery when we're confident the benefits outweigh the risks," Dr. Gosain said. "That confidence comes from a comprehensive, team-based approach."

What the surgery involves

PTE is a major open-heart surgery where surgeons remove the hardened, scar-like lining formed by chronic blood clots.

"It's essentially removing an inner lining that has thickened over time," Dr. Mallidi explained. "Once it's gone and the underlying issues are treated, there's a chance the disease never returns."

The surgery involves cooling the body to protect other organs, and opening the lungs to remove the clots. This restores blood flow to the lungs and relieves pressure on the heart.

"With the right expertise and support systems in place, we can deliver excellent outcomes," Dr. Mallidi said.

Comprehensive heart care at Jackson Heart Institute

Jackson Heart Institute's multidisciplinary team provides comprehensive care for CTEPH patients who may need support before or after surgery.

"Performing this operation without access to advanced mechanical support is like walking a tightrope without a safety net," Dr. Mallidi said.

If needed, patients have access to extracorporeal membrane oxygenation (ECMO), a specialized life support treatment that acts as an artificial heart and lungs, or even a heart or heart-lung transplant through Jackson Heart Institute's partnership with Miami Transplant Institute — a collaboration between Jackson Health System and UHealth University of Miami Health System.

"We're the only hospital in the region that can offer everything a patient might need in one location," Dr. Mallidi said.

PTE surgery can greatly improve a patient's quality of life. Breathing is easier, exercise is less tiring, and there's less strain on the heart.

"The surgery doesn't just help patients feel better," Dr. Mallidi said. "It helps them live longer."

With this specialized surgical option now available at Jackson Heart Institute, patients in South Florida no longer need to travel for care. The PTE surgery brings hope and a clear path to recovery for those with a rare, but curable, condition.

For more information or to make an appointment, visit MiamiHeartLeader.org or call (305) 585-4564.

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Cardiology

Jupiter Medical Center at the Forefront of Innovation: Robotic-Assisted Cardiac Surgery

Patients with a wide range of heart disease diagnoses and symptoms are experiencing less-invasive surgeries, faster recoveries and a quicker return to normal activities, thanks to the growth of robotic-assisted cardiac surgery technologies and expertise at Jupiter Medical Center.

Jupiter's expert team of highly trained surgical specialists perform complex, minimally invasive procedures that help return patients to their feet quickly without the need to undergo open-heart surgery.

Instead of spending weeks and months in recovery and rehab from conventional, open-incision heart procedures, patients who undergo robotic-assisted heart surgery are experiencing quicker symptom relief and are returning to everyday activities in a matter of days or weeks, not months, says Jupiter Medical Center specialists.

Instead of traveling long distances, cardiac patients from Palm Beach and the Treasure Coast can find state-of-the-art care close to home at nearby Jupiter Medical Center.



Dr. Vivek Patel

Benefits of robotic-assisted surgery

These capabilities are supported by evolving technologies in the operating suite, including robotic surgical systems that allow surgeons to thread tiny, surgical-camera instruments via small robotic arms inside the body — without the need to open the patient's chest to see, access and treat the heart, cardiac tissue or

blood vessels. The robotic arms translate the surgeon's hand, wrist and finger movements into precise, real-time surgical actions as they treat and repair an ailing heart.

These activities are supported by three-dimensional, high-definition imaging that gives surgeons precise views of robotic instruments and their movements and actions in real time. The benefits: greater surgical precision, smaller incisions, less blood loss, fewer complications, shorter hospital stays and a quicker return to normal activities.

Robotic technology addresses key heart diagnoses

Robotic-assisted surgical technology can treat a growing list of heart ailments,

including:

- Repair or replacement of the tricuspid valve, which controls blood flow between the right atrium and right ventricle
- Repair of holes in the heart
- Closure of the left atrial appendage, a procedure that keeps blood clots from leaving the heart and causing strokes
- Removal of benign tumors from the heart
- Repair of congenital damage to the heart
- Perform atrial fibrillation ablation procedures to control valves that flutter uncontrollably
- Bypass blocked arteries with the robotic-assisted minimally invasive coronary bypass (RA-MIDCAB) procedure, which treats blockages inside the heart via a small three-inch chest incision instead of a procedure that separates the breastbone for open-chest access to the heart and placement of coronary artery bypass grafts. "This is a pivotal moment not just for Jupiter Medical Center but for the field of cardiac surgery," says Vivek Patel, M.D., FACS, a board-certified and fellowship-trained cardiovascular and thoracic surgeon. "RA-MIDCAB offers a safer, more efficient alternative to traditional methods, and we're thrilled to bring this robotic technology to our community." Dr. Patel performed Jupiter's first such procedure in

late 2024.

- Heart failure, via the Barostim™ procedure in which surgeons rely on robotic arms to implant a small device onto a patient's carotid artery in the neck; the Barostim device overrides the body's underperforming anatomical signals by emitting electrical impulses which tell the brain that blood volume and blood pressure are normal, allowing blood to flow freely. "The Barostim device basically tricks your body into thinking that the arteries are not so tight," adds Dr. Patel. "Its presence loosens the arteries in the body, allows blood to flow more freely and eases patients' symptoms."

Jupiter Medical Center's robotic heart surgeries are performed in the Johnny & Terry Gray Surgical Institute, which features sophisticated diagnostics, leading-edge robotic technologies, and state-of-the-art imaging capabilities.

The Institute's hybrid operating rooms unite the surgical suite and cardiac catheterization technology, enabling surgeons and interventional cardiologists to perform multiple procedures in one setting and treat more than one type of heart problem at the same time.

For information about robotic-assisted cardiac surgery at Jupiter Medical Center, visit jupitermed.com/heart.



Dr. David Kalfa

Dr. Shyam Sathanandam

The Future of Heart Care is Here



The Nicklaus Children's 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 South 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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How a Cup of Coffee Saved a Life

I joined Holy Cross Health last year as a cardiologist from the Cardiovascular Institute of San Diego. As my husband I settled into our new neighborhood, we discovered Dammiano's, a quaint, local coffee shop on Las Olas Boulevard in Fort Lauderdale and began chatting with a couple who works there.

One day, the husband of the couple and employee at Dammiano's, Jeff Kimmel, shared that he and his wife would be leaving in five days for a trip to Ecuador to celebrate his mother-in-law's 90th birthday. Because of Jeff's cardiac history — he had a heart attack, triple bypass and pacemaker — his wife expressed concern that the high elevation in Cuenca, Ecuador could trigger a cardiac incident.

I squeezed him in for an appointment right away and performed an EKG, which showed normal results. However, his blood pressure was extremely high, and his pacemaker battery was 13 years old. We tested it and determined it needed a new battery, which was handled by my wonderful colleague, clinical cardiac electrophysiologist Alexandra M. Sanchez, M.D. His medication also needed to be



BY NADIA ISABEL ABELHAD, MD, FACC

adjusted. Unfortunately, this meant it was not safe for him to travel.

"I was so pleased with how friendly and professional everyone was at Dr. Abelhad's office. They made me feel important," Jeff said. "I like to reference the Yiddish word 'bashert,' which means destiny. I believe it was destiny that led me to that conversation with Dr. Abelhad in the coffee shop that ultimately saved my life."

This is just one of many patient stories that have touched my heart over the years and make this profession so fulfilling. Although I was the one who initiated care for Jeff, we relied on the involvement of other team members every step of the way.

Holy Cross Health provides the highest quality, robust cardiac care in one place. We have an extensive complement of services ranging from general and interventional cardiology to cardiovascular and cardiothoracic procedures and surgeries to a structural heart program. Our interdisciplinary team works in tandem to provide every patient with kind, compassionate care personalized to their needs.

I came on board at a pivotal moment for

Holy Cross Medical Group as they elevated their cardiothoracic surgery program with the addition of two internationally recognized cardiothoracic surgeons, Kushagra Katariya, M.D., FACS, who was named medical director and chief of cardiothoracic surgery, and Marc Gibber, M.D., who has assumed the role of surgical director of the intensive care unit.

Holy Cross Health also wears the Arrhythmia Center of Excellence designation as a badge of honor. Here we perform advanced mapping and ablation techniques including atrial fibrillation pulse field ablation, ventricular tachycardia ablation, pacemakers and implantable cardioverter-defibrillator, lead extractions and Watchman. The Arrhythmia Center's nurse navigator holds the hands of patients, their families and caregivers through the entire process of their healthcare journey and continues checking on them for the remainder of their lives.

Certified in advanced heart failure, CardioMEMS and Barostim implantable device, Holy Cross Health is focused on extending lives. We have been named among U.S. News & World Report's 2025-2026 Best Hospitals edition as a High Performing Hospital for pacemaker implantation and received the American Heart Association's (AHA) Commitment to Quality Award for achieving high per-

formance across three or more clinical areas in the Get With The Guidelines® program.

It's our hope that the procedures we perform have long-lasting results for many happy tomorrows. I continue to monitor Jeff's pacemaker and blood pressure on a regular basis. Hopefully, he and his wife can reschedule their trip to Ecuador soon for a belated celebration.

Since it's American Heart Month, I also want to use this opportunity to remind everyone that cardiac care is not only in the hands of health care professionals. Heart health is up to every individual's lifestyle choices. Proper nutrition, consistent exercise, stress management and quality sleep will go a long way.

On February 6, the AHA encourages everyone to wear a red outfit to draw special attention to women's cardiovascular health. According to the organization, cardiovascular disease is the number one cause of death for women. To combat this statistic, my colleagues and I at the Dorothy Mangurian Comprehensive Women's Center at Holy Cross HealthPlex offer a one-stop-shop for women's health care, including treating cardiovascular disease.

Dr. Nadia Isabel Abelhad is a cardiologist with Holy Cross Medical Group.

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Cardiology

From Reactive to Proactive: The New Model of Heart Disease Prevention

Heart disease remains the leading cause of death in the United States, but the way cardiologists approach prevention is rapidly evolving. Rather than waiting for symptoms to appear, today's cardiovascular care focuses on identifying risks earlier and intervening before serious events occur. At Mount Sinai Medical Center, our cardiology team sees every day how earlier detection and more personalized prevention strategies can change the trajectory of a patient's long-term heart health.

Advances in cardiac imaging have played a major role in this shift. Technologies such as coronary calcium scoring, cardiac CT, and advanced echocardiography allow physicians to detect early signs of disease, even in patients who feel healthy. These tools provide detailed information about plaque buildup, heart structure, and blood flow, enabling more precise risk assessment than traditional screening methods alone.

Prevention is also becoming more personalized. Cardiologists now evaluate a combination of factors, including genetics, metabolic health, family history, and lifestyle, to tailor treatment plans to each patient. This individualized approach helps determine who may benefit from earlier medication, lifestyle interventions, or closer monitoring, rather than applying the same thresholds to all patients.

Another important development is the integration of multi-disciplinary care. Cardiologists increasingly work alongside imaging specialists, vascular physicians, primary care providers, and rehabilitation teams to manage cardiovascular



BY DR. NIRAT
BEOHAR

health comprehensively. This team-based model improves communication, reduces delays in care, and supports long-term disease management.

These strategies are particularly important in regions like South Florida, where aging populations and high rates of diabetes, hypertension, and obesity increase cardiovascular risk. Earlier detection and coordinated prevention efforts can significantly reduce hospitalizations and improve long-term outcomes.

Looking ahead, artificial intelligence and predictive analytics are expected to further enhance cardiovascular risk modeling, helping clinicians identify subtle patterns that may signal future disease. As technology continues to advance, prevention will become even more proactive and

precise.

Ultimately, the future of heart health is not only about treating disease, but about preventing it whenever possible. By identifying risk earlier and personalizing care, cardiology is shifting from reactive treatment to proactive protection of long-term cardiovascular health.

For more information about Mount Sinai Medical Center's cardiovascular program, visit msmc.com/cardiovascular-care.

Dr. Nirat Beohar is Director, Cardiac Catheterization Laboratory and Director, Interventional Cardiology Fellowship Program at Mount Sinai Medical Center.

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Our experts use advanced, surgical techniques and the latest technology to treat the most complex cardiovascular conditions.

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Cardiology

Cover Story: KIDZ' Pediatric Cardiologists Improving Outcomes for Children

Continued from page 1

ly, according to Dr. Zeidenweber.

"A child may be born blue because of low oxygen saturation, find it hard to breathe or sweat a lot, or get really tired when feeding," he explained. "They may not gain weight because the heart is underdeveloped."

"Nowadays, a lot of heart problems are diagnosed while the baby is still in the womb," he added. "We've gotten so good at diagnosing patients early that by the time a baby is born, we already have a plan in place."

Dr. Zeidenweber is board-certified in pediatrics and pediatric cardiology. He specializes in treating patients from the fetal stage through adulthood with congenital heart disease.

Dr. Zeidenweber received his medical degree from the Universidad Anahuac in Mexico City, Mexico, and performed his residency training in pediatrics at Miami Children's Hospital. He completed a pediatric cardiology fellowship at Emory University in Atlanta and an interventional fellowship at Denver Children's Hospital in Colorado.

Treating Young Hearts

According to Dr. Zeidenweber, pediatric cardiology patients have a range of treatments available to help them get better.

"This can range from open heart surgery for more complicated patients to catheter-based therapy, which has significantly advanced over the years," he explained. "You can help children a lot without stopping the heart; you can do most everything you need to do using a catheter through the leg, which is less invasive and results in fewer complications for patients."

Medication is also an option, and in some cases, physicians just follow the patients in hopes that the defect will heal on its own. Each patient is studied individually to determine the best course of therapy.

"When a baby's heart doesn't form correctly, there can be multifactorial reasons,"

said Dr. Zeidenweber. "It can be genetic in children with Down syndrome or Turner syndrome, but also happen spontaneously. It is not uncommon to see a mother who has had five normal pregnancies give birth to a child with a significant heart issue."

Dr. Zeidenweber says he appreciates working for KIDZ Medical Services because it provides strong support in caring for these patients.

"The company was initially a neonatology-based group that has expanded over the years to include multiple specialties," he explained. "I believe that neonatology and cardiology are intertwined and work very well together, which has improved outcomes for these patients."

He notes that very few centers perform open-heart surgery, and many babies born with heart problems need emergent care.

"In some cases, hospitals don't know what to do with children born with heart problems; KIDZ has such a high outreach that our pediatric cardiologists are able to pick up these heart problems in remote places where they might not otherwise be diagnosed. This has improved survival significantly for South Florida children," said Dr. Zeidenweber.

Because patients who have had heart surgery may face future complications, their progress is followed as they age, allowing Dr. Zeidenweber to watch his patients thrive.

"I like this field because it's very exciting; it's constantly changing, and I'm always learning," he said. "And when you can help a child born with a heart problem and relieve their parents' anxiety, that is very, very rewarding."

"It creates a special bond," he added. "Because we provide lifelong care, it gives us the opportunity to see kids who are born with significant heart problems grow up; they become a little bit like your own children. I have babies that were diagnosed with problems in utero that are now age 13; I get to see them growing and thriving, and that gives special meaning to practicing in this field."

Holy Cross Health Takes Cardiothoracic Surgery to a New Level

As Holy Cross Health celebrates 70 years of serving the healthcare needs of the community, the hospital has elevated its cardiothoracic surgery program to the highest level with the addition of two internationally recognized cardiothoracic surgeons. Leading the cardiothoracic surgery team is Kushagra Katariya, M.D., FACS who was named medical director and chief of cardiothoracic surgery, and Marc Gibber, M.D., who has assumed the role of surgical director of the intensive care unit.

Most recently, Dr. Katariya was with Tenet Healthcare's Palm Beach Health Network Physicians Group at Delray Medical Center in Delray Beach, FL. A milestone career accomplishment was returning to his home country of India where he started and led a group of hospitals performing larger numbers of cardiac surgeries than most hospitals in the United States. Previously the Medical Director and Chief of Cardiothoracic Surgery at Baptist Health Bethesda Hospital in Palm Beach County, Dr. Gibber is thrilled to work alongside Dr. Katariya to elevate Holy Cross Health's cardiothoracic surgery program.



**Dr. Kushagra
Katariya**



Dr. Marc Gibber



Cover Story: Baptist Health Miami Cardiac & Vascular Institute Sets New Benchmark

Continued from page 1

surgery, only months after the program began in January 2025.

Also, within this short amount of time, Baptist Health is now a dedicated training center for surgeons around the country wanting to learn robotic surgery. The rapid achievement positions Baptist Health as Florida's highest-volume center for robotic cardiac surgery and one of the fastest-growing programs of its kind in the United States. It also signals a significant shift in how complex heart procedures are being performed, with minimally invasive, robot-assisted techniques moving from the margins toward the mainstream.

Dr. Hashimoto was recruited from Japan to establish and direct the program at Baptist Health Miami Cardiac & Vascular Institute and FIU Herbert Wertheim College of Medicine. His arrival brings decades of global expertise to South Florida and accelerates the region's adoption of advanced surgical technologies.

"Robotic heart surgery is very attractive as a surgical approach," Dr. Hashimoto says. "Even the word 'robot' sounds like the future. But it has not yet been widely adopted worldwide. Less than one percent of heart surgeries globally are performed robotically. Despite that, there is clear demand here in Miami, from patients and from cardiologists, which is why we were able to grow at this pace in our first year."

Demand, Precision and a Team-Based Model

The milestone reflects not only patient demand, but also a highly coordinated, multidisciplinary effort behind the scenes. According to Dr. Nguyen, the program's success is rooted in preparation, institutional support and teamwork.

"This milestone says a lot," Dr. Nguyen says. "First, it reflects how quickly the team comes together and works almost seamlessly. Like a dance, every movement is choreographed. Everyone knows the next step with minimal communication. It's actually beautiful to watch."

Dr. Nguyen notes that while robotic

heart surgery remains technically demanding and requires extensive additional training beyond traditional cardiac surgery, interest is accelerating nationwide. Data from the Society of Thoracic Surgeons show robotic cardiac surgery as one of the fastest-growing procedural categories in the field, even though overall adoption remains relatively low.

"If you build it, they will come," Dr. Nguyen says. "Patients want minimally invasive surgery, and they want robotic surgery. The challenge is that not many surgeons are trained to do it."

Tangible Benefits for Patients

Robotic cardiac surgery offers several well-documented advantages over conventional open-heart procedures, including smaller incisions, less pain, reduced blood loss and significantly shorter hospital stays. Patients typically stay two to three days compared to five to eight days for traditional surgery.

Dr. Hashimoto points to both clinical outcomes and patient recovery as key differentiators.

"In my experience, approximately 80 percent of patients are able to return to their normal daily lives within two to three weeks," he says. "With standard open surgery, recovery often takes six to eight weeks. That difference is very meaningful."

Beyond recovery time, Dr. Hashimoto emphasizes surgical precision as one of the greatest advantages of robotic systems.

"With robotic surgery, I can perform extremely precise work, more precise than with my own hands alone," he says.

Dr. Nguyen adds that the recovery experience has been transformative.

"Some patients are walking around the ICU just a few hours after surgery," he says. "That's unheard of. They're often discharged within two or three days."

He also highlights the psychological impact of minimally invasive approaches.

"A large chest scar carries emotional weight," Dr. Nguyen says. "Patients see it every day and are reminded they had open-heart surgery. With robotic surgery,

the incisions are barely visible. Patients look and feel more like themselves."

Outcomes, Cost, Societal Impact

Clinical data continue to support robotic approaches. Dr. Nguyen references research involving more than 8,000 patients showing shorter ICU stays, lower readmission rates and higher rates of successful valve repair among robotic surgery patients.

While robotic systems involve higher upfront operating room costs, overall expenses are often lower due to reduced length of stay.

"You catch up quickly on cost when patients go home sooner," Dr. Nguyen says. "Each hospital day is expensive."

He also points to a broader economic benefit. "When patients return to work in weeks instead of months, that has real societal value," he says.

Building a Program at Record Speed

Launching a program of this scale typically takes years. Both physicians credit Baptist Health's culture of innovation and disciplined implementation for the accelerated timeline.

"Robotic heart surgery is fundamentally a team effort," Dr. Hashimoto says. "We focused on keeping everything as simple and consistent as possible so the team could perform at the highest level."

Before the first case, Dr. Hashimoto met extensively with operating room staff, walking through every step in detail. Early cases were performed with the same core team to ensure consistency and confidence.

Dr. Nguyen adds that education and awareness were also key challenges. "Some surgeons still see robotic surgery as futuristic or unproven," he says. "But once you see the outcomes, it's hard to imagine doing some procedures any other way."

Looking Ahead: Growth, Training, and Innovation

With the first 100 cases complete, the focus now shifts to scaling access, expanding procedure types and building the next generation of robotic cardiac surgeons.

The program plans to train additional surgeons, deepen its partnership with FIU, host national and international visitors and serve as a teaching hub for robotic and minimally invasive cardiac surgery. Future ambitions also include pediatric applications, advanced robotic platforms and the eventual integration of artificial intelligence and telesurgery.

"This is just the beginning," Dr. Nguyen says. "Our goal is not just to build a program—but to redefine what's possible in cardiac surgery."

For more information, visit [.baptisthealth.net/services/heart-and-vascular-care](https://www.baptisthealth.net/services/heart-and-vascular-care).

Sarasota Memorial Joins Clinical Trial for Patients with Aortic Valve Disease

Calcification of the aortic valve is the leading cause of heart valve disease in older adults, and currently, there are no approved medications to slow its progression. Sarasota Memorial's Kolschowsky Research and Education Institute is working to change that. The new KATALYST-AV trial, sponsored by Kardigan, Inc aims to evaluate whether the investigational medication ataciguat can slow the buildup of calcium in the aortic valve in adults with moderate calcific aortic valve stenosis (CAVS). Led locally by interventional cardiologist Ricardo Yaryura, M.D., the study will also assess the safety, tolerability and metabolism of the medication—how it is processed in the body. The phase 3 clinical study will enroll an estimated 1,400 patients across approximately 100 sites worldwide. If proven safe and effective, Ataciguat could become the first pharmacologic therapy to slow the progression of aortic valve calcium deposition in adults with CAVS. To be eligible, participants must be 50 years or older, have a confirmed diagnosis of moderate calcific aortic valve stenosis, and must not have had any prior aortic valve replacement, repair, or other intervention.



Dr. Ricardo Yaryura

To find out if you are eligible to participate in the study, call (941) 917-2225 or researchinstitute@smh.com. For information about the national trial, visit <https://clinicaltrials.gov/study/NCT07001800>.

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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.

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A Physician's Perspective on Recent Renal Denervation Cases: What I'm Seeing in the Treatment of Hypertension

As a physician who treats hypertension daily, I'm constantly reminded that high blood pressure isn't a single disease with a single solution. It is a chronic, multifaceted condition that affects millions of people and remains one of the leading contributors to heart attack, stroke and kidney disease. Among those affected is a group of patients who, despite adhering to traditionally effective medications and well-established lifestyle recommendations, continue to experience blood pressure that is difficult to control and/or challenging to manage long term.

Over the past several months, I have performed several renal denervation procedures using the Symplicity platform, and these recent cases have reinforced important lessons about the evolving landscape of hypertension treatment.

Each patient I treated shared a familiar story. They had been living with hypertension for years, had tried multiple medications, often in combination, with many experiencing side effects that made adherence a challenge. Some saw temporary improvements only to have their blood pressure rise again over time.

Identifying candidates

Before offering renal denervation, which disrupts overactive sympathetic nerves in the renal arteries, reducing their signaling to the kidneys and helping to lower blood pressure, careful evaluation is essential. Since hypertension can be influenced by many factors, including secondary causes,



BY JUAN PASTOR-CERVANTES, MD

medication interactions and lifestyle contributors, renal denervation shouldn't be presented as a shortcut or a replacement for medications, but as an additional option for selected patients after thoughtful discussion.

Patient selection is critically important. Renal denervation is not appropriate for everyone, and not every patient will experience the same degree of benefit.

Honest conversations about potential outcomes are essential. In my practice, transparency has strengthened trust and improved long-term engagement.

Patients who understand both the potential and the limitations of the procedure tend to be more satisfied with their care, regardless of the degree of blood pressure reduction achieved.

Communication with selected patients is especially important before the procedure. Spending time explaining the physiology of renal nerves and how this can contribute to persistent high blood pressure is essential.

I also emphasize that renal denervation works gradually and that success is measured over months, not days, to set up a realistic timeline expectation for results.

From a procedural standpoint, the recent cases were notable for their consistency. Renal denervation is minimally invasive and catheter-based, and for patients, the experience is often less intimidating than anticipated. Most are awake and comfortable, closely monitored and able to return home the same day.

Post-procedure

In the weeks following the procedure, blood pressure readings are tracked carefully, medications are reviewed and patients are encouraged to remain engaged in lifestyle measures. Blood pressure does not suddenly normalize overnight, but many patients demonstrate improved stability and downward trends over time.

One of the most striking observations from these cases has been the psychological shift in patients. Chronic hypertension carries an invisible burden, and when medications fail to deliver consistent control, patients often internalize that failure. Renal denervation helps reframe the conversation. It reinforces that hypertension is not simply about willpower or compliance, but about complex physiological pathways that sometimes require different approaches. Several patients have shared that they feel more hopeful and more in control of their health, even early in the follow-up period.

From a physician's perspective, performing multiple recent renal denervation cases has deepened my appreciation for individualized care. Hypertension management cannot rely solely on algorithms. It requires listening to patients, understanding their experiences with prior therapies and adapting strategies to meet their needs. Renal denervation adds another dimension to that personalized approach.

These cases have also highlighted the value of team-based care. Successful renal denervation programs depend on coordination between physicians, nursing staff, procedural teams and outpatient follow-up providers. Clear communication and consistent protocols ensure patient safety and continuity of care.

Moving forward

Looking ahead, I view renal denervation as a thoughtful evolution in the management of resistant hypertension. It does not replace existing therapies. Instead, it acknowledges that some patients need more than traditional pathways to control hypertension.

For patients reading about renal denervation and wondering whether it might be right for them, my advice is simple: have an informed conversation with your physician. Ask about your blood pressure history, your response to medications and your long-term risk. Understand that no single treatment defines success. Hypertension management is a journey, and new options are most effective when integrated into comprehensive care.

As a physician, these recent Symplicity renal denervation cases have reinforced why I value thoughtful innovation. They have expanded the way I approach hypertension, strengthened relationships with patients and reminded me that progress in medicine is measured not only in numbers, but in confidence, engagement and quality of life. That perspective - grounded in experience, evidence and patient partnership - is what continues to guide my practice as hypertension treatment evolves.

Dr. Juan Pastor-Cervantes is medical director of Memorial Healthcare System's Cardiac Catheterization Laboratory.

For more information on total heart care, visit mhs.net/services/cardiac-vascular.

Cover Story: Innovating the Future of Heart Health

Continued from page 1

pies and treatments," said Jose Baez-Escudero, M.D., chief of cardiology and electrophysiology for the Broward Health Physician Group.

Structural Heart Care Expansion

Broward Health, an early provider of structural heart care in South Florida, has expanded its program with the addition of board-certified interventional cardiologist Pablo Rengifo-Moreno, M.D., to lead its structural heart program.

Dr. Rengifo-Moreno brings advanced expertise in treating complex valve conditions and uses FDA-approved and investigational devices for valve repair and replacement, including the MitraClip, PASCAL and Tendyne systems, as well as transcatheter aortic valve replacement implants. He also plans to integrate emerging technologies, such as artificial intelligence and advanced imaging, to enhance early detection and improve patient outcomes.

"Structural heart disease is a rapidly evolving field," Dr. Rengifo-Moreno said. "By integrating emerging technologies, including artificial intelligence and

advanced imaging, we can improve early detection and optimize outcomes."

A New Era for Atrial Fibrillation

At Broward Health Medical Center in Fort Lauderdale, Dr. Baez performed the first atrial fibrillation ablation in Broward County using the VARIPULSE™ pulsed field ablation catheter.

"We brought on the pulsed field ablation procedure less than a year ago, and we are enhancing it with the latest technology to improve patient outcomes and quality of life for those diagnosed with AFib," Dr. Baez said.

The technology is designed to deliver ablations at precise locations and allows accurate visualization of the catheter within the patient's anatomy to support pulmonary vein isolation.

To meet growing community needs in northwest Broward County, Broward Health North and Broward Health Coral Springs have expanded their cardiac programs and now offer left-sided ablations to treat atrial fibrillation. Cardiac ablation is a minimally invasive procedure that uses energy to create small scars in the heart to block abnormal electrical signals and restore normal rhythm.

Listen to Your Body, Early Detection is Important

Last year, Coral Springs resident Owen Creighton, 38, sought care at the Broward Health Coral Springs Emergency Department after experiencing a racing heart, dizziness and lightheadedness. Under the care of Jonathan Nieves, M.D., a cardiologist specializing in electrophysiology with the Broward Health Physician Group, Owen became the first patient to undergo a left-sided ablation at the hospital.

"AFib most commonly affects older adults, but it can occur in younger patients as well," Dr. Nieves said. "That's why early screening is so important. Detecting heart rhythm abnormalities early can save lives."

Owen was diagnosed with atrial fibrillation 10 years earlier and didn't tolerate blood thinners. When doctors recommended a minimally invasive procedure known as cardiac ablation, he agreed it was the best treatment option for him.

"Following my procedure, I feel great and have not had any cardiac episodes," Owen said.

Facility Upgrades

Broward Health North recently opened

an 11,600-square-foot cardiac catheterization suite as part of an expansion of its cardiovascular service line. The suite includes two new catheterization labs, increasing the hospital's total to three.

The labs are equipped with next-generation imaging and diagnostic systems designed to improve visualization, procedural accuracy and workflow efficiency while reducing radiation exposure. The suite also includes patient-focused amenities.

At Broward Health Imperial Point, patients can also benefit from advanced imaging services at the Jacqueline J. Bernstein & Marvin H. Weiner Imaging Center, made possible by a generous \$5.5 million donation. The center features both MRI and CT scanners designed to deliver fast, accurate results.

The advanced CT scanner uses dual-source technology, combining two X-ray tubes and two detectors to create clearer images in less time. This technology allows for quicker scans, lower radiation exposure and highly accurate diagnoses.

For more information on Broward Health's cardiac services, visit BrowardHealth.org/CardiacCare.



Profiles In Cardiology

BROWARD HEALTH MEDICAL CENTER

Pablo Rengifo- Moreno, MD

Pablo Rengifo- Moreno, M.D., serves as the director of the structural heart disease and mechanical circulatory support programs at Broward Health.

"I was drawn to cardiology because it sits at the intersection of physiology, technology and immediate patient impact," Dr. Rengifo-Moreno said. "Early in my training, I was fascinated by how structural and coronary heart disease could be treated with increasingly less invasive approaches."

He performs complex interventional procedures, overseeing quality improvement in the cardiac catheterization laboratory, and directing mechanical circulatory support, in addition to teaching, mentoring trainees and leading clinical research initiatives.

"I'm motivated by taking care of complex patients who often have limited options and helping them regain quality of life," Dr. Rengifo-Moreno said.

He earned his medical degree from Universidad Central de Venezuela. He completed his internal medicine residency and cardiovascular medicine fellowship and advanced subspecialty fellowships in interventional and structural heart disease at University of Miami.



Robert Singal, MD

Robert Singal, M.D., has 30 years of experience in cardiology and serves as medical director of the Broward Health Coral Springs cardiac catheterization laboratory.

"While doing an internship, I became fascinated by the heart and circulatory system and the critical care aspects of cardiology," Dr. Singal said. "I felt like I was able to practice multiple aspects of medicine through one specialty."

He oversees cases and reviews them for quality and National Cardiovascular Data Registry metrics, and he also helps expand the cardiac service line with new therapies and through teaching and community outreach.

"My daily motivation is the desire to help people," Dr. Singal said. "There is no better feeling than saving a patient from something that could have harmed them immensely."

Dr. Singal earned his medical degree from the University of South Florida. He completed an internal medicine residency at the Medical College of Georgia and a cardiovascular disease fellowship at Jackson Health System.



BROWARD HEALTH NORTH

Danish Sheikh, DO

Danish Sheikh, D.O., is a cardiologist at Broward Health North. He is board certified in cardiology and nuclear medicine and has been with Broward Health for nearly a decade.

"I've always been driven to help people, and cardiology allows me to make a difference every day," Dr. Sheikh said. "Because heart disease remains one of the leading causes of death in the U.S., I felt called to focus my efforts where they could have the greatest impact." He is a program director for the Transitional Year Residency Program and a core faculty member for the Internal Medicine residency, along with the cardiology fellowship. Dr. Sheikh received a bachelor's degree in psychology from New York University and his Doctor of Osteopathy degree at New York College of Osteopathic Medicine. He completed an internal medicine residency at Largo Medical Center in Largo, Fla., and was named chief cardiology fellow when he completed his cardiology fellowship at Broward Health Medical Center.



Joel Gellman, MD

With 25 years of experience in cardiology, Joel Gellman, M.D., is a cardiologist who serves as medical director of the echocardiography laboratory at Broward Health North and vice chief of staff at Broward Health Imperial Point.

"My interest in cardiology started in childhood, as my father suffered from coronary artery disease," Dr. Gellman said.

As a student, he was fascinated by the anatomy and physiology of the cardiovascular system and the challenges it presented for both patient care and research.

"My daily motivation lies in the satisfaction of seeing sick patients get better and return to a normal life," Dr. Gellman said.

Dr. Gellman earned his medical degree from the University of the Witwatersrand in Johannesburg, South Africa. He completed an internal medicine residency at Massachusetts General Hospital, a fellowship in cardiovascular research at Yale University and a clinical cardiology fellowship at Johns Hopkins.



WEST BOCA MEDICAL CENTER

Michael M. Halista, MD

Dr. Michael Halista is an interventional and structural cardiologist with Palm Beach Health Network Physician Group and is on staff at Delray Medical Center and West Boca Medical Center. He specializes in minimally invasive, catheter-based treatments for coronary artery disease and complex valvular heart conditions, helping patients access advanced therapies with shorter recovery times. Dr. Halista is board-certified in internal medicine, cardiovascular disease, and interventional cardiology. His clinical expertise includes transcatheter aortic valve replacement (TAVR), mitral and tricuspid valve repair and replacement, left atrial appendage closure, percutaneous coronary intervention, and other complex coronary and structural heart procedures. Actively involved in cardiovascular research, Dr. Halista has published in leading medical journals and presented nationally on topics including structural interventions, advanced heart failure, and circulatory support devices. Originally from Massachusetts, he earned his medical degree from Columbia University and completed advanced cardiology training at Mount Sinai, NYU, and the University of North Carolina.



Eric A. Kupferstein, DO

Dr. Eric Kupferstein is a board-certified interventional cardiologist on staff at Delray Medical Center, West Boca Medical Center and Boca Raton Regional Hospital. He joined Advanced Heart & Vascular Institute in Boca Raton, Florida, in November 2022, bringing advanced expertise in interventional and endovascular cardiology to the South Florida community. Originally from Long Island, New York, Dr. Kupferstein earned his bachelor's degree from Yeshiva University in New York City before completing medical school at the New York College of Osteopathic Medicine (NYCOM) in 2015. He went on to complete his internal medicine residency and cardiology fellowship at SUNY Downstate, finishing in 2021. To further specialize, Dr. Kupferstein completed an additional 15-month interventional and endovascular cardiology fellowship at Cooper Hospital in Camden, New Jersey, in 2022. Dr. Kupferstein is board certified in internal medicine, cardiovascular medicine, interventional cardiology, echocardiography, and nuclear cardiology.



GOOD SAMARITAN MEDICAL CENTER

Keith D. Meyer, MD

Dr. Keith Meyer, a board-certified cardiologist who has practiced at Good Samaritan Medical Center for more than 30 years, is committed to using his knowledge and experience to treat his patients and help them attain the best quality of life possible. He works alongside the multidisciplinary team of physicians, nurses, and other healthcare professionals at the hospital's Cardiac and Vascular Institute to deliver high-quality care to the Palm Beach community. Dr. Meyer earned his medical degree at the University of Rochester School of Medicine and Dentistry in Rochester, New York. He completed his internship and residency in internal medicine at New York VA Medical Center, followed by a fellowship in cardiology. He is board certified in both internal medicine and cardiovascular disease. Dr. Meyer, who has been a practicing cardiologist for 40 years, considers his day-to-day interactions with his patients to be one of the most rewarding aspects of his medical career.





Profiles In Cardiology

MEMORIAL HEALTHCARE SYSTEM

MEMORIAL DIVISION OF ELECTROPHYSIOLOGY

Ari Bennett, MD

Dr. Ari Bennett joined Memorial Healthcare System in 2025, in part because of the skill and abilities of fellow physicians collaborating on the most complex cases. It's safe to say the electrophysiologist hasn't been disappointed.

"The experience has exceeded my expectations," said Dr. Bennett, whose fellowship training in both cardiology and electrophysiology was completed at the University of Texas Southwestern Medical Center in Dallas. "We're providing high-level, multi-disciplinary care on the level of the better academic centers." At Memorial Cardiac and Vascular Institute, Dr. Bennett performs a wide range of procedures, including ablations, pacemaker and leadless pacemaker implantations, defibrillator implantations, laser lead extractions, left atrial appendage occlusion devices, and loop recorders. A native South Floridian that has earned degrees at both the University of Florida and University of Miami, Dr. Bennett says providing care for the community is his way of supporting the area he calls home.



MEMORIAL DIVISION OF CARDIAC SERVICES

Beth Helfman, DO

As a young person interested in pursuing a medical career, Dr. Beth Helfman didn't have to look far to find a role model to emulate. Her father, Dr. Howard Helfman, was a physician in Stuart, FL, responsible for many advancements in local cardiology, including establishing the area's first cath lab. "My dad was an example of how much impact one person can have in a community," said Dr. Helfman, whose fellowship training came in Memorial's Graduate Medical Education program. "He also showed me how cardiology enables a doctor to partner with their patient at all stages of their medical journey." Dr. Helfman joined the Memorial Cardiac and Vascular Institute as an attending doctor in 2025. She most appreciates the family-like atmosphere, saying the relationships between colleagues and the multidisciplinary conversations that result elevate the level of patient care that can be provided.



Cristina Ortiz Villabona, MD

Dr. Cristina Ortiz Villabona believes an important part of her success as a cardiologist comes from care provided in environments with a variety of patient populations. The non-invasive cardiologist gained experience in Ohio, Tennessee (where she did fellowship training at Vanderbilt University) and now practices in South Florida. "Women and ethnic minorities are traditionally underdiagnosed for cardiac diseases," said Dr. Ortiz, whose family has roots in Colombia. "I build relationships with them, as I do with all my patients, making sure they are listened to and understood." The bilingual Dr. Ortiz was attracted by the reputation and top-tier care provided at Memorial Cardiac and Vascular Institute before joining the team in 2025. Moving forward, she is interested in training fellows in Memorial's Graduate Medical Education cardiology program. "I'm passionate about teaching and hope to be a mentor for others," she said.



Holly Gaines, MD

Growing up in a rural community in southern Oklahoma, Dr. Holly Gaines watched her grandfather pass away after his cardiovascular disease went untreated. The experience not only motivated her to become a cardiologist but influenced the way she practices medicine. "Providing access to care and explaining complex conditions in plain language can make all the difference for patients," said Dr. Gaines, whose fellowship training was completed at the University of Utah. "It's important they understand the what and why behind the care they need, and get the benefits of a coordinated, multi-disciplinary team of experts."

Dr. Gaines is a fellow of the American College of Cardiology (FACC), a diplomate in Adult Comprehensive Echocardiography with the National Board of Echocardiography and holds board certifications in Nuclear Cardiology, Adult Cardiovascular Disease, and Internal Medicine. She is also pursuing a master's in public health from Johns Hopkins University to further expand her ability to improve heart health at both the individual and population levels.



MEMORIAL DIVISION OF INTERVENTIONAL CARDIOLOGY

Houman Khalili, MD

Dr. Houman Khalili is a fellowship-trained interventional cardiologist who uses minimally-invasive, transcatheter-based procedures to treat complex cases of coronary and structural heart disease.

"Our patients are quite sick and their lives very stressful, with many of them referred by other cardiac centers for the tertiary care Memorial can provide," said Dr. Khalili, who joined Memorial Cardiac and Vascular Institute three years ago. "We're unique in South Florida, covering all areas of cardiovascular medicine. There's no case we can't work on."

Dr. Khalili is often the interventionalist on multi-disciplinary conferences that focus on complicated valvular cases. He says hearing and sharing expert perspective and experience between clinicians can help with the difficult conversations he has to have with patients and families. "It's very important that I explain the complicated care we provide so it's easier to understand and puts their minds at ease," he said.



MEMORIAL DIVISION OF ADVANCED HEART FAILURE AND TRANSPLANT

Lauren Hunter, MD

Dr. Lauren Hunter didn't take a direct route to her position treating the sickest of Memorial's cardiac patients, spending 10 years before medical school working in pediatric mental health. The experience developing treatment plans for those suffering with illnesses that included schizophrenia and depression helped mold the cardiologist she is today.

"I've integrated some of those skill sets into what I bring to the care of those with end-stage heart failure," said Dr. Hunter, whose fellowship training was completed at Jefferson Einstein Philadelphia Hospital in 2024 and Emory University Hospital last year. "What I'm able to observe from patient responses influences the way I manage clinical situations. It also helps me establish rapport and get more information from those who otherwise might not be as forthcoming."

Dr. Hunter says understanding the correlation between behavior and outcomes, and incorporating that into big-picture thinking, is a necessity for her specialty, which she says can run the risk of relying exclusively on scientific models.



MEMORIAL DIVISION OF ADULT CONGENITAL HEART DISEASE

Todd Roth, MD

Dr. Todd Roth estimates that Memorial's congenital heart disease program cares for as many as 4,000 of the approximately 12,000 adults born with the disease and more than 10,000 infants, children and adolescents receiving treatment for congenital heart issues in South Florida.

"We're providing the most comprehensive, programmatic care for this unique population, whether for a fetus, adult or anyone in between," said Dr. Roth, chief of both adult congenital heart disease and ambulatory pediatric heart disease. "Our specialists have the training to provide the highest level of care for the most acute cases and are supported with resources that improve the quality and length of life for patients."

Dr. Roth joined Memorial Healthcare System in 2012 and has been a large part of its success in cardiology. It features the only accredited adult congenital heart program in South Florida and the largest pediatric cardiology network in Florida.



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Profiles In Cardiology

JOE DIMAGGIO CHILDREN'S HOSPITAL

Tom Forbes, MD

Dr. Tom Forbes, Memorial's chief of pediatric cardiac services, is the driving force behind the Catheterization RiSk in Pediatrics (CRISP) registry, a database of over 10,000 cases that help interventional cardiologists predict risk and guide treatment plans for congenital heart patients undergoing procedures in cardiac catheterization laboratories. Connected to that, he is also the co-founder of the Congenital Cardiovascular Interventional Study Consortium (CCISC), which works with the FDA to obtain medical device approval in the U.S.

"CRISP assists in predicting when a physician is likely to encounter a serious adverse event in the catheterization lab, allowing the interventionist to hopefully avoid the event or be better prepared if it should occur," said Dr. Forbes. "We're saving lives by predicting circumstances that are likely to arise and expediting care if they do happen."

Currently America's fastest-growing registry, CRISP is based at Joe DiMaggio Children's Hospital and incorporates information from 20 congenital cardiac centers nationwide. Additionally, it helps get devices approved more expediently in the U.S. through a strong collaboration between industry, physicians and the FDA.



MEMORIAL DIVISION OF CARDIAC IMAGING

Vamsi Pavuluri, MD

As the medical director for cardiac imaging operations at Memorial Healthcare System, Dr. Vamsi Pavuluri sees imaging as the central hub that ties all cardiac specialties together. "While we may not see as many patients as other cardiologists, that doesn't mean we aren't helping plan and guide care for those with coronary artery, structural and valvular diseases," said Dr. Pavuluri, whose internship, residency and fellowship training were done at the University of Connecticut Health Center. "The detailed information and recommendations we provide specialists in those areas leads to better downstream treatment and risk reduction." A non-invasive cardiologist whose uncle was also a cardiologist, Dr. Pavuluri has spent nearly a decade at Memorial, with its Cardiac and Vascular Institute being his professional home since fellowship training. His focus then, as it is now, is to use advanced imaging modalities to provide specific answers to patient symptoms that can have multiple causes.



ST. MARY'S MEDICAL CENTER

Suneet Kukreja, MD



Dr. Suneet Kukreja, a cardiologist at St. Mary's Medical Center in West Palm Beach, has been practicing medicine for more than 30 years. His areas of interest include cardiovascular preventive care for optimal health, lipidology, strokes, hypertension, advanced management of CAD and heart failure. Prior to joining the medical staff at St. Mary's Medical Center in 2007, Dr. Kukreja worked in Michigan, Massachusetts, and Miami. Dr. Kukreja is a board-certified diplomate from the American Board of Cardiology, echocardiography, nuclear cardiology and internal medicine. Among his completed fellowships, Dr. Kukreja trained in cardiac rehabilitation and nuclear cardiology at the Spalding Rehab Hospital, a teaching hospital of Harvard Medical School. In addition, Dr. Kukreja completed a clinical cardiology fellowship at Mount Sinai Medical Center in Miami Beach, FL. Dr. Kukreja received his medical training from the Government Medical College in Patiala, India and is a member of the American College of Cardiology, American College of Physicians, American Medical Association and the Paul Dudley White Society of Harvard Medical School.

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Profiles In Cardiology

FLORIDA COAST MEDICAL CENTER

Isaac Dor, MD

Dr. Isaac Dor is a board-certified cardiologist with more than 30 years of experience in comprehensive cardiovascular care. He is section chief of cardiology at Florida Coast Medical Center and a practicing member of Stuart Cardiology Group. He earned his medical degree from The Hebrew University–Hadassah School of Medicine in Jerusalem and completed his internship, internal medicine residency (serving as chief resident), and cardiovascular fellowship at Long Island College Hospital/SUNY Downstate in New York. Board certified by the American Board of Internal Medicine in Cardiovascular Diseases, Dr. Dor has built a distinguished career in private practice across the Midwest before relocating to Florida.

Dr. Dor specializes in consultative cardiology, invasive and diagnostic cardiac catheterization, advanced cardiac imaging, pacemaker and loop recorder implantation, heart failure management, and pulmonary arterial hypertension. He has been a regional leader in CardioMEMS heart failure monitoring, nuclear imaging for cardiac amyloidosis, and advanced PAH therapies. He has also served as a principal investigator in major clinical trials and as a national medical educator.



W. Jason McManus, MD

Dr. W. Jason McManus is a board-certified interventional cardiologist on staff at Florida Coast Medical Center and a practicing member of the Stuart Cardiology Group, where he provides advanced, patient-centered cardiovascular care to the Treasure Coast community.

Dr. McManus earned his medical degree from the University of Mississippi in Jackson and completed his internship and residency at the Medical University of South Carolina in Charleston (MUSC). He completed his cardiovascular diseases fellowship at the Ochsner Clinic in New Orleans and returned to MUSC to complete his fellowship in interventional cardiology. He is board certified by the American Board of Internal Medicine in Cardiovascular Diseases and Interventional Cardiology, and also holds board certification in Nuclear Cardiology.

With extensive training across a broad range of cardiac conditions and minimally invasive procedures, Dr. McManus is committed to delivering high-quality, evidence-based care tailored to each patient's needs. Outside of medicine, he is married with two children, is a talented musician, enjoys spending time boating with his family and is a competitive cyclist.



DELRAY MEDICAL CENTER

Melissa Levack, MD

Dr. Melissa Levack is a board-certified cardiothoracic surgeon with advanced training in complex adult cardiac surgery on staff at Delray Medical Center. Dr. Levack has been practicing medicine for nearly 10 years. She is certified by the American Board of Surgery (2015) and the American Board of Thoracic Surgery (2018). Dr. Levack performs a full spectrum of high-acuity procedures, including coronary artery bypass grafting, aortic valve replacement, ascending aorta and aortic root surgery, transcatheter aortic valve replacement (TAVR), mitral and tricuspid valve repair or replacement, arrhythmia surgery (MAZE and convergent procedures), and management of aortic dissections.

Dr. Levack earned her Bachelor of Science, cum laude, as a Presidential Scholar from Dartmouth College, followed by her Doctor of Medicine Emory University School of Medicine. Her postgraduate training includes rigorous surgical residencies at Massachusetts General Hospital and the Cleveland Clinic, where she served as Chief Cardiac Surgery Resident. She also completed a postdoctoral research fellowship at the University of Pennsylvania, reflecting her strong foundation in both clinical excellence and cardiovascular research.



Yoel Vivas, MD

Dr. Yoel Vivas is the Medical Director of Electrophysiology at Delray Medical Center and Founder of The Arrhythmia Center of South Florida. A pioneer in cardiac innovation, he was the first physician in Palm Beach County to perform Pulsed Field Ablation (PFA) and is among South Florida's highest-volume operators for Watchman™ and leadless pacemakers.

Dr. Vivas is uniquely dual-board certified in Cardiac Electrophysiology and Advanced Heart Failure. A Fellow of the Heart Rhythm Society (FHRS), he trained at Yale University and the Lahey Clinic after graduating Magna Cum Laude from Universidad Central de Venezuela.

An international speaker and widely published author, Dr. Vivas also serves as a faculty member for the Florida Atlantic University cardiology fellowship. His expertise combines cutting-edge, minimally invasive technology with a master-level understanding of heart failure, positioning him as a premier leader in treating complex heart rhythm disorders.



BAPTIST HEALTH HEART & VASCULAR CARE

Ashok Kumar C J, MD

Ashok Kumar Coimbatore Jeyakumar, M.D., serves as director of aortic disease with Baptist Health Heart & Vascular Care. He specializes in the comprehensive management of complex cardiac and aortic conditions, including aortic aneurysms and dissections, genetic aortic diseases, coronary artery disease, advanced valvular disease, structural heart disease, and high-risk redo cardiac operations. Before joining Baptist Health, Dr. CJ led the division of adult cardiac surgery at the University of Mississippi Medical Center, where he developed high-acuity cardiac programs and advanced clinical pathways for aortic and coronary surgery. His leadership emphasized multidisciplinary teamwork, operational efficiency, and clinical excellence. He collaborated closely with specialists across cardiology, vascular surgery, radiology, anesthesia, intensive care, and emergency medicine to establish comprehensive care models for acute aortic syndromes and complex cardiac disease. Dr. CJ completed advanced fellowship training in adult cardiac surgery and transcatheter aortic valve replacement (TAVR) at Emory University School of Medicine, followed by specialized training in robotic and minimally invasive cardiac surgery at the Cleveland Clinic. His foundational cardiovascular and thoracic surgery training was completed at the Sree Chitra Tirunal Institute for Medical Sciences and Technology in India, following a rigorous general surgery residency at the Post Graduate Institute of Medical Education and Research (PGIMER) and medical training at Coimbatore Medical College.



Marcos A. Nores, MD

Marcos Nores, M.D., is a board-certified cardiac surgeon and medical director of Christine E. Lynn Heart & Vascular Institute, part of Baptist Health Heart & Vascular Care. He specializes in mitral valve repair, thoracic aortic surgery, coronary reoperations, and transcatheter treatments for structural heart disease. Before joining Baptist Health, Dr. Nores served as director of one of the busiest cardiovascular surgical programs in Palm Beach County, where his team achieved a three-star Society of Thoracic Surgeons (STS) designation in both coronary artery bypass grafting and valvular heart disease, reflecting sustained excellence in risk-adjusted outcomes. He also established and led the region's highest-volume complex aortic surgery program, focusing on aortic root and arch reconstruction and management of complex thoracic aortic pathology. Dr. Nores earned his medical degree from the University of Buenos Aires School of Medicine in Argentina. He completed an internship at St. Elizabeth's Medical Center in Boston, a residency in general surgery at Cedars-Sinai Medical Center in Los Angeles, and a cardiothoracic surgery fellowship at The George Washington University in Washington, D.C. He completed advanced training and served as a clinical associate at The Cleveland Clinic Foundation in Ohio. Board-certified by the American Board of Surgery and the American Board of Thoracic Surgery, he has published peer-reviewed research and served as principal investigator on national structural heart trials involving aortic, mitral, and tricuspid transcatheter valve platforms.



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Profiles In Cardiology

PALM BEACH GARDENS MEDICAL CENTER

Jacob Litwinczuk, MD

Dr. Jacob Litwinczuk is the Chief of Cardiology and Interventional Cardiology at Palm Beach Gardens Medical Center and has been a member of the Medical Council since 2011. He completed his medical education at Wright State University school of Medicine, medical training at Metro health Medical CWRU School of Medicine, followed by a Cardiology Fellowship. He further pursued an Interventional Cardiology Fellowship at the University of Kentucky and is Board Certified in Cardiovascular Disease and Interventional Cardiology by the American Board of Internal Medicine.

Dr. Litwinczuk specializes in interventional, cardiology, including peripheral interventions as well as structural interventional procedures, including trans catheter, aortic valve replacement TAVR as well as percutaneous, mitral valve repair TEER and Watchman procedure.

The most important part about his work is applying the most recent scientific developments and technology to patient care in difficult clinical situations and seeing them getting better, and regaining hope.



Augusto E. Villa, MD, FACC, FSCAI

Dr. Augusto E. Villa is an Interventional/Structural cardiologist on staff at Palm Beach Gardens and Good Samaritan medical centers. Dr. Villa earned his medical degree from Cayetano Heredia University and furthered his education and the prestigious Johns Hopkins University School of Medicine. He completed a 3-year residency in Internal Medicine, and a 3-year Cardiology fellowship at the University of Miami School of Medicine Hospitals. Additionally, he undertook a residency elective rotation in the cardiology consult service at The Johns Hopkins Hospital and he completed a 2-year Interventional Cardiology and Structural fellowships at The Cleveland Clinic Foundation at Cleveland, OH.

Dr. Villa is board-certified in Cardiovascular Diseases, Interventional Cardiology, Endovascular Medicine, and Internal Medicine. He has been a visiting Professor of Medicine at Cayetano Heredia University since 2019. Dr. Villa started the Structural Heart program at Palm Beach Gardens Medical Center 15 years ago where he performs Transcatheter Aortic, Mitral, Tricuspid and Pulmonic valve replacement and repair. Also specializes in transcatheter closure of atrial septal defects and patent foramen ovale (PFO), perivalvular leaks and left atrial appendage occlusion with the Watchman and Amulet devices. As the principal investigator for the Empower trial at PBGMHC, Dr. Villa is at the forefront of cardiovascular research. He also specializes in complex radial coronary interventions including chronic total occlusions, orbital, rotational and laser atherectomy and stenting using percutaneous left ventricular assist devices. Dr. Villa is deeply passionate about performing interventional/structural heart procedures, focusing on the prevention of heart disease, and saving lives.



JUPITER MEDICAL CENTER

Ali Alameri, MD

Dr. Ali Alameri is a highly skilled cardiothoracic surgeon at the Robson Heart & Vascular Institute at Jupiter Medical Center. He specializes in minimally invasive and advanced robotic surgery, with a focus on treating complex heart and lung conditions. His expertise in robotic surgery encompasses procedures such as tricuspid valve repair, left atrial appendage closure, mitral valve repair, MIDCAB and Barostim™ therapy. He performs traditional and minimally invasive procedures including TAVR, Mitraclip, aneurysm surgery, and hybrid procedures for atrial fibrillation.

Dr. Alameri completed his fellowship in cardiothoracic surgery at the esteemed University of Miami/Jackson Memorial Hospital, as well as a specialized fellowship in robotic surgery. He is part of a multidisciplinary team that leverages leading-edge technology to create personalized treatment plans tailored to each patient's needs.

Dedicated to improving patient outcomes, Dr. Alameri utilizes the latest surgical techniques to help his patients achieve their best quality of life.



Vivek Patel, MD, FACS

Dr. Vivek Patel is a fellowship trained, cardiothoracic surgeon at Jupiter Medical Center's Robson Heart and Vascular Institute. With a focus on advanced techniques and minimally invasive procedures, Dr. Patel was among the first in South Florida to perform robotic-assisted MIDCAB (Minimally Invasive Direct Coronary Artery Bypass) surgery for the treatment of coronary artery disease. He also specializes in Barostim™ Baroreflex Activation Therapy, which uses neuromodulation to alleviate the symptoms of systolic heart failure.

He completed his cardiothoracic surgery training at Strong Memorial Hospital, University of Rochester, and furthered his expertise with a fellowship in aortic surgery at the University of Pittsburgh Medical Center. Dr. Patel serves as an Assistant Professor of Surgery and Director of Cardiothoracic Surgery at UT Health East Texas. He is dedicated to ensuring his patients' well-being and enhancing their quality of life through innovative surgical care.



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Adriana Arenas, MD, Joins Baptist Health Miami Neuroscience Institute as Nonsurgical Spine Care Physician

Adriana Arenas, M.D., is a board-certified nonsurgical spine care physician at Baptist Health Miami Neuroscience Institute, specializing in physical medicine and rehabilitation. She provides comprehensive evaluation and treatment for patients with spine conditions, neurologic injuries and musculoskeletal disorders, with a focus on restoring function and improving quality of life. Dr. Arenas earned her medical degree from Universidad El Bosque School of Medicine in Bogotá, Colombia. She completed an internship at Miami Children's Hospital (now Nicklaus Children's Hospital) and served as chief resident during her residency in physical medicine and rehabilitation at Jackson Memorial Hospital in Miami. Her training emphasized functional restoration, neurologic rehabilitation and nonsurgical spine care, forming the foundation for her comprehensive clinical approach.



Dr. Adriana Arenas

Baptist Health Miami Cancer Institute Names Justin M. Dubin, MD, Director of Men's Health

Board-certified urologist Justin M. Dubin, M.D., has joined Baptist Health Miami Cancer Institute and will serve as director of Men's Sexual Health. He specializes in male infertility and sexual health, treating conditions such as erectile dysfunction, Peyronie's disease, ejaculatory disorders, testicle pain, low testosterone, varicoceles and other male genitalia issues. Prior to joining Baptist Health, Dr. Dubin was a men's health specialist at Memorial Healthcare System in Hollywood, FL. Dr. Dubin earned his medical degree at Rutgers Robert Wood Johnson Medical School. He completed a urology residency at the University of Miami Miller School of Medicine and an andrology fellowship at Northwestern University Feinberg School of Medicine.



Dr. Justin M. Dubin

Marcos A. Nores, MD, Joins Baptist Health Heart & Vascular Care as Medical Director of Lynn Heart & Vascular Institute

Marcos A. Nores, M.D., board-certified cardiac surgeon, has joined Baptist Health Heart & Vascular Care as medical director of Christine E. Lynn Heart & Vascular Institute at Boca Raton Regional Hospital, part of Baptist Health.

Dr. Nores joins Baptist Health with more than 25 years of experience in cardiothoracic surgery and clinical leadership. Prior to joining the organization, he served as medical director of cardiovascular services at JFK Medical Center in Atlantis, FL. He previously led the cardiothoracic surgery program at King's Daughters Medical Center in Ashland, KY. Dr. Nores earned his medical degree at the University of Buenos Aires School of Medicine in Argentina. He completed his internship at St. Elizabeth's Medical Center in Boston, followed by a general surgery residency at Cedars-Sinai Medical Center in Los Angeles and a cardiothoracic surgery fellowship at The George Washington University in Washington, D.C. He also served as clinical associate at The Cleveland Clinic Foundation in Cleveland, OH.



Dr. Marcos A. Nores

Cleveland Clinic Weston Hospital Adds Medical Oncologist/Hematologist

Naji Mallat, M.D., has joined Cleveland Clinic Weston Hospital as a board-certified physician specializing in medical oncology and hematology. Dr. Mallat completed his medical education at the University of Balamand, School of Medicine in Beirut, Lebanon. Following medical school, he completed an internship in internal medicine at the American University of Beirut before moving to the United States for postgraduate training. Dr. Mallat completed his residency in internal medicine at University Hospitals Cleveland Medical Center, Case Western Reserve University in Cleveland, Ohio, followed by a fellowship in hematology oncology at the same institution. He focuses on cancers affecting the breast, as well as the head and neck region, and is committed to providing personalized, evidence-based care and advancing outcomes through a multidisciplinary approach.



Dr. Naji Mallat

Cleveland Clinic Florida Names Chad R. Ritch, MD, Chair of the Division of Urology

Chad R. Ritch, M.D., MBA, FACS, has been named chair of the Division of Urology for the Cleveland Clinic Florida market. Prior to joining Cleveland Clinic, Dr. Ritch served as professor of urology and director of the Society of Urologic Oncology fellowship program at the University of Miami Miller School of Medicine in Miami. He was also the associate director for University of Miami international patient services and led the expansion of the health system's global footprint.

Dr. Ritch earned his medical degree and MBA from the University of Chicago. He completed his urology residency at Columbia University in New York City, followed by a urologic oncology fellowship at Vanderbilt University in Nashville.



Dr. Chad R. Ritch

Baptist Health South Florida Welcomes Pain Medicine and Rehabilitation Physician, Giuseppe Paese, DO

Baptist Health South Florida proudly announces Giuseppe G.F. Paese, D.O., an accomplished specialist in pain medicine, physical medicine and rehabilitation, has joined Baptist Health Orthopedic Care and its team of distinguished physicians. With over 25 years of experience in clinical and academic medicine, Dr. Paese brings a wealth of knowledge and advanced procedural skills to the community.

Dr. Paese has dedicated his career to the comprehensive treatment of pain and the complete rehabilitation of the body. He is an expert in regenerative medicine and a wide range of minimally invasive procedures designed to treat complex spine and joint conditions. His areas of expertise include spinal cord stimulators, peripheral nerve stimulation, pain pumps, kyphoplasty, endoscopic discectomies, and sacroiliac joint fusions.



Dr. Giuseppe Paese

Cleveland Clinic in Florida Welcomes New Division Chair of Radiation Oncology

Manpreet Bedi, M.D., M.S., has joined Cleveland Clinic as the Division Chair of Radiation Oncology for the Florida market. In this role, Dr. Bedi will work alongside Cancer Institute leadership to further develop the Florida market's radiation oncology program, guiding strategic and programmatic growth. Dr. Bedi is a national leader in radiation oncology with a focus on sarcomas and metastatic bone disease. She most recently served as Vice Chair and Professor of Radiation Oncology at the Medical College of Wisconsin in Milwaukee. Dr. Bedi earned her medical degree from the University of Missouri in Kansas City and completed her radiation oncology residency at the Medical College of Wisconsin.



Dr. Manpreet Bedi

Cleveland Clinic Tradition Hospital Expands General Surgery Team

Morgan Manasa, M.D., has joined Cleveland Clinic Tradition Hospital as a board-certified surgeon specializing in advanced gastrointestinal, minimally invasive and bariatric surgery. Dr. Manasa earned her medical degree from the University of Miami, Miller School of Medicine in Miami. Following her postgraduate training in general surgery, including internship and residency, at the University of California, Irvine Medical Center in Orange, California, she completed a fellowship in advanced GI, minimally invasive and bariatric surgery at the University of California, San Francisco. Dr. Manasa's clinical expertise includes robotic and advanced laparoscopic surgery, management of GERD and hiatal hernias, hernia repair and advanced endoscopic procedures. She is dedicated to delivering innovative, patient-centered surgical care, combining precision techniques with compassionate support.



Dr. Morgan Manasa

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Broward County Medical Association Announces 2026 Presidential Inauguration Honorees

The Broward County Medical Association (BCMA) is proud to announce the 2026 honorees and award recipients to be recognized during the BCMA Presidential Inauguration Gala and Centennial Celebration on Saturday, January 31st at Le Meridien Dania Beach. As the Association marks 100 years of physician leadership, advocacy, and service in Broward County, this year's recognitions highlight the individuals and institutions whose impact has shaped the future of healthcare in the region.

Christopher Chang, M.D. – President-Elect

Dr. Christopher Chang, a nationally recognized pediatric allergist and immunologist, will be inaugurated as President of BCMA on January 31st. He currently serves as Chief of the Division of Pediatric Immunology and Allergy at Joe DiMaggio Children's Hospital and is preparing to guide the Association into its second century of service.

Dana Wallace, M.D. – BCMA Physician of the Year

Dr. Dana Wallace is being recognized for her outstanding leadership and contributions that have meaningfully advanced healthcare outcomes for patients in Broward County. This award recognizes a Broward County physician who exemplifies professional excellence, leadership, and service to patients, peers, and the community. The honoree reflects the highest values of the medical profession and the mission of the Broward County Medical Association.

BCMA Institutional Partner Awards

This award recognizes a healthcare institution, organization, or academic partner in Broward County whose collaboration with physicians and the

BCMA has significantly enhanced healthcare delivery, education, or advocacy efforts in the region. The BCMA is recognizing two organizations in this category.

- ProAssurance has been selected as a recipient of the BCMA Institutional Partner Award in recognition of its long-standing commitment to supporting physicians and strengthening the stability of healthcare delivery in Broward County.

- Nova Southeastern University (NSU) has also been honored with the Institutional Partner Award for its exceptional role as an academic and community partner in advancing medical education, research, and advocacy in Broward County. As a leader in health professions training, NSU has worked with the BCMA to promote interdisciplinary collaboration and prepare the next generation of physicians and healthcare professionals.

Scholarship Recipients

In addition, through the Cynthia Peterson Legacy Fund Scholarship, the BCMA Foundation will recognize the following student physicians as recipients of the 2026 scholarship awards:

- Ashley McGill, Doctor of Allopathic Medicine Candidate, Class of 2027. NSU Dr. Kiran C. Patel College of Allopathic Medicine

- Emma Woldenberg, Doctor of Osteopathic Medicine Candidate, Class of 2026. NSU Dr. Kiran C. Patel College of Osteopathic Medicine

The BCMA Presidential Inauguration and 100-Year Anniversary Gala will serve as a historic milestone moment for the Association, honoring a century of service, achievements in organized medicine, and the medical leaders who continue to drive progress for future generations.

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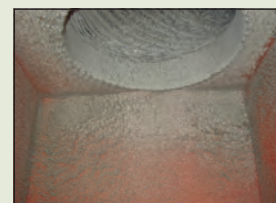
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A message from our President

Why Can't We Depend on History?

I have been fortunate to live through a great deal of history. Through our educational system, I also had the benefit of learning about the history that preceded me. Both experience and education have reinforced a simple truth: science is dependable.

Consider the foundations upon which modern science rests. Newton's 18th-century work on inertia, force, and action and reaction—staples of high school and college physics. The Law of Conservation of Energy, developed in the 19th century, which tells us energy can neither be created nor destroyed. Go back even further to Archimedes and his discoveries regarding buoyancy. Add Boyle's Law, Darwin's theory of evolution, and countless others. While these principles have been refined and expanded over time, none has been disproven. They endure because they are rooted in evidence and repeatable observation.

So why, then, is immunology treated differently?

If we accept that these pioneers uncovered immutable laws, what about Edward Jenner, whose work led to the eradication of smallpox? Or Louis Pasteur, whose discoveries laid the groundwork for vaccines against rabies and anthrax? Or Maurice Hilleman, Jonas Salk, and Albert Sabin, whose contributions dramatically reduced or eliminated diseases such as polio, measles, and mumps? Over the last 300 years, has science somehow proven these giants—responsible for saving millions of lives—wrong?

Apparently, it depends on where one chooses to get their science. Today, social



Jaime Caldwell

media platforms too often serve as substitutes for evidence, elevating opinion and misinformation above decades of rigorous research and real-world outcomes.

A recent Politico Plus article by Kelly Hooper and Sophie Gardner, titled "Outbreak Anniversary," highlights the resurgence of measles and raises the troubling possibility that the United States could lose its measles elimination status, as recognized by the United Nations. When, exactly, was the science proven wrong? And when did leading by example cease to matter more than counting votes?

Paul Offit, director of the Vaccine Education Center at the Children's Hospital of Philadelphia,

captured the moment succinctly: "There's so much in medicine we don't know. There's so much we can't do. This we know. This we can do, and we're consciously choosing not to do it."

The data are sobering. Measles was declared eliminated in the United States in 2000. Yet in 2025, case counts reached 2,242—the highest annual total since the early 1990s—across 49 outbreaks, resulting in three deaths. Approximately 93 percent of cases occurred among individuals who were unvaccinated or whose vaccination status was unknown. As of January 13 of this year, 171 measles cases have already been reported.

Three deaths—entirely unnecessary.

Kindergarten vaccination rates have fallen to 92.5 percent for the 2024–25 school year, well below the 95 percent threshold public health experts say is needed to prevent measles transmission. Has someone discovered new science proving vaccines ineffective or unsafe? If so, I must have missed it.

History has not failed us. Science has not failed us. The real question is whether we are failing to learn from both.

Accolades Accolades

Holy Cross Health Receives Lotus Recognition for Excellence in Care



Dianne Reid, Caritas Coach and WCSI Program Enrichment Director; Taren O'Brien, Vice President & Chief Nursing Officer; Crystal Caruthers, Nurse Resident Development Manager; Julie Watson, Executive Director of WCSI; Rudy Molinet, Board Chair; and Dr. Jose Lopez, Chief Operating & Medical Officer

Holy Cross Health has received the Lotus Recognition(TM) from the Watson Caring Science Institute (WCSI), an honor given to organizations that demonstrate caring as a consistent, lived practice. The recognition highlights how the hospital's culture, guided by its Mission and values, shapes every patient interaction and strengthens connections across the community.

Holy Cross Health's Mission to serve as a transforming healing presence, rooted in reverence and compassion, sets it apart in South Florida. While innovation and technology support care, the health system remains guided by its values, ensuring that every decision and every effort reflect the standards, integrity and commitment that define the organization.

HCA Florida Boynton Beach Emergency Receives 2025 Press Ganey Human Experience Guardian of Excellence Award®

HCA Florida Boynton Beach Emergency announced that it has been named a 2025 Human Experience (HX) Guardian of Excellence Award® winner by Press Ganey. This award is part of Press Ganey's annual ranking of the top hospitals and health systems in the country based on exceptional performance in patient experience.

As a winner of the Press Ganey HX Guardian of Excellence Award®, HCA Florida Boynton Beach Emergency is in the top 5% of healthcare providers in delivering patient experience in the last year. This accomplishment reflects the team's commitment to timely, compassionate care and consistent excellence in serving patients and families.



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