

National
Doctors' Day

MARCH 30, 2025



**SALUTE TO
PHYSICIANS**

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

Salute To Physicians



Dr. Lawrence Ward

Holy Cross Medical Group CMO Focused on Administration/ Physician Partnerships to Improve Patient Care

BY VANESSA ORR

In early February, Lawrence Ward, MD, MPH, MACP, became the chief medical officer for Holy Cross Medical Group, (HCMG), part of Trinity Health. While his time there has been short, he looks forward to making lasting change.

"I see myself as being a steward of the organization—I want to leave it better than I found it," he explained. "I want to support the mission of Holy Cross, be innovative, and improve access to care for all members of the community without prejudice."

"From a physician standpoint, I want to be partners with the administration to take the best care of patients," he added. "As a practicing physician, I see myself as their voice in the C-suite, contributing to any decisions being made."

Originally from Washington, D.C., Dr. Ward most recently served as vice president of Physician Services & Clinical

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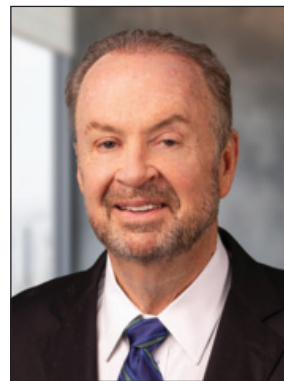
OP-ED: WAYNE BRACKIN, PRESIDENT & CEO OF KIDZ MEDICAL SERVICES The Best Physician Executives Still See Patients. Here's Why.

There's no doubt that administrative responsibilities have become overwhelming. Administrative expenditures at U.S. hospitals grew 87.2 percent from 2011 to 2023, outpacing the 75.4 percent growth in direct patient care spending.

As regulatory and compliance demands continue to rise, healthcare systems, hospitals, and physician practices increasingly rely on physicians to step into administrative roles. While there is an obvious tendency for the C-suite to gravitate toward physician leaders with the highest level of clinical credibility, these doctors are often very busy seeing patients, making it difficult to balance the two important roles.

While it makes sense for physician leaders to dedicate significant time to administrative tasks, withdrawing from patient care can have adverse effects. Keeping medical staff privileges, for example, requires a certain level of patient-facing volume. The loss of clinical privileges does not go unnoticed, and let's face it, courtesy privi-

Continued on page 25



Wayne Brackin



Dr. Raul Couret

Dr. Raul Couret Earns MHA to Strengthen His Practice and Leadership Skills

BY LOIS THOMSON

"I have always wanted to be a physician, but over time, doctors have had to become business-oriented to survive." With that realization, Dr. Raul Couret decided to earn his Executive Master of Health Administration (MHA) from Florida Atlantic University. He continued, "As physicians, we don't just use our stethoscopes today, we probably use our mouse more than a stethoscope because there's so much documentation, so much that goes into what we do."

Couret is the managing partner of Cumberland Family Practice in Hendersonville, TN. The practice provides full-service family medicine, but Couret focuses mostly on geriatrics; he said he was recruited by the physician who previously ran the practice, and who was looking for a junior partner with experience in geriatric work and Couret's level of capability. In addition to his private clinic at Cumberland, Couret is the medical director of two long-term care facilities and a hospice agency.

Despite currently living in Nashville with his wife of 20 years and two teenage children, Couret chose to get his MHA from FAU: "I was born in Chicago but was raised and grew up in Miami, in the

Continued on page 20

Real Estate, Construction, Design

Baptist Health Breaks Ground on Future-Ready Sunrise Hospital to Expand Access in Western Broward

BY DANIEL CASCIATO

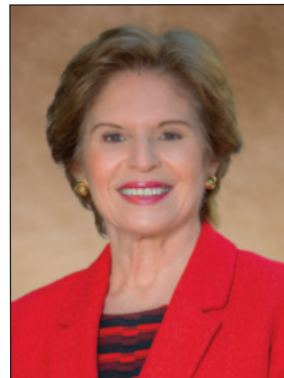
As cranes prepare to rise over western Broward County, Baptist Health is laying the foundation for what leaders call a transformative investment in access, technology and long-term community health.

With the recent groundbreaking of Baptist Health Sunrise Hospital, the region's largest healthcare organization is marking a milestone: its first hospital in Broward County. The planned seven-story, 340,000-square-foot facility, located at 12401 W. Oakland Park Blvd. in Sunrise, is expected to open to patients in 2029.

For Ana Lopez-Blazquez, Executive Vice President and Chief Strategy Officer, Chief Executive Officer of Baptist Health Enterprises, the decision is rooted in both growth and responsibility.

"The decision to build Baptist Health Sunrise Hospital was guided by community need and long-term planning," Lopez-Blazquez says. "Sunrise and West Broward County have grown significantly, yet access to hospital-based care has remained limited, requiring many residents to travel outside their community for emergency and inpatient services."

Baptist Health has steadily built its footprint in Broward County through outpatient cen-



Ana Lopez-Blazquez

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How Will Your Malpractice Carrier Fight For You?

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

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

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

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

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

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Publisher's Note

March is a month of renewal. Spring begins to wake up, pollen begins its annual invasion of South Florida sinuses, and many of us start promising ourselves that this is the year we'll finally stay on top of our health. It also happens to be the perfect time to salute the physicians who make it possible for all of us to keep moving forward—whether we follow their advice immediately...or eventually.

Doctors hold a unique position in our lives. They are part scientist, part detective, part counselor, and occasionally part mind reader. In fact, there's a persistent rumor circulating in hospital corridors that physicians possess a sixth sense. Supposedly, they can detect the exact moment a patient says, "I feel fine, I don't need an annual checkup this year." According to the rumor, alarms sound, charts mysteriously glow, and somewhere a physician simply sighs and says, "I'll see them in six months."

There's also an unconfirmed report that doctors keep a secret scoreboard tracking how many patients say, "I should have listened to you last year." While no one has officially confirmed this, many physicians will smile knowingly when they hear it.

Humor aside, doctors know something we all need to remember: preventive care works. The patients who see their doctors regularly often avoid the more serious problems that come from waiting too long. Annual checkups allow physicians to monitor blood pressure, detect early signs of disease, evaluate overall health, and address concerns before they become larger issues.

Good health requires attention at every stage of life. Young adults may feel invincible, but routine exams can catch silent conditions early. Middle-aged adults benefit from screenings that help prevent long-term complications. Older adults rely on consistent medical oversight to maintain both longevity and quality of life. The common thread across all ages is simple—regular visits matter.

Far too often, people postpone appointments because they feel fine. But feeling fine and being healthy are not always the same thing. Many serious conditions develop quietly, without obvious symptoms. Your doctor's office is not just a place to go when something is wrong—it's where you go to keep things right.

This month, we proudly salute the doctors who dedicate their lives to caring for others. Their commitment, expertise, and patience make a difference every single day. They show up, they listen, and they guide patients toward healthier lives.

And while the rumors about their secret radar may or may not be true, one thing is certain: they would much rather see you for a routine annual checkup than for something that could have been prevented.

Your health is your greatest asset. Protect it. Schedule that appointment. Your doctor—and your future self—will be glad you did.

Charles Felix



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VITAS® Healthcare and Miami Dade College Name Spring LPN Scholarship Recipients

Florida hospice provider VITAS Healthcare, in partnership with Miami Dade College (MDC), recognized two Spring 2025 nursing scholarship recipients during a special ceremony on January 22nd, celebrating both second-career professionals entering the nursing field.

The scholarship recipients, former police officer Yvonne Linen Garcia and former schoolteacher Todra Norris, are pursuing nursing careers inspired by personal experiences with caregiving and end-of-life care. Both were selected by VITAS through the Miami Dade College LPN Scholarship, which supports students committed to compassionate, patient-centered care.

"Working with dying patients is not about repair work; it is about honoring someone, relieving suffering and finding space for meaning, memory and peace," said Garcia, reflecting on her calling to hospice nursing.

Norris shared a similar motivation, stating, "What draws me to this field is the chance to bring comfort and peace to patients and families during a time when kindness truly makes a difference."

The VITAS-funded Miami Dade College LPN Scholarship is designed to remove financial barriers to nursing education while helping address the growing national demand for nurses. Students pursuing a licensed practical nursing degree at MDC apply by submitting a hospice-related short essay and committing to two years of employment with VITAS.

By supporting second-career students, the program strengthens the healthcare workforce with individuals who bring life experience, empathy and a strong sense of purpose to patient care.

The partnership between MDC and VITAS Healthcare spans nearly five decades and reflects a shared investment in the future of healthcare professionals. Together, the organizations aim to build a diverse pipeline of nurses equipped with both



Ava Padmore-Lewis, Senior Vice President and Chief Human Resources Officer, VITAS; Todra Norris; Yvonne Linen Garcia; and Yamile Zayas, Director of Workforce Development and Training, VITAS Healthcare

clinical expertise and the compassion required to care for patients and families, particularly in hospice and end-of-life settings.

The ceremony highlighted the importance of collaboration between academic institutions and healthcare providers in preparing nurses to meet the evolving needs of South Florida's communities.

For more information about the Miami Dade College LPN Scholarship or a fulfilling career in end-of-life care, visit VITAS.com.



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Practice Management

Medical Group Management Involves Recruiting Top Talent to Meet Evolving Needs of Community

When I accepted the role of President of Holy Cross Medical Group nearly 18 months ago, there were about 170 employed physicians. Since then, the Executive Leadership Team and I have been laser focused on recruiting top doctors that fit the Holy Cross Mission of providing compassionate care in the spirit of the gospel. These efforts have resulted in 20% growth of our Medical Group, with the addition of new physicians, APPs, PAs and CRNAs.



BY MAGGY PEREZ-DICKENS, MBA, CMPE

Holy Cross Medical Group is now nearly 200 physicians strong with primary care doctors working in tandem with a wide range of specialists in the referral network, creating a multi-disciplinary team with open lines of communication to discuss patient care. With our new ambulatory sites opening soon in Deerfield Beach and Sunrise, we are addressing population growth, demographics and needs of our community. We're also expanding our service lines with the addition of dermatology and ear, nose and throat and actively recruiting distinguished physicians to develop these practices.

Retention of our exceptional physicians is extremely important to us because it allows our patients to build long-term relationships with their care team. What health care professionals will find at Holy Cross Health is transparency and trust. Here they can follow patients through the entire spectrum of care.

Following a long, comprehensive recruitment process to find the top cardiothoracic surgeons, the esteemed Kushagra Katariya, MD, FACS and Marc Gibber, MD joined Holy Cross Health in

late 2025 when we relaunched our cardiothoracic surgery program. We continue to attract exceptional clinical leaders, most recently welcoming Lawrence Ward, MD, MPH, MACP, as our Medical Group's new Chief Medical Officer.

The future is so bright at Holy Cross Health, a member of Trinity Health. Our new president and CEO Pierre Monice, FACHE is very involved in the day-to-day operations and always accessible to our physicians and the Medical Group team.

Our patients also benefit from our use of Epic Systems Corporation's electronic health record, MyChart, that enables our physicians to seamlessly access the records of patients who have been treated at any Trinity Health location in the country. This is especially helpful for our patients who are snowbirds and routinely visit doctors and hospitals in other states.

Holy Cross Medical Group's modern facilities, cutting-edge technology and state-of-the-art equipment are undoubtedly helping us recruit top talent and make us the provider of choice for our community.

For more than 70 years, Holy Cross Health has been a vital lifeline to our community, providing the highest quality of compassionate care to our patients. I want our patients to feel like they are coming home and our goal every day is to provide a consistent standard of care experience across all our Medical Group locations.

Maggy Perez-Dickens is the President of Holy Cross Medical Group.

One Profession, One Voice: Strengthening BCMA through Membership and Engagement

It is with gratitude and great enthusiasm that I write my first monthly editorial as President of the Broward County Medical Association (BCMA). I am honored to serve our physician community at a time when medicine is evolving rapidly, and when the collective voice of physicians has never been more important.



BY CHRISTOPHER CHANG, MD

For a century, BCMA has stood as a trusted advocate for physicians and patients alike. Our mission remains clear: to promote the integrity of patient care and public health and to enhance the professional interests of physicians in Broward County. As I begin my term, I do so with a strong commitment to listening, collaboration, and action.

Today's healthcare environment presents unprecedented challenges. Physicians are navigating administrative burdens, workforce shortages, reimbursement pressures, and increasing regulatory complexity, while continuing to deliver compassionate, evidence-based care. These realities demand thoughtful leadership and a united profession. At BCMA, we are focused on strengthening advocacy efforts, expanding educational opportunities, and fostering connection among our members so that every physician has a seat at the table.

Advocacy will be a central pillar of my presidency. BCMA will continue to champion issues that directly affect patient access and physician autonomy, from prior authorization reform and fair reimbursement to scope-of-practice concerns and corporate medicine. We will work closely with state and local partners to ensure that policymakers understand the real-world impact of their decisions on both physicians and the communities we serve.

Equally important is the future relevance of medical associations. In an increasingly fragmented healthcare land-

scape, organizations like BCMA provide something essential: a unified voice, trusted representation, and a professional home for physicians. Membership is not simply about receiving benefits, it is about belonging to a collective that shapes policy, protects the practice of medicine, and advances our shared values.

Growing BCMA's membership is one of my primary goals this year. A stronger Association means a stronger

voice. Engagement whether through attending events, participating in committees, mentoring younger colleagues, or advocating alongside us amplifies our impact. When physicians come together, we are far more effective in addressing challenges and influencing meaningful change. I encourage every physician in Broward County to get involved and help continue building the future of our Association.

Education and connection will also remain priorities. Through CME programs, networking opportunities, and leadership development, BCMA aims to support physicians at every stage of their careers, from residents and early-career doctors to seasoned practitioners. We are especially committed to cultivating the next generation of physician leaders who will carry forward our profession's values.

To our partners and readers at *South Florida Hospital News and Healthcare Report*, thank you for providing a platform to highlight the work of physicians across our region. I look forward to using this space each month to share updates, celebrate achievements, and address the issues that matter most to our medical community.

Together, let us move forward with purpose, supporting one another, strengthening our collective voice, and advancing the profession we are proud to serve.

Dr. Christopher Chang is President, Broward County Medical Association.



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Epic Gold Stars: A Roadmap to EHR Excellence and AI-Enabled Healthcare

Understanding Epic's Gold Stars Program

Epic's Gold Stars program is a continuous improvement initiative designed to help organizations assess how effectively they have configured and are using Epic's features. It spans key focus areas such as patient access, quality, population health, financial tools, and provider productivity. Organizations receive a 1-10 score based on system configuration and, increasingly, real-world utilization, a shift designed to drive better clinical, operational, and financial outcomes from existing Epic capabilities.



BY SABINA KOTELNIK

delivery process. For example, streamlined billing workflows and tools like automated denial management can boost revenue and cut labor costs, while patient engagement features improve satisfaction and provider productivity.

In addition, higher Gold Star levels are often associated with improvements in quality metrics, such as a decrease in hospital-acquired conditions and a reduction in length of stay. These improvements not only enhance patient outcomes but also contribute to the overall efficiency and effectiveness of the healthcare organization.

organization to adopt emerging technologies and AI.

- **Implementation:** We help execute the strategic plan with precision and attention to detail, supported by robust change management to drive adoption.

- **Measure Success:** We evaluate the impact of the changes on set metrics to track improvements (e.g., clinic throughput, documentation time, revenue cycle KPIs).

- **Sustainability:** Our professionals establish governance and training frameworks for continuous improvement to maintain momentum and adapt to industry changes in a measured, intentional manner.

Lay the Foundation for AI and Future Innovation

By approaching Gold Stars optimization in stages, organizations can achieve the early wins that secure executive buy-in while building the foundation needed for more complex initiatives. Features that streamline communication (secure messaging, in-basket automation), documentation (Ambient Listening, SmartTools), and care coordination (personalized decision support, population health dashboards) all contribute to a more efficient, patient-centered operation.

As AI becomes more prevalent in healthcare, Gold Stars optimization helps with workflow efficiency and prioritizes complete, high-quality data — conditions essential for success with emerging tech-

nologies. Organizations that rush to layer AI tools on top of poorly utilized electronic health records (EHR) systems often add complexity without meaningful benefit. By climbing the Gold Stars ladder now, healthcare providers build the processes, governance, and user engagement needed to make future innovations feasible and effective.

A well-structured Gold Stars initiative can do more than enhance Epic; it can create alignment across executive, clinical, and operational teams that allows your healthcare organization to deliver better care. EHR optimization is not just an IT project — it requires collaboration among leadership, clinicians, and operational departments to enhance satisfaction and achieve financial sustainability. BDO uses Gold Stars as a framework to unite these stakeholders around a common language and objective measures, fostering strong governance and a culture of continuous improvement.

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

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Gold Stars Matter for Clinical Outcomes, Operational Efficiency, and Financial ROI

Gold Stars are more than recognition; they link measurable improvements in care delivery to business performance. Beginning in 2025, scoring places greater emphasis on adoption and meaningful usage so that clinicians, staff, and patients can engage with Epic tools more efficiently. Health systems that haven't prioritized adoption may see scores drop under the new rules, potentially affecting Honor Roll status and related incentives.

A fully utilized Epic system can reduce cost and increase revenue capture, all while facilitating a smoother healthcare

BDO's Five-Step Approach to Gold Stars Optimization

BDO helps organizations meet these evolving expectations with a five-step approach that utilizes existing investments and prioritizes improvements based on impact and ROI:

- **Discovery:** Our team conducts a thorough review of your Epic and Epic+ environment, workflows, and pain points to identify underutilized functionality, unnecessary complexity, and superfluous software.

- **Strategic Planning:** We create a roadmap that addresses immediate workflow improvements and position your

Palliative and Hospice Care Makes End-of-Life Transition Easier for Patients, Families

BY VANESSA ORR

While bedside healthcare is geared toward helping patients, palliative and hospice professionals who care for people with life-limiting illness have a different focus than traditional providers. Their goal is no longer to heal or cure the patient, but to make the person's remaining days as comfortable and pain-free as possible and to ease the transition to come.

"Generally speaking, one of the things that sets us apart is being comfortable with what most people find uncomfortable, including suffering and pain," said VITAS Healthcare Associate Medical Director Angelica Torres Morales, MD, FACP, HMDC. "Most clinicians are trained to try to cure patients and are rarely comfortable with the natural process of death. While everyone goes into healthcare wanting to help people, hospice and palliative medical professionals try to help in a different, more comprehensive and compassionate way."

Dr. Torres Morales, who first trained in internal medicine, was drawn to help-



Dr. Angelica Torres Morales

ing patients and families during one of the most difficult times in their lives. "I originally planned on a career in genetic research and didn't expect to have contact with patients at all until I realized that what I enjoyed most was being at bedside, hearing their stories and doing my best to help them," she said.

"In my second year of residency, I treated a patient who had spent a prolonged time in the hospital," she added. "She told me, 'Whatever you do in the future, do it so that your patients don't suffer as much as I suffered.' That helped fuel me to become a patient advocate."

Palliative care is focused on relieving symptoms, pain and stress for people living with serious illnesses, such as cancer, heart disease or dementia. It can be provided alongside curative or disease-modifying treatment, such as chemotherapy, to help with symptom management and treatment side effects. Palliative care professionals also assist families in navigating complex medical decisions.

"Families are a big part of our plan,"

said Dr. Torres Morales. "Not only are they very supportive of the patient, but many times we depend on them to execute the plan of care."

"Oftentimes, patients may not be very conscious of their circumstances, but families are there 24/7," she added. "We want to try to ameliorate their struggle in the best possible way with our team of social workers, traveling nurses, physicians and more. It takes a village to take care of these patients."

According to Dr. Torres Morales, there are many misconceptions about palliative and hospice care, including the fallacy that this care is provided with the intention to expedite death. There is also a lot of confusion around morphine and other medications, and end-of-life nutrition.

"These medications are potent and effective to treat symptoms, but we get a lot of resistance from patients' families about using them," said Dr. Torres Morales. "People also misunderstand that at the end of life, people lose their appetite and ability to eat, but that does not imply suffering. Feeding them can actually cause discomfort."

While helping people through the end-of-life journey can be heart-wrenching, Dr. Torres Morales said that she wakes up every day being grateful that

she can help patients and their families. "I'm honored to be able to hold their hands through at least part of the journey, not only by taking care of symptoms but by providing psychosocial support," she said.

She added that she wished that families who have had positive experiences with hospice and palliative care would share their stories with the world as a way to encourage other people who would benefit from this type of care.

"People are scared or have misconceptions or false narratives around end-of-life care, so who better to be our PR than someone who went through the experience," she said.

She also wishes that more clinicians would be open to referring patients to hospice and palliative care earlier, so that these patients could experience less suffering and fewer symptoms as they transition to end-of-life.

"Referring patients to us is not a synonym of giving up or failure," she said. "Everyone unfortunately, will have to go through end-of-life, and palliative care is much needed in this world."

Learn more about hospice eligibility and refer patients at [VITAS.com/Refer](https://www.vitas.com/Refer) or call 800-93-VITAS, available 24/7/365.

E-mail Your Editorial Submissions to editorial@southfloridahospitalnews.com

Tampa General Helps Close Organ Transplant Gap on Florida's East Coast

According to the Health Resources and Services Administration (HRSA), more than 100,000 people are currently waiting for organ transplants in the United States, and more than 5,000 of those people live in Florida. Tampa General Hospital, one of Florida's leading academic health systems, is helping to close the organ transplant gap, especially in Palm Beach County and on the Treasure Coast. Residents in these regions primarily access organ transplant services in neighboring counties such as Broward and Miami-Dade.



Dr. Kiran Dhanireddy

With Tampa General's growing expansion on Florida's East Coast, residents can more easily receive access to the academic health system's TGH Transplant Institute, which provides top transplant care using the most current leading-edge technology and procedures. Tampa General currently ranks No. 5 in the nation for transplants by volume* and is one of only a few dozen hospitals in the U.S. to have performed more than 15,000 transplant surgeries.

As a national leader in advanced organ disease treatment and transplant surgery, Tampa General drives innovation to provide world-class health care to patients before, during and after transplant surgery. Tampa General is the only hospital

in West Central Florida to offer all five organ transplants for adult patients. These include heart, lung, liver (living and deceased donor), kidney (living and deceased donor) and pancreas transplants, as well as pediatric kidney transplants. As a high-volume, comprehensive transplant center, Tampa General is also a premier destination for multi-organ transplant

procedures.

Historically, Tampa General has some of the most efficient transplant wait times in the country and in Florida, according to the Scientific Registry of Transplant Recipients. Along with ensuring that patients receive proper care, Tampa General was the first hospital in Florida to use Organ Care System (OCS™) technology. This organ perfusion technology allows donor organs to function outside the body in a machine that provides the organs with a continuous supply of oxygen and nutrients.

This cutting-edge approach not only preserves organs for longer periods but also enables medical teams to assess and improve organ function. In many cases, perfusion technology also allows Tampa General to rehabilitate organs that otherwise would not have been viable for trans-

plantation. By leveraging this innovation, the hospital can expand access to a wider geographical area to retrieve more lifesaving organs and take on some of the most complex cases.

In 2025, 72% of organs transplanted by Tampa General used perfusion or advanced preservation methods. As a result, Tampa General has enhanced transplant outcomes, making it possible to save more lives.

"Perfusion has enabled us to innovate throughout all our solid organ programs. We're now recognized as international thought leaders in liver normothermic machine perfusion," said Dr. Kiran Dhanireddy, vice president and chief of the TGH Transplant Institute and surgical director of comprehensive liver disease. "This technology allows us to bring lifesaving liver transplants to patients who otherwise would suffer from their disease while waiting for an available organ."

TGH Transplant Institute 2025 statistics

- TGH Transplant Institute is currently the No. 5 transplant center in the nation by volume*
- Ranked No. 2 kidney transplant program in the nation, with 519 kidney transplants
- Ranked No. 4 liver transplant program in the nation, with 284 liver transplants
- Ranked No. 32 for heart transplants

and No. 37 for lung transplants

- Living Donor Transplants: 123 kidneys; 12 livers
- In 2025, Tampa General performed more than 895 transplants, breaking its records in both liver and kidney transplants. More transplants equal more lives saved.

Access to complex care on Florida's East Coast

Since 2020, Tampa General has partnered with physician-led practices to connect patients with health care in the Palm Beaches and on the Treasure Coast, including research, complex therapies and procedures, clinical trials, and advanced immunotherapy. If patients need complex, specialized surgery in Tampa, such as a transplant, these practices will support patients' presurgical and postsurgical care. A nurse navigator with specialized expertise works directly with patients to coordinate all aspects of their care.

Currently, Tampa General's East Coast practices include approximately 21 clinics with more than 90 providers in 13 specialties.

For more information about the TGH Transplant Institute, visit TGH.org/Institutes-and-Services/Transplant-Institute.

*Organ Procurement and Transplantation Network

The Myth That Heart Failure Is "Treatable" Until the End: How Hospice Bridges the Gap in Advanced Cardiac Care

Heart failure is often described as a chronic, manageable condition. For many years of the disease course, this statement may be true. But in advanced stages, this misconception can unintentionally delay essential comfort-focused care, prolong hospitalizations and place heavy burdens on patients and families.

From a clinical standpoint, end-stage heart failure tends to follow an unpredictable trajectory marked by recurring cycles of decline and temporary recovery, making timely referral to hospice far more complex than with other illnesses.

Despite heart disease remaining the leading cause of death in the United States, heart failure is still significantly underrepresented in hospice care, with studies suggesting that only about one in 10 patients with advanced heart failure are ever referred.

The result is that many patients gain access to hospice only in their final days, missing opportunities for the full scope of comfort, stabilization, and support that hospice can provide.

Why Prognostication Is So Difficult in Advanced Heart Failure

Heart failure behaves differently from other terminal illnesses. Unlike diseases with clearly defined stages, such as cancer, or predictable levels of decline, such as Alzheimer's and other dementias,



BY ILEANA LEYVA, MD, FAAHPM

heart failure lacks a linear, measurable progression of making accurate prognostication far more challenging for clinicians.

Patients often experience rapid fluid shifts, sudden dyspnea, angina and recurring inpatient stays. Many cycle through a pattern of crisis, treatment and partial rebound that masks disease severity.

The "treatable until the end" myth is reinforced by these temporary improvements, even as the overall trajectory continues downward.

Optimal treatment may already have been provided, and patients may no longer be candidates for advanced medical or surgical interventions. When symptoms (fatigue, dyspnea at rest, weakness or recurrent chest pain) persist despite maximal therapy, this often signals a transition into the terminal stage.

Yet cardiologists and hospital teams may hesitate to initiate hospice conversations because heart failure's unpredictable pattern makes timing difficult. This is where hospice, and especially a cardiac-informed hospice model, can make the greatest difference.

How Hospice Supports Patients With Advanced Cardiac Disease

Hospice does not require abandoning cardiac therapies. In fact, continued medications such as ACE inhibitors, beta-blockers, vasodilators and diuretics can remain integral to comfort-focused cardiac end-of-life care. Many patients

and families are relieved to learn that hospice does not mean discontinuing symptom-improving treatments.

VITAS Healthcare also provides complex cardiac-focused modalities that support symptom stability, including:

- High-flow oxygen therapy
- IV/subcutaneous diuretics
- Oversight and support for patients with ICDs and VADs

These services are delivered wherever the patient calls home and private residences, assisted living communities, nursing facilities or inpatient hospice centers.

The VITAS model of care includes 24/7 clinical support, interdisciplinary visits and tailored emotional and psychosocial support for both patients and caregivers.

Setting a National Standard for Cardiac Hospice Care

VITAS has earned the American Heart Association (AHA) Palliative/Hospice Heart Failure certification across all 15 states in which it operates. VITAS extends AHA-certified, guideline-directed therapy across the care continuum, addressing the clinical, emotional and psychosocial needs of patients with advanced cardiac disease and their families. This certification affirms that VITAS follows evidence-based, guideline-directed cardiac care standards throughout the entire hospice journey.

For hospital teams, cardiologists and inpatient clinicians, this certification offers confidence that hospice care can seamlessly support goals of comfort while continuing therapies that enhance quality of life.

A Clinical Snapshot: When Earlier Hospice Makes the Difference

Take, for example, a composite case drawn from common scenarios across VITAS service areas: A 79-year-old patient with NYHA Class IV heart failure experiences weekly dyspnea episodes and multiple emergency department visits for fluid overload. Despite maximal therapy, she becomes increasingly fatigued, sleeping upright to breathe comfortably. After one more hospitalization, her care team discusses hospice.

Under VITAS, she receives home-based IV diuretics, high-flow oxygen and interdisciplinary support. The frequency of acute episodes decreases, and she remains at home comfortably, safely and surrounded by family.

This is what timely hospice involvement can provide.

A Call to Action for Healthcare Professionals

Hospice is not the end of treatment; it is the continuation of expert care when cure is no longer the goal. With advanced cardiac disease, earlier involvement opens the door to symptom relief, fewer hospitalizations, enhanced emotional support and dignity throughout the final stage of life.

Refer hospice-eligible patients to the compassionate care they deserve: Download the VITAS Healthcare mobile app, visit VITAS.com/Refer or call 800.93.VITAS.

Dr. Ileana Leyva is a regional medical director for VITAS Healthcare. Learn more about end-of-life care at VITAS.com.

ACHE of South Florida Member Spotlight: Michelle Marsh

BY LOIS THOMSON

Michelle Marsh has been a member of The American College of Healthcare Executives (ACHE) for many years, joining as a student while studying at Penn State for a B.S. in Health Policy and Administration. Her student member involvement continued into her graduate program at George Washington University, where she received a Master of Health Services Administration. There, she met a group of student colleagues and friends that were involved with ACHE and one of them had taken a healthcare career path to South Florida.

As Marsh weathered the cold winter months in the northeast, she was convinced that Florida sounded like a perfect plan to start her professional career. Marsh recalled, "My husband and I were newlyweds and decided to take a leap and leave our hometown area and move down to South Florida. Being a student member of ACHE gave me the connection and segue to land a great job in healthcare." She initially worked for Broward Health as an analyst in the



Michelle Marsh

Strategic Planning Department, where her director was the president of an affiliated organization of ACHE known as the South Florida Healthcare Executive Forum (SFHEF). That was 26 years ago.

Marsh, who has worked mainly in hospital and healthcare system strategic planning for more than 25 years, said,

"Throughout my experience working in healthcare systems, such as Broward Health and HCA, I have gained a diverse knowledge base in the development of hospital strategic and business growth plans, physician business development, and strategic marketing, while managing the ever-changing healthcare landscape."

After doing that type of work for different companies, Marsh decided to step out on her own. She started her own consulting company, Forma Advisors – doing the same type of work she had been doing in-house, but taking it out-of-house. She acknowledged that being a long-standing member of ACHE "really opened doors from networking, attending events, making connections, and partici-

pating in educational programs regularly."

As founder and president of Forma Advisors, she supports organizations and companies throughout the nation – whether healthcare related, for profit, not-for-profit, foundations, hospitals, systems, healthcare developers, senior care companies – creating the best strategies to build their business growth models in the market. "It all comes back to strategic planning. It simply is defined into three core areas: where are we now, where do we want to be, and how do we get there. Those are the three basic questions, and they provide the fundamentals of overall strategic planning for anyone."

Owning her company has provided a deeper understanding of ultimate responsibility. "When you're on your own, you not only need to have a comfort level in your skill sets, but you also need to amp up connections, network, create new relationships, manage current relationships, all while running your own business," Marsh stated.

Marsh became a board member of SFHEF in 1999 and has been on the board of directors for 26 years since then in various capacities. (SFHEF became the official South Florida Chapter of ACHE about a decade ago.) She currently Chairs the Networking Committee and "makes sure

ACHE of SFL provides meaningful opportunities for all members to connect and network at various venues and locations throughout South Florida." The events run the gamut from a typical happy hour with a speed networking component, to bowling or to a Florida Panthers game.

"These events are where professionals, students, members, and guests can feel relaxed and have an opportunity to talk to a board member or an executive or a colleague, without pressure. It's a chance to meet people they wouldn't have typically during work." Marsh said she likes to come up with unique ideas to make things fun and a little different.

She continued by saying she always promotes the organization to students, undergrads/grads, full-time students or part-time students. "It's extremely helpful for networking, growing your career, or even just knowledge. I made some great connections, and to this day I attribute some of my growth and my career path to being a member, a board member, and being involved."

For more information about Forma Advisors or to contact Michelle Marsh, visit www.formaadvisors.com or email michelle@formaadvisors.com.

Protect Health Care Access in the State Budget

Budgets are about priorities. That is true whether it's a household budget, a corporate budget, or a government budget.

Families have to decide where and how much to allocate paychecks for obligations for housing, transportation, shelter, food, and other essential needs.

Companies have to make allocation decisions based on current obligations and future growth goals. States have to make choices based on immediate priorities and needs and maintain adequate reserves for future financial challenges. And the budget must balance. What is allocated as spending must be offset with revenue. That requires prioritization.

Lawmakers are working to finalize Florida's budget for fiscal year 2026-27. As one of the fastest growing states in the country – attractive to families, companies, retirees, and visitors alike – Florida is in an enviable position. Florida ranks first in the nation in education, net in-migration, entrepreneurship, and new business formations, with 3.8 million new businesses created since 2019.

Key to that continued growth and success is protecting health care programs, including Medicaid, from funding cuts, and crucially, so is investing in the health care infrastructure to meet future needs.

The initial budget proposals from the House and Senate reflect overall appropriation increases over the current year's budget for health and human services functions – 3.8 percent in the House ver-



BY MARY C. MAYHEW

sion and 3.3 percent in the Senate version. That is good news.

What is concerning, however, is the Senate's initial proposal which seems to single out hospitals for a 3 percent cut to base Medicaid reimbursements. At the time of this writing, the proposal includes a payment cut of nearly \$90 million to Florida's hospitals.

This proposal comes at a time when hospitals have experienced nearly 30 percent increases in major cost areas, such as labor, prescription drugs, and medical supplies over the last few years, and have had Medicaid inpatient base rates increased by just 4 percent over the last 10 years.

State government is a purchaser of health care services. The state of Florida provides health care coverage to frail, low-income elderly, more than 2 million children, individuals with intellectual and developmental disabilities, and extremely low-income parents. For far too long it has become accepted practice by government payers to reimburse health care services well below the cost of care. In Florida, hospitals are reimbursed on average 60 cents on the dollar of cost. Hospitals are expected to figure out how to fill that gap without sacrificing quality or access.

I doubt we would feel confident about our bridges, highway overpasses, and other essential infrastructure if the government paid construction companies well below the cost of safe construction.

In addition, these cuts to reimburse-

ments for hospital care and the failure to cover annual cost increases in labor and other essential expenditures exacerbate the healthcare affordability crisis for everyone paying for private insurance and every employer purchasing health insurance coverage for their employees.

Prioritizing health care funding in the budget is not about prioritizing buildings or facilities. It is about prioritizing a health care infrastructure that is always ready, always available, and always capable of responding to any emergency or crisis, whether it involves one person or many. It is about prioritizing timely access to care, from the most routine of primary and preventive care to the most specialized of complex care, for every Floridian. And, it

is about prioritizing a health care workforce with the diverse range of skills and expertise that modern medicine demands.

A budget, whether for a household or a government, reflects choices and priorities. Florida's hospitals, the tens of thousands of individuals who give meaning to hospitals' work, and the more than 24.3 million Floridians who call the Sunshine State home are relying on state lawmakers to choose to prioritize health care by rejecting funding cuts and investing strategically and prudently for long-term success.

Mary Mayhew is President and CEO, Florida Hospital Association.



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In Tallahassee and Beyond: Protecting the Identity of Physicians

As we move past the midpoint of the 2026 Florida Legislative Session in Florida, healthcare remains at the center of policy debates shaping our profession and our patients' lives. From scope-of-practice proposals and reimbursement reforms to prior authorization requirements and workforce development initiatives, lawmakers are considering bills that will influence how care is delivered across our state for years to come.

Amid these complex and often technical discussions, an issue has emerged that may seem, at first glance, semantic, but is in fact profoundly ethical: what we call ourselves.

A recently published policy paper in the American College of Physicians' Annals of Internal Medicine, titled "Physicians Are Not Providers: The Ethical Significance of Names in Health Care", urges the medical community and policymakers alike to reconsider the widespread use of the term "provider" to describe physicians. The paper argues that language is not neutral. Words shape identity, influence public perception, and can either strengthen or erode the ethical foundations of our profession.

For decades, physicians have witnessed the steady corporatization and commercialization of healthcare. As employment models have shifted and the "medical-industrial complex" has expanded, many of us have felt an erosion of professional autonomy or what some have termed "deprofessionalization." The adoption of the term "provider" is not separate from this trend; it is a symptom of it.

The word "provider" originated in federal statutes such as Medicare and Medicaid in 1965, referring broadly to "any provider of services." Over time, it has come to encompass hospitals, insurers, and individual clinicians alike. But in doing so, it blurs critical distinctions. It equates the physician whose years of rigorous training, ethical obligations, and fiduciary duties are unique with institutions and commercial entities whose primary drivers may not always align with patient-centered values.

Medicine is not a commodity, and the patient-physician relationship is not a transaction.

The ACP paper reminds us that the



BY ADRIANA
BONANSEA-FRANCES,
MD

word "patient" derives from the Latin *patiens*, one who suffers. "Physician" and "doctor" are rooted in traditions of teaching, healing, and service. These words reflect a relationship grounded in trust, compassion, and ethical responsibility. A physician is bound by duties of beneficence, nonmaleficence, respect for autonomy, and justice. We are accountable not to shareholders, but to the public and to the patients

who entrust us with their most vulnerable moments.

When physicians are labeled as "providers," we risk diminishing that covenant. The term suggests a commercial exchange rather than a moral commitment. It obscures differences in training and expertise among members of the healthcare team and may confuse patients who deserve transparency about who is caring for them. Perhaps most concerning, language influences self-perception. When we internalize transactional terminology, we may gradually accept a model of care that prioritizes productivity metrics over professional judgment.

During this Legislative Session, as bills are debated and amended, we must remember that policy and language are intertwined. How statutes define us matters. How contracts describe us matters. How we describe ourselves matters.

At the Miami-Dade County Medical Association, we believe that advocacy is not only about reimbursement rates or regulatory reform, but also about preserving the integrity of our profession. We must ensure that legislation reflects respect for the physician's role and protects the ethical framework that underpins patient care.

Now more than ever, physicians must be engaged. A united voice carries weight in Tallahassee and here at home in Miami-Dade County. I encourage every physician who is not yet a member to join the Miami-Dade County Medical Association. Through collective advocacy, we can defend our professional identity, safeguard our patients, and reaffirm that we are not merely providers, we are physicians.

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

Chronic Housing Issues Affecting Staff Recruitment and Retention

BY VANESSA ORR

Recruiting and retaining a talented healthcare workforce is difficult, especially in areas where accessible, affordable housing is in high demand. This is especially true in South Florida, where health systems sometimes struggle to attract top talent.

"It's been a chronic issue for a significant time," noted Wayne Brackin, President & CEO of KIDZ Medical Services. "The real estate world in Florida, and probably South Florida in particular, goes through boom-and-bust cycles. If you hit a period of nursing or physician shortages during a boom period, you have the double whammy of trying to recruit people who are in high demand and trying to move them into an area that frequently has a much higher cost for housing."

Since the pandemic, people migrating from other parts of the country—especially those in the finance sector—have consumed much of the housing, apartment, and condominium supply.

"People moving from New York or San Francisco found (at the time) that the cost of housing was less expensive for them, which started to drive up the price of real estate in general," said Brackin. "Year to year, we've seen significant increases in the cost of South Florida homes, which has always been an issue to a certain degree, but it's two to three times worse now."

While those who can afford such homes are buying them, those in lower-income brackets are struggling to find affordable housing, especially if they do not qualify for subsidies. Between 2019 and 2024, for example, rent across Florida increased 39 percent.

"We've ended up with this dichotomy where the billionaire class or those who work for them can pay eye-watering prices for homes, while the more disadvantaged part of the market may be able to take advantage of subsidies to find housing," said Brackin. "The problem is the 'missing middle'—typically nurses, technicians, police, firefighters, teachers—those who are vital to the functioning of society. Their income levels are too high to qualify for subsidies but too low to afford these wildly inflated prices."

Finding a Middle Ground

While housing was once discussed toward the end of the recruiting process, it is now top of mind for both potential candidates and recruiters. When prospects compare the cost of where they are currently living with what it will cost to live in South Florida, many experience sticker shock; as a result, the recruitment fails.

"For the last couple of years, we've



Wayne Brackin

engaged in that part of the discussion early on so that everyone is on the same page with costs of housing," said Brackin. "While it's inverted the process a bit, when you don't do that, you are at high risk of losing the recruit."

Some long-term employees are also leaving the workforce due to the high cost of housing and the windfall proceeds they can

pocket when selling their homes in such a hot market.

"It's a curious phenomenon; I've seen people who have lived and worked in Miami for 20 years decide to sell their homes and cash in and move to lower-cost parts of the state or country because their homes have appreciated to such an extraordinary degree," said Brackin. "These were not people at the end of their careers, so their moving has had a deleterious effect on retention."

Even those willing to move further from their jobs are facing problems, as long commutes affect quality of life. While homes are being built at a fast pace in Homestead and some parts of West Broward, for example, workers are spending hours in their cars as traffic issues increase.

In early 2023, the Live Local Act was passed by the Florida Legislature, which was designed to encourage developers to build affordable housing. Developers agree to make 40 percent of new housing units affordable, which exempts them from most local zoning restrictions.

In addition to Governor Ron DeSantis's executive backing, champions of the Live Local Act include Florida State Senator Alexis Catalayud, Miami-Dade County Commissioner Vicki Lopez, and Florida House Speaker Daniel Perez.

"It appears to have been quite a successful, bipartisan piece of legislation as it made it quicker and easier to develop property and had additional tax benefits," said Brackin. "There have been thousands of apartments built statewide since then, though it has not been without controversy, as some local municipalities have not been happy with the lack of control concerning what is being developed in their small communities."

While housing costs remain a concern, healthcare systems will continue to explore different options.

"It may well be that organizations will begin subsidizing housing costs to retain and recruit staff," said Brackin, noting that the hospitality and tourism industries already do this to attract workers to live in expensive resort areas. "There are no simple solutions, but we have to start thinking differently if we expect to keep the people who keep our community's healthcare running."

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Colorectal Cancer Diagnosis Sequence Has Surprising Impact on Outcomes

Cleveland Clinic researchers in Florida identify unexpected survival benefit

BY SHAWN ROBINSON YANAN

Will a patient with a single cancer pathology fare better than someone who develops multiple primary malignancies? Not always, according to a retrospective analysis of more than half a million people in the United States with primary colorectal cancer (CRC).

"We found an unexpected survival benefit never before reported when we looked at the diagnosis sequence of colorectal cancer," states lead author Anjelli Wignakumar, MBBS, BSc (Hons), Clinical Research Fellow with the Ellen Leifer Shulman and Steven Shulman Digestive Disease Center at Cleveland Clinic in Florida.

Study methodology

Using the National Cancer Institute's Surveillance, Epidemiology, and End Results (SEER) database, Dr. Wignakumar and her colleagues conducted a retrospective, population-based cohort study that included 592,063 adults diagnosed with colorectal adenocarcinoma of any stage between 2000 and 2020. Patients were categorized into three distinct groups based on their cancer history.

- **Group A:** Patients with CRC as the only primary malignancy throughout their lifetime (71.8%).
- **Group B:** Patients diagnosed with CRC as the first of two or more primary malignancies (11.9%).
- **Group C:** Patients with CRC as the second of multiple primary malignancies (16.3%).

"This stratification allowed the team to examine how the sequence of cancer diagnoses and the presence of other primary malignancies influenced patient outcomes," says Sameh Rizkalla, MBBCh, MSc, MD, FACS, Project Scientist with the Digestive Disease Institute at Cleveland Clinic Weston Hospital.

Unexpected finding

The researchers hypothesized that Group A would do the best because patients required treatment for a single cancer pathology. They found, however, that Group B actually had the best survival outcomes.

Group B had the longest 5-year mean overall survival (OS) and cancer-specific survival (CSS) at 50.4 and 51.3 months, respectively. In comparison, Group A had an OS of 41.8 months and CSS of 42.2 months, while Group C had the worst outcomes with an OS of 39.2 months and CSS of 39.8 months.

"That's a novel finding not yet seen in any other study," reports Dr. Wignakumar. "With a sample of over half a million patients from across the United States, it demonstrates a very strong conclusion and something that we didn't expect."

Additional takeaways

The Cleveland Clinic team noted some other findings in their paper published in the Journal of the American College of Surgeons.

1. Group A patients tended to be younger and presented with more advanced disease and liver and lung metastases.
2. Patients in Group B were less likely to present at an advanced stage and more often underwent surgical treatment.
3. Group C had more right-sided tumors, which are linked to more aggressive cancers.

The results were presented as a podium presentation last year at the American College of Surgeons' Clinical Congress in San Francisco. It also won first prize for surgical poster presentation at Cleveland Clinic Research Week 2024 and among electronic poster presentations at this year's International Colorectal Disease Symposium hosted by Cleveland Clinic in Florida.



Dr. Anjelli Wignakumar

Future research

"There are a number of potential explanations for what we found, from tumor biology and unique surveillance patterns to a patient's individual immune response to the cancer or treatment," explains Dr. Wignakumar.

She plans to explore some of these avenues, including the difference between adjuvant therapy or neoadjuvant therapy among these patient groups.

"By looking at treatment response in patients who only developed colorectal cancer and comparing them with patients who developed colorectal cancer as a second cancer, for example, we may be able to identify more beneficial treatment regimens," she notes.

Dr. Wignakumar hopes the team's findings will spark further research that will ultimately lead to practice changes and improved outcomes. "At the end of the day, what we're looking for as clinicians and what patients want to know is will there be a difference in how long a patient lives," she says.

Potential impacts

Colorectal cancer is the second leading cause of cancer death in the United States. More than 150,000 new cases are expected to be diagnosed in 2025, with nearly 53,000 CRC-related deaths, according to latest estimates from the American Cancer Society.

Research has shown that compared to the general population, individuals with a history of colorectal cancer face an increased risk of developing subsequent primary malignancies, especially cancers of the gastrointestinal tract, prostate, lung, breast, and urinary tract.

"We also know that it is common for colorectal cancer to be diagnosed as a second primary malignancy," says Dr. Wignakumar. "Depending on the sequence of the patient's presentation, they may need to be treated more aggressively or undergo more aggressive surveillance, such as genetic testing."

Additional research is needed to understand the differences among these patients and how surveillance strategies and treatments can be tailored to improve outcomes, she adds.



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SALUTE TO PHYSICIANS

BAPTIST HEALTH HEART & VASCULAR CARE

Bradley S. Taylor, MD, MPH

Bradley S. Taylor, M.D., MPH, is a board-certified cardiac surgeon, chief of cardiac surgery for the North Region, and chief of quality and outcomes at Baptist Health Heart & Vascular Care. He has more than 23 years of experience in all areas of adult cardiac surgery and treats more than 450 complex cardiac cases per year. Prior to joining Baptist Health, Dr. Taylor was an endowed professor and chief of the Division of Cardiac Surgery at the University of Maryland School of Medicine. He also served as the director of quality, director of coronary revascularization, and co-director of the Center of Aortic Disease at the University of Maryland Medical Center. Dr. Taylor earned his medical degree and a master's degree in public health at Emory University School of Medicine in Atlanta. He completed a general surgery residency and a cardiothoracic surgery residency at the University of Pittsburgh Medical Center, as well as a minimally invasive cardiac surgery fellowship at OLV Hospital in Aalst, Belgium.



Ignacio Rua, MD, FACS, FSVS

Ignacio Rua, M.D., FACS, FSVS, is a board-certified general and vascular surgeon at Baptist Health Miami Cardiac & Vascular Institute. He has vast experience in general and vascular surgery and treats the entire spectrum of vascular diseases. His clinical interests include open, endovascular, and hybrid treatment approaches to complex aortic disease and thoracic outlet syndrome. Dr. Rua earned his medical degree at Cornell University Medical College in New York City. He completed an internship and a residency in general surgery at Strong Memorial Hospital, University of Rochester, in Rochester, NY. His clinical training includes a hepatobiliary fellowship at Hospital 12 de Octubre in Madrid, Spain, where he gained specialty training in hepatic resection and liver transplantation surgery. He also completed an endovascular fellowship at Pennsylvania Hospital in Philadelphia. Dr. Rua is fluent in English and Spanish.



BAPTIST HEALTH ORTHOPEDIC CARE

Harris Gellman, MD, FACS

Harris Gellman, M.D., FACS, is a board-certified, fellowship-trained orthopedic hand surgeon at Baptist Health Orthopedic Care. He specializes in the treatment of a multitude of elbow, wrist, and hand conditions, including arthritis, Carpal Tunnel Syndrome, fractures, ligament and tendon injuries, trauma, and neuromuscular disorders. He also treats upper extremity paralysis caused by brachial plexus injury, cerebral palsy, stroke, and spinal cord injuries. He currently serves as a clinical professor of orthopedic surgery at FAU School of Medicine in Boca Raton, FL, as well as Nova Southeastern University College of Osteopathic Medicine in Davie, FL. Dr. Gellman earned his medical degree at the Lewis Katz School of Medicine at Temple University in Philadelphia. He completed an orthopedic surgery residency at the Hospital of the University of Pennsylvania in Philadelphia. He also completed a hand and microvascular surgery fellowship at the University of California, San Diego, and an orthopedic surgery fellowship at the Perelman School of Medicine at the University of Pennsylvania.



Roy Cardoso, MD, FACS

Roy Cardoso, M.D., FACS, is an orthopedic surgeon specializing in conditions of the hand and upper extremity at Baptist Health Orthopedic Care. His clinical interests include treatment of the hand, wrist, and elbow. Dr. Cardoso's areas of expertise include complex fractures, musculoskeletal injuries, and upper extremity reconstruction. He is particularly interested in sports-related injuries and has the privilege of caring for several professional, collegiate, and high school athletes. Dr. Cardoso is a clinical assistant professor of hand and upper extremity surgery at Florida International University, where he is core faculty for the hand surgery and primary care sports medicine fellowship programs. Moreover, he teaches Medical Students and Athletic Trainer residents. He lectures nationally and internationally on a variety of topics, including nerve, wrist, and elbow injuries. He is involved in both clinical and basic science research and has co-authored a number of medical articles and book chapters. In 2011, he was chosen as a Young Leader by the American Society for Surgery of the Hand. He is passionate about helping the underserved and has participated in many overseas volunteer medical trips.



BAPTIST HEALTH BRAIN & SPINE CARE

Aviva Abosch, MD, PhD

Aviva Abosch, M.D., Ph.D., is a fellowship-trained, board-certified neurosurgeon and serves as deputy director of Baptist Health Miami Neuroscience Institute as well as the Institute's director of epilepsy surgery and co-director of functional neurosurgery. Dr. Abosch is also the Esernia Endowed Chair in Surgical Treatment of Adult Epilepsy & Movement Disorders. Prior to joining Baptist Health, Dr. Abosch served as department chair and the Nancy A. Keegan and Donald R. Voelte, Jr. chair of Neurosurgery at the University of Nebraska Medical Center, as well as co-director of Nebraska Medicine neurosciences service line. Dr. Abosch earned her medical degree and a Ph.D. in neurobiology from the University of Pittsburgh School of Medicine. She completed a general surgery internship and a neurosurgery residency at the University of California in San Francisco. Her clinical training also includes a fellowship in epilepsy surgery at Montreal Neurological Institute, McGill University in Montreal, Quebec, and an additional fellowship in functional and stereotactic neurosurgery at Toronto Western Hospital, University of Toronto.



Sameea Husain Wilson, DO

Sameea Husain Wilson, D.O., is a fellowship-trained, board-certified neurologist and the director of movement disorder neurology at Marcus Neuroscience Institute, a part of Baptist Health. She is fluent in English and Hindi. Dr. Husain diagnoses and treats movement disorders utilizing pharmacotherapy as well as therapies such as deep brain stimulation, Botox, Dysport, Xeomin, and Myobloc injections, trigger point injections, occipital nerve blocks, alpha-synuclein skin biopsies, the DUOPA pump, the Vyalev pump, the Onapgo pump, high-frequency ultrasound, and the Cala Trio watch. She also specializes in general neurology and headache management. Before joining the Marcus Neuroscience Institute in 2015, Dr. Husain was in private practice as a movement disorder neurologist at the Parkinson's Disease and Movement Disorders Center of Boca Raton. She serves as an assistant professor of neurology at the Charles E. Schmidt College of Medicine at Florida Atlantic University.



BAPTIST HEALTH ONCOLOGY

Leonard Kalman, MD

Leonard Kalman, M.D., an oncologist, is Interim System Chief Executive for Baptist Health Cancer Care and Interim Executive Medical Director for Miami Cancer Institute. He received his medical degree from Duke University School of Medicine. He completed an internship in internal medicine at Presbyterian-University Hospital, University of Pittsburgh School of Medicine. He then was assistant resident in obstetrics and gynecology at Boston Hospital for Women/Harvard Medical School, and assistant resident in internal medicine at the Hospital of the Medical College of Pennsylvania in Philadelphia. He completed a fellowship in medical oncology at Memorial Hospital, Memorial Sloan-Kettering Cancer Center, New York, where he was also a research fellow. Dr. Kalman is Board-certified in internal medicine and medical oncology.



Louise Morrell, MD

Louise Morrell, M.D., is a medical oncologist and the Chief Medical Executive of the Eugene M. & Christine E. Lynn Cancer Institute, part of Baptist Health, at Boca Raton Regional Hospital. Dr. Morrell began her career specializing in breast cancer treatment and has spent the last 25 years focusing on cancer genetics and hereditary cancer syndromes. She conducts genetic research, cancer genetic risk assessments and genetic testing.

Dr. Morrell joined Lynn Cancer Institute in 1995 as clinical director of breast cancer services at the Center for Breast Care. In this role, she helped establish and champion the multimodality care model for breast and other cancers. This model allows patients to meet with multiple specialists in their specific cancer type in a single visit. Ultimately, this team approach leads to more coordinated care and better outcomes for the patient.

As chairperson of clinical research at Boca Raton Regional Hospital, Dr. Morrell spearheads research initiatives at the hospital and in collaboration with the Charles E. Schmitt School of Medicine at Florida Atlantic University. She also presents at numerous community-based education events and physician continuing medical education conferences.



SALUTE TO PHYSICIANS

BAPTIST HEALTH UROLOGY

Raymond Leveillee, MD

Raymond Leveillee, M.D., is a board-certified urologist at Baptist Health Urology, where he treats a wide range of kidney, prostate and renal diseases. He specializes in minimally invasive surgery, endourology and robotic surgery, helping patients benefit from advanced techniques that support faster recovery and improved outcomes. Dr. Leveillee serves as affiliate professor of urology in the Department of Surgery at Florida Atlantic University Charles E. Schmidt College of Medicine and is chief of the Bethesda Center for Advanced Robotics and Urologic Care. He earned his medical degree from Brown University, completed his urology residency at Rhode Island Hospital—where he served as chief resident—and pursued fellowship training in endourology and laparoscopy at University of Minnesota Medical School. A distinguished member of the American Urological Association and other leading societies, his research has been published in multiple peer-reviewed journals. With more than 25 years of experience, he remains dedicated to advancing treatments for conditions affecting the kidneys, adrenal glands, prostate and urinary tract.



Juan Cedenio, MD

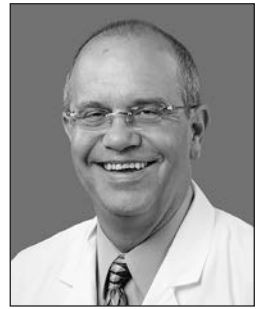
Juan Cedenio, M.D., is a urologist at Baptist Health Urology, specializing in minimally invasive reconstructive urology. Before joining the urology team at Baptist Health in 2022, Dr. Cedenio completed a reconstructive urology fellowship at the University of Illinois. He also served as chief resident during his urology residency at Mount Sinai Medical Center. In addition to being named Jackson Memorial Hospital's best intern of the year in 2016-2017, Dr. Cedenio has also authored and co-authored multiple articles, chapters and studies. From 2009 to 2010, he served as an assistant professor at his alma mater, Universidad de Carabobo in Maracay, Venezuela. As a minimally invasive reconstructive urologist, Dr. Cedenio performs complex surgical procedures using innovative robotic platforms. He specializes in the placement of genital prostheses and general urological care. His approach to care reflects his enthusiasm for helping patients find fulfillment in their lives.



BAPTIST HEALTH PRIMARY CARE

Jose Vazquez, MD

Jose Vazquez, M.D., is the chief of primary care at Baptist Health, specializing in the prevention, diagnosis and treatment of a wide range of health issues, including hypertension, diabetes and respiratory conditions. Prior to joining Baptist Health in 2016, Dr. Vazquez served as the chief of the internal medicine division at South Florida Multispecialty Associates and an associate attending physician at Mount Sinai Medical Center. At Mount Sinai Medical Center, he was named "Attending Physician of the Year." As chief of primary care, Dr. Vazquez is passionate about leadership and mentoring other physicians. His greatest honor is gaining the trust and respect of his patients and peers. Dr. Vazquez's approach to patient care is to focus on preventive care. He is also committed to listening to each patient and respecting their wishes.



Michelle Adibe, MD

Michelle Adibe, M.D., is a primary care physician with Baptist Health Primary Care. She provides comprehensive care, including preventive services, annual physicals, screenings, chronic disease management and lifestyle counseling, with a strong focus on preventive medicine and health equity. Dr. Adibe joined Baptist Health after completing her internal medicine residency at Naples Community Hospital Healthcare System, an affiliate of Mayo Clinic School of Medicine, where she also served as a resident instructor at the University of Central Florida College of Medicine. She earned her medical degree at St. George's University School of Medicine in Grenada after earning a Bachelor of Science degree in Biochemistry at the University of Florida and a Master of Science degree in Medical Sciences at the University of South Florida Morsani School of Medicine. She is also a member of the American College of Physicians. In her free time, Dr. Adibe enjoys mentoring pre-med students online to help them achieve their dreams.



MOUNT SINAI MEDICAL CENTER

Christos G. Mihos, DO

Cancer treatment can save a life and quietly strain the heart at the same time. Detecting that strain early, before traditional measures would flag it, is what Dr. Christos G. Mihos is leading the charge on at Mount Sinai Medical Center. A board-certified cardiologist trained at Mount Sinai and Massachusetts General Hospital; Dr. Mihos leads the Echocardiography & Non-Invasive Cardiovascular Laboratory across Miami Beach and South Florida locations. His team integrates an advanced imaging technique called global longitudinal strain into every stage of a patient's cancer journey, catching subtle cardiac changes earlier and enabling timely coordination between oncology and cardiology teams. Dr. Mihos also served as lead author and committee co-chair of the first American Heart Association scientific statement on this imaging approach, published in *Circulation*—helping set a national standard for the field he practices every day.



Brian Slomovitz, MD

Dr. Brian Slomovitz is a nationally recognized gynecologic oncologist and clinical investigator who leads Mount Sinai Medical Center's Division of Gynecologic Oncology, which currently supports more than 20 active clinical trials, expanding access to advanced cancer care locally for patients across South Florida. In a recent Phase II study published in the *Journal of Clinical Oncology*, led by Dr. Slomovitz in collaboration with the GOG Foundation, researchers evaluated a chemotherapy-free treatment strategy for women with recurrent low-grade serous ovarian cancer, demonstrating meaningful disease control in a setting with historically limited options. In 2026, he also began leading a novel first-line maintenance clinical trial in metastatic cervical cancer, investigating an antibody-drug conjugate in combination with immunotherapy to address persistent unmet needs. Colleagues recognize Dr. Slomovitz for advancing precision oncology while delivering patient-centered care.



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SALUTE TO PHYSICIANS

MEMORIAL HOSPITAL WEST

Ana Kelegama, MD, MBA

Dr. Ana Kelegama is the facility medical director at Memorial Hospital West, a position that enables her to advance care quality and operational efficiency initiatives. Much of her focus since she joined the Pembroke Pines-based hospital in 2023 has been on improving the patient's experience, throughput, quality and safety.

"We manage more than 350 patient encounters each day and have been able to reduce grievances by more than 50% in large part by addressing patient and family concerns timely and efficiently," said Dr. Kelegama, a physician leader in the Memorial Healthcare System since 2015. "Improved communication has been one of the keys to our success."

Patient flow optimization, care standardization and leadership development have been the hallmarks of Dr. Kelegama's career, and not just at the hospital level. She also serves on Memorial's systemwide Ethics Committee.



MEMORIAL REGIONAL HOSPITAL SOUTH

Joanne Delgado-Lebron, MD

Dr. Joanne Delgado-Lebron is a physiatrist and spinal cord injury medicine specialist who is the only fellowship-trained and board-certified physician in Broward County providing specialized care for those living with paralysis.

"In addition to the reduced motor function patients with spinal cord injuries face, there is also spasticity and its impact on bowel and bladder function, respiration, sexuality, fertility and wound healing," said Dr. Delgado-Lebron, who joined Memorial Healthcare System in 2018. "We're able to manage those issues and improve a patient's quality of life with advanced treatments, including the implantation of a pump that delivers medication directly to the spinal fluid."

Dr. Delgado-Lebron is an associate program director in Memorial's Physical Medicine & Rehabilitation residency program that began training doctors seven years ago. "One of our residents is now pursuing a fellowship in Spinal Cord Injury Medicine and we have a 100% match rate on fellowships, so it kind of feels like watching your kids have success."



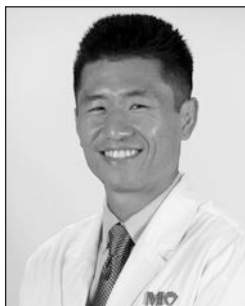
MEMORIAL DIVISION OF NEUROLOGY

Casey Young, MD

Dr. Casey Young's path to a career in neurology began before medical school, during a time he provided care for a grandfather in the final stages of Parkinson's disease. The experience sparked his interest in movement disorders and set him on a course that led him to specialize in not only Parkinson's, but also tremors, dystonia, ataxia and myoclonus.

"I completed a two-year fellowship in movement disorders, where I gained expertise in both hypokinetic (reduction in movement) and hyperkinetic (increased movement) disorders, which includes Parkinson's disease," said Dr. Young, whose training was completed at Mount Sinai in New York. "I'm also a clinical expert in deep brain stimulation for movement disorders and perform EMG-guided chemodenervation for focal dystonia."

Dr. Young takes a holistic approach to care, tailoring education and management decisions to align with each patient and family's preferences. His ultimate goals are to help patients regain function, maintain independence and live the best quality of life possible.



MOFFITT MALIGNANT HEMATOLOGY & CELLULAR THERAPY AT MEMORIAL HEALTHCARE SYSTEM

Jonathan Feld, MD

A mentor with expertise in myelodysplastic syndromes (MDS) and his own passion for research led Dr. Jonathan Feld to a career-long study of acute and chronic leukemias and other blood cancers.

"There have been few major developments in the treatment of MDS, and no significant advancements for higher-risk MDS in 20 years," said Dr. Feld. "One of the goals of the Moffitt/Memorial partnership is to become a magnet for MDS and other leukemia clinical trials, which would provide our patients treatment options not available elsewhere in the local community."

While current options for MDS remain limited and stem cell transplant remains the only potential cure, Dr. Feld sees potential in CAR T-cell therapy. Genetically re-engineering a patient's T-cells in the lab to recognize and attack specific blood cancer cells after reinfusion has been successful battling acute lymphoblastic leukemia, certain lymphomas and multiple myeloma, with Dr. Feld hopeful it may also be effective for MDS and other myeloid leukemias.



MEMORIAL CANCER INSTITUTE

Esther Ozeryansky, MD

Dr. Esther Ozeryansky, a breast surgical oncologist who joined Memorial earlier this year, is excited by the impact her work has for patients with breast cancer, benign masses, malignant tumors, atypical hyperplasia and other diseases of the breast that can be treated surgically.

"Surgery can be a cure for the majority of those we care for, but the procedures are not easy and the cosmetic outcome matters," said Dr. Ozeryansky. "I have to keep a 3D image in my mind at all times. There is a feel and orientation to breast surgery that is hard to master without specific training."

Dr. Ozeryansky, whose fellowship was completed at New York University (NYU) Langone in 2017, is a longtime Hollywood resident that grew up in the community where Memorial Healthcare System is based. She says working in the public, safety-net system appeals to her because it cares for the patient population in the area she calls home.



MEMORIAL HOSPITAL MIRAMAR

Juan Villegas, MD

The desire to attend to those in acute emergency situations, regardless of their status or ability to pay, is what attracted Dr. Juan Villegas to both emergency medicine and Memorial Healthcare System.

"As a young physician, I wasn't someone who wanted to start my own practice, since insurance coverage and the business side of medicine didn't excite me," said Dr. Villegas, who first joined Memorial in 2007. "I love the fast-paced, unpredictable circumstances that challenge our teams to deliver the best possible outcomes."

Dr. Villegas says it takes a specific type of doctor to thrive in such a pressure-packed environment. "The physician should know a lot about many medical specialties, since our work includes all diseases and critical care. We also need to process information quickly, act decisively and be able to get patients to a better clinical state."



MEMORIAL DIVISION OF PEDIATRIC ORTHOPEDICS

Hayley Sacks, MD

Long before Dr. Hayley Sacks became a pediatric orthopedic surgeon at Joe DiMaggio Children's Hospital, she was a competitive figure skater who competed at the World Championships. Her years on the ice shaped and motivate her to this day. "Doctors helped me get back on the ice after I suffered injuries in my career," said Dr. Sacks. "Now I want to help kids accomplish their own goals, whether that's in sports, art, writing or just moving without pain." Dr. Sacks completed her training at Weill Cornell, NYU Langone and Children's Hospital Colorado. She loves all aspects of pediatric orthopedics but has a special interest and expertise in pediatric hand and upper extremity conditions.



SALUTE TO PHYSICIANS

MEMORIAL HOSPITAL PEMBROKE

Paul Sojo, DO

The ability to effect change from a leadership position has been a motivator for Dr. Paul Sojo throughout his medical career. Currently the facility medical director at Memorial Hospital Pembroke, Dr. Sojo is focused on improving processes involved with patient care while also creating an environment where hospital staff can function at their best.

"True change can be made across the hospital as an administrative leader," said Dr. Sojo, who oversees 20 hospitalists and participates in meetings across disciplines. "The vision moving forward comes from seeing things through the eyes of different professionals and being the one that synthesizes everyone's standard of care."

Dr. Sojo says the hospitalist's role is similar to that of the captain of a ship. "While we consult with other physicians, imaging and other departments, it's ultimately our decisions that determine the direction of care."



MEMORIAL PRIMARY CARE

Syeda Hussain, MD, MPH, FACP



Dr. Syeda Hussain is double board-certified in internal medicine and nephrology, enabling her to offer patients specific expertise in managing the renal aspects of diabetes, hypertension and chronic kidney disease. She is also program director of the Internal Medicine residency program at Memorial Healthcare System.

"A good physician is a good teacher, whether that's for the benefit of patients or the residents in our graduate medical education program," said Dr. Hussain, whose nephrology fellowship was completed at New York-Presbyterian Queens. "I love learning and passing on knowledge that can make a difference in someone's life."

Dr. Hussain's passion for primary care stems from a desire to increase access for those impacted by social determinants that affect an individual's health. It's why she pursued and earned a master's degree in public health with a major in health policy administration and is now involved with policies that impact healthcare delivery and outcomes.

MEMORIAL DIVISION OF ORTHOPEDIC SURGERY AND SPORTS MEDICINE

Samuel Rosas, MD, PhD, MBA

Dr. Samuel Rosas is an orthopedic surgeon who joined Memorial Healthcare System after completing fellowship training in Adult Reconstruction at Duke University in 2025. He specializes in hip and knee replacements, including primary joint arthroplasty and complex revision surgery, using the latest technology to deliver evidence-based, patient-centered care focused on long-term outcomes.

"Orthopedic surgery is unique in that it combines math, science, technology, innovation, human anatomy and biomechanics," said Dr. Rosas. "Using my expertise to help patients return to the activities they love, without pain, is incredibly rewarding."

A native of Medellín, Colombia who speaks English, Spanish and German fluently, Dr. Rosas has authored more than 100 peer-reviewed publications, written medical education books and is actively involved in advancing joint replacement techniques and outcomes research. He is committed to delivering precise, compassionate care that restores mobility and improves quality of life.



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HOLY CROSS HEALTH

Kushagra Katariya, MD, FACS

Kushagra Katariya, M.D., FACS, joined Holy Cross Health in November 2025 as medical director and chief of cardiothoracic surgery. The internationally recognized physician leads an expert cardiothoracic surgery team that uses the latest technology and techniques to perform a wide range of lifesaving heart surgeries including coronary revascularization, minimally invasive and trans catheter valve surgeries, aortic surgery and surgery for atrial fibrillation. Dr. Katariya previously worked at the University of Miami, Jackson Memorial Medical Center in Miami, at Tucson Medical Center and Pima Heart in Tucson, AZ, and Delray Medical Center in Delray Beach. In his native country of India, he started and led a group of hospitals performing larger numbers of cardiac surgeries than most hospitals in the U.S. With his legacy in place in India, Dr. Katariya is ready to put his stamp on South Florida and grow Holy Cross Health's cardiothoracic surgery program from 250 surgeries annually to as many as 800. He has performed more than 15,000 heart surgeries, three times more than the average heart surgeon performs in a lifetime.



Alexander Llanos, MD

Alexander Llanos, M.D., is an interventional and structural cardiologist at Holy Cross Medical Group. He is Chief of the Cardiovascular and Thoracic Service Line for the Jim Moran Heart and Vascular Institute at Holy Cross Health. Dr. Llanos also serves on the Holy Cross Physician Board at Holy Cross Health. He organizes local, national and international conferences in cardiovascular disease and physician leadership. His focus areas include interventional cardiology, structural heart disease, transcatheter aortic valve replacement, atrial septal defect closure and paravalvular leak closure.

Board-certified in Internal Medicine, Cardiovascular Disease and Interventional Cardiology, Dr. Llanos is extensively involved in medical research and clinical trials. He earned his undergraduate degree from Mercer University (Macon, GA) and his medical degree from Medical College of Georgia (Augusta, GA). He completed an internship and residency in internal medicine at University of Miami/Jackson Memorial Hospital and a clinical cardiology fellowship at Atlanta's Emory University before completing an interventional cardiology and advanced coronary and structural heart disease fellowship at Massachusetts General Hospital/Harvard Medical School. He has also obtained an MBA from the University of Florida's Warrington College of Business.



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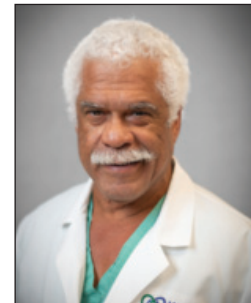
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HEALTH CARE DISTRICT
OF PALM BEACH COUNTY

Robert Borrego, MD, FACS



Dr. Robert Borrego serves as Trauma Agency Physician Advisor for the Health Care District of Palm Beach County, bringing extensive clinical expertise and leadership to the region's trauma system. In this role, he provides clinical guidance and serves as a subject-matter expert on evolving trauma care practices. He mentors education leaders, EMS directors, and hospital teams, strengthening coordination, performance, and outreach across the county.

Board-certified in general surgery, trauma, and surgical critical care, Dr. Borrego is an Army veteran and a Fellow of the American College of Surgeons. Dr. Borrego earned his medical degree from the University of Florida and served for more than 34 years as Trauma Medical Director at St. Mary's Medical Center's Level I Trauma Center. He maintains a focused practice in general surgery and critical care. His distinguished career reflects a commitment to trauma system development, quality improvement, and the delivery of lifesaving patient care throughout the region.

HEALTH CARE DISTRICT OF PALM BEACH
COUNTY - LAKESIDE MEDICAL CENTER

Nergess Taheri, DO

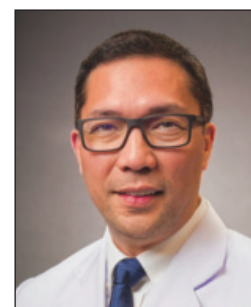


Dr. Nergess Taheri serves as Program Director of the Lakeside Medical Center Family Medicine Residency Program in Belle Glade, where she trains and mentors family medicine physicians in Florida's only rural teaching hospital. In this leadership role, she helps strengthen access to quality health care in underserved communities while shaping the next generation of physicians.

In addition to her residency leadership, Dr. Taheri is a board-certified family medicine physician specializing in Osteopathic Manipulative Treatment at the Health Care District of Palm Beach County's Belle Glade Community Health Center. As part of the District's Federally Qualified Health Center network, she provides comprehensive, patient-centered care to individuals and families regardless of insurance status.

Dr. Taheri earned her Doctor of Osteopathic Medicine degree and a Master of Science in Biomedical Informatics (MSBI) from Nova Southeastern University College of Osteopathic Medicine. She completed her residency at Lakeside Medical Center, where she chose to remain and serve the community.

Darnel Dabu, MD, MPH, FAAFP, DipABLM



Dr. Darnel Dabu serves as Assistant Program Director of the Lakeside Medical Center Family Medicine Residency Program, where he helps train and support family medicine residents in a rural teaching environment dedicated to expanding access to care in underserved communities.

Dr. Dabu is a dual board-certified physician in lifestyle and family medicine at the Health Care District of Palm Beach County's Belle Glade Community Health Center, treating adults and children.

Dr. Dabu earned his Doctor of Medicine degree from the University of Santo Tomas and completed his family medicine residency at the University of Arkansas for Medical Sciences, where he served as chief resident and received the most outstanding resident award.

Dr. Dabu also holds a Master of Public Health. He is a Fellow of the American Academy of Family Physicians and a Blue Zones Certified Physician. He recently earned certification from the American Board of Artificial Intelligence in Medicine.

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SALUTE TO PHYSICIANS

HEALTH CARE DISTRICT OF PALM BEACH COUNTY BELLE GLADE COMMUNITY HEALTH CENTER

Nadia Pierre, MD

Dr. Nadia Pierre is a board-certified obstetrician-gynecologist at the Health Care District of Palm Beach County's Belle Glade Community Health Center. She provides preventive care, routine gynecologic services and management of women's health conditions.

With more than 15 years of clinical experience, Dr. Pierre serves patients across all stages of life. She is fluent in English, Haitian Creole and French, helping improve access to care for the diverse community in the Glades region.

In addition to her clinical practice, Dr. Pierre teaches family medicine residents through the Lakeside Medical Center Family Medicine Residency Program, supporting physician training in a rural setting.

Dr. Pierre earned her medical degree from Rutgers Robert Wood Johnson Medical School and completed her residency training in obstetrics and gynecology before continuing her career in community-based practice.



PALM BEACH ORTHOPAEDIC INSTITUTE

Jonathan Shaw, MD

Dr. Jonathan Shaw is a local, fellowship-trained, joint replacement surgeon at the Palm Beach Orthopaedic Institute. Specializing in minimally invasive total hip and knee replacement, he utilizes robotic surgery, performs revision joint replacement, and offers nonoperative care for patients experiencing hip and knee arthritis.

Trained at one of the world's top arthroplasty fellowships, Midwest Orthopaedics at Rush, Dr. Shaw is an active member of the American Academy of Orthopaedic Surgeons and the American Association of Hip and Knee Surgeons.

At his practice, Palm Beach Orthopaedic Institute in West Palm Beach, FL, he focuses on orthopedic research and the advancement of total joint arthroplasty. Serving patients in Palm Beach County, Dr. Shaw is rewarded by seeing patients resume an active lifestyle with pain relief and improved mobility.



John Hinson, MD

Board-certified in orthopedic surgery since 2012, Dr. John Hinson, M.D. of the Palm Beach Orthopaedic Institute, specializes in traumatic and degenerative conditions of the shoulder and elbow, including arthroscopic surgery, rotator cuff repair, shoulder instability procedures, shoulder replacement, including reverse total shoulder replacement, and the care of throwing athletes and golfers.

Dr. Hinson graduated with honors from the Medical College of Georgia in 2004 and served as President of the Georgia Elbow and Shoulder Society from 2013-2015. He has been a Fellow of the American Academy of Orthopaedic Surgeons since 2014.

A passionate advocate for utilizing current surgical technology to enhance healing and outcomes, Dr. Hinson has also presented at the American Osteopathic Academy of Orthopedics' 2015 Postgraduate Seminar, spoken to emerging physicians at local schools, and been published in international journals, including articles on managing complications of reverse total shoulder arthroplasty.



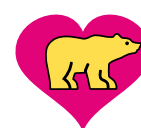
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SALUTE TO PHYSICIANS

Cover Story: Dr. Raul Couret Earns MHA to Strengthen His Practice and Leadership Skills

Continued from page 1

Hialeah-Miami Lakes area. I actually went to Florida Atlantic back in 1996 and got my degree in chemistry." He said Nashville has some great programs, "but FAU has an amazing executive program. It is incredible for me to think that I returned to my alma mater almost 30 years later, and the school's reputation was what led me to realize it was a good choice. And the fact that it was online suited my schedule; I could do it on weekends or at night."

Couret said Cumberland Family Practice is a private practice entity, owned by the four physicians who run it, and he felt the MHA, which he earned in December 2024, would be beneficial. He said many of the classes were instrumental to what he does on a daily basis, and pointed out that the human resources class was particularly key to what he does in running his own business.

"I currently manage a staff of 21 employees, and there are three other doctors. Most of what we do, we have to do on our own. We don't have someone who handles HR – we are the HR department."

He mentioned that the Healthcare Law and Introduction to Healthcare classes

"were both amazing." He said so much goes into healthcare law, from malpractice, to tort reform, to changes in regulations, and the class was very helpful; and the Introduction to Healthcare class "is what healthcare is really all about." Couret pointed out that not everybody in the MHA program had healthcare experience. "The amazing part for me was that so many people weren't really providers like myself – they might have a degree in business or accounting or social work, but wanted to get into the healthcare field. A lot of folks are in leadership roles but are not a provider – some may be in entry-level positions, while others are close to achieving the C suite."

Additionally, Couret talked about a Boot Camp class, in which experts in the healthcare field are invited to give lectures on different aspects of current healthcare management. "It also forces you to increase your network and it helped me work with other colleagues in different leadership roles. I learned a lot about what they do."

He said that in the past few years, he realized that if he was dealing with someone in the business world, that person wasn't necessarily a physician or nurse or therapist. "I realized we don't receive

enough training in this area, and I wanted to better understand the business side of healthcare. That was one of the biggest challenges – how do I expand my horizons on healthcare leadership, and this program opened the doors for that."

Of his practice, Couret says, "I am a geriatrician at heart. I am the son of Cuban immigrants who was always there for my grandparents at doctors' appointments." He said his grandparents were the ones who babysat him when his parents worked. Because he was bilingual and bi-cultural, he was able to help read prescription labels, interpret for them at the doctor's office, etc. "That led me to want to go into geriatrics. Most of my patients are in their 70s and 80s, so time is not on their side. If I can expand their quality of life, it is very fruitful. What I love most is my hospice team and my palliative patients, as I feel there is nothing more meaningful than giving somebody dignity at the end of life."

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SALUTE TO PHYSICIANS

Cover Story: Holy Cross Medical Group CMO Focused on Administration/Physician Partnerships to Improve Patient Care

Continued from page 1

Integration at Bayhealth Medical Center in Dover, DE, where he led a multispecialty medical group of more than 200 clinicians. A board-certified general internist, he has held faculty and leadership appointments at Thomas Jefferson University, Temple University and the University of Pennsylvania.

Dr. Ward said that he was attracted to HCMG and the Fort Lauderdale area for a number of reasons.

"My children are grown and flown, and my wife and I were ready to go somewhere that would be new to us from a lifestyle standpoint," he said. "While I was first attracted to Holy Cross because I loved its mission-driven aspect, I was excited to also find a growing, innovative, financially healthy, patient-centered, team-based institution with strong leadership."

Dr. Ward plans to spend his first months on the job learning about Holy Cross and those who have contributed to its success.

"Respecting and understanding the organization's history and how it got to where it is today is key," he explained. "I also need to 'learn' the people, which is why I have an open-door policy and make myself as accessible as possible. I want to hear from physicians, staff and leadership, which will better enable me to see areas where there are opportunities for improvement."

Over time, Dr. Ward says that he will be working with clinical partner and president of the medical group Maggy Perez-Dickens to build on the great work already done at Holy Cross and further improve it where there are opportunities to innovate and expand clinical options for patients.

"We want to make Holy Cross the go-to spot for people in the Fort Lauderdale area," he said.

As a general internist, Dr. Ward will continue to see patients as well as deal with administrative issues. "Caring for patients is a constant challenge, and you

never know what you'll see day-to-day," he said. "That keeps me fresh and interested. I also love the long-term relationships of primary care."

"I got into administration because the state of medicine is constantly in flux and it's really challenging when decisions are made by nonclinicians," he added. "I feel that it's vital that physicians be in roles where these decisions are made, and I thought I'd have more impact in improving the lives of patients and physicians in a role of physician leadership."

He notes that numerous challenges are facing healthcare today including rising costs in a time of decreasing reimbursements; the increasing medical complexity of patients; workforce shortages and an increasingly complex administrative burden.

"A lot of this contributes to physician burnout, which has become acute," said Dr. Ward. "Access to care is also an issue, leading to delayed care and higher disease burdens. There are also issues of health equity for minority groups, and there's a patient trust issue; there is so much misinformation and disinformation out there that patients aren't sure who to listen to, which makes it even more difficult for physicians to do their jobs. Altogether, there is a lot of pressure on health systems to deliver the right care to the right patient at the right time the way that patients want it."

While it seems early to be talking about a legacy, Dr. Ward said that he hopes he will be remembered as someone who worked in partnership with administration and physicians to provide better care for patients.

"As a leader, I will be involved in many different initiatives, but not any single one will stand out," he said. "What I hope will be remembered are the lasting changes I make over time, and the culture I help to develop."

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SALUTE TO PHYSICIANS

BROWARD HEALTH NORTH

Aryama D. Sharma, MD

Aryama D. Sharma, M.D., is a gastroenterologist with the Broward Health Physician Group. She was inspired to pursue medicine to create a safe, supportive space for women to receive care from a female physician, which was not common where she was born and raised in Kenya, Africa. Her choice of gastroenterology bridges the gap between her love of surgery and medicine. "I always wanted to become a surgeon, and in gastroenterology we do procedures and we see patients. I like having a long-term relationship," said Dr. Sharma.

Dr. Sharma believes teaching is just as rewarding, and she now serves as the program director for the Gastroenterology Fellowship at Broward Health North.

"Giving back, teaching the younger doctors new skills, I really enjoy that. Medicine is not only a science; it is an art as well," said Dr. Sharma.

Dr. Sharma earned her medical degree from University of Liverpool, England. She completed both her internal medicine residency and gastroenterology fellowship at St. Louis University School of Medicine.



Malik Fakhar, MD

Malik Fakhar, M.D., is an interventional neurologist with the Broward Health Physician Group. Dr. Fakhar was drawn to neurointerventional radiology due to the immediate, life-changing impact that it can have on patients. "The idea that I can directly prevent disability or restore someone's independence keeps me focused and driven every day," said Dr. Fakhar.

He is most proud of successfully managing complex cases that lead to meaningful patient recoveries. "The first time I saw a thrombectomy and watched a patient go from hemiplegic to moving their arm on the table, it completely changed how I viewed stroke care," said Dr. Fakhar.

Dr. Fakhar earned his medical degree from Ross University School of Medicine. He then completed residencies at the University of Tennessee Health Science Center and at the University of Arizona Banner Good Samaritan Medical Center, before completing two fellowships at Stanford University and Miami Neuroscience Center Baptist Health.



BROWARD HEALTH MEDICAL CENTER

Pablo Rengifo-Moreno, MD

Pablo Rengifo-Moreno, M.D., is an interventional cardiologist with the Broward Health Physician Group, where he serves as Director of Structural Heart Disease and Director of Mechanical Circulatory Support. Drawn to cardiology for its blend of innovation and impact, his daily drive comes from caring for high-risk patients and restoring quality of life. "Having the skills to solve a complex problem and help a patient go through a difficult situation gives me purpose."

Dr. Rengifo has a passion for innovation, performing cutting edge procedures, mentoring trainees and leading research initiatives to advance cardiovascular care. "Knowing that today's work—whether in the cath lab, clinic, or a trial—can shape better care tomorrow is what keeps me going," said Dr. Rengifo.

Dr. Rengifo earned his medical degree at Universidad Central de Venezuela. He completed extensive U.S. training, including a research fellowship at Massachusetts General Hospital at Harvard University before two fellowships at University of Miami.



Mehdi Bouslama, MD, MSc

Mehdi Bouslama, M.D., MSc, is a neuroendovascular surgeon and vascular neurologist with the Broward Health Physician Group. Initially inspired by neurosurgery, his path shifted after discovering neuroendovascular surgery—a field that blends clinical medicine, advanced imaging, and minimally invasive intervention. "Working within millimeters of structures that govern thought, movement and life itself was not something I could walk away from," said Dr. Bouslama.

At Broward Health, he has focused on building a comprehensive cerebrovascular program, introducing advanced procedures, pioneering the use of the Roadsaver carotid stent in Florida and integrating AI-driven technologies to enhance patient care. "Every patient who walks—or is carried—through our doors is facing one of the most frightening moments of their life. What keeps me going is knowing our work gives people a second chance," he said. Dr. Bouslama completed medical school in Tunisia, followed by advanced training at Emory University and fellowships at New York-Presbyterian Hospital and University at Buffalo.



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SALUTE TO PHYSICIANS

BROWARD HEALTH CORAL SPRINGS

Joseph Corallo, MD

Joseph Corallo, M.D., is the Vice Chief of Staff at Broward Health Coral Springs and the Director of Colorectal Center of Excellence. He chose colorectal surgery because it offers a meaningful opportunity to impact public health. In experienced hands, colorectal patients often achieve excellent outcomes, which he finds deeply rewarding.

"Colorectal cancer is the third most common cancer in men and women and the second highest cancer related cause of death in both. Many cases are preventable through screening," Dr. Corallo said.

Delivering high quality colorectal care in a community setting is his daily inspiration. "My biggest motivation comes from the relationships I form with my patients and seeing them long term," said Dr. Corallo.

Dr. Corallo earned his medical degree at University of Medicine and Dentistry of New Jersey. He completed both his residency in general surgery and his fellowship in colon and rectal surgery at University of Miami.



Alexander Parr, MD

Alexander Parr, M.D., is a board-certified general surgeon at Broward Health Imperial Point who is fellowship trained in minimally invasive surgery, including bariatric, abdominal and gastrointestinal procedures, as well as robotic surgery. He recently performed his 2,500th robotic assisted procedure using the da Vinci® Surgical System, reflecting his experience in advanced, minimally invasive techniques that support faster recovery and improved outcomes for patients.

Dr. Parr received his medical degree from Ponce Health Sciences University in Ponce, Puerto Rico, and completed both a residency in general surgery and a fellowship in advanced GI, bariatric and minimally invasive surgery at the University of Florida in Gainesville. In his current practice, he utilizes a multidisciplinary approach to bariatric care that includes collaboration with a dietician, bariatric coordinator and psychiatrist. Affectionately known by colleagues as "The Doctor's Doctor" and trusted by physicians and their families, Dr. Parr is committed to delivering advanced, patient centered surgical care across Broward County.



Jose Martin, DO

Jose Martin, D.O., is Chair of Surgery at Broward Health Coral Springs Hospital. Dr. Martin found his calling in medicine after childhood experiences as a frequent patient exposed him to the world of healthcare. "I remember watching physicians move with confidence and compassion, and even as a child, I found myself wanting to stand where they stood," said Dr. Martin. "The privilege of being able to help someone so directly resonated deeply with me."

Helping his patients and setting an example for the next generation to work with excellence, compassion and resilience is what fuels him. "Each day, I am driven by the knowledge that people are waiting for my help, individuals who place their trust in my hands during some of the most vulnerable moments of their lives," said Dr. Martin.

Dr. Martin received his medical degree at Nova Southeastern College of Osteopathic Medicine. He completed his residency at Henry Ford Macomb Hospital.



Jason A. Walters, MD

Jason A. Walters, M.D., is a board-certified orthopedic surgeon specializing in sports medicine at Broward Health Imperial Point and a member of the Broward Health Physician Group. He focuses on treating complex injuries of the knee, shoulder, elbow and ankle. Dr. Walters has a special interest in arthroscopic rotator cuff repairs, labral repairs, meniscal repairs and multi ligament reconstructions of the knee, including anterior and posterior cruciate ligament reconstructions. He earned his medical degree from Howard University College of Medicine and completed his orthopedic surgical residency at Howard University Hospital. Dr. Walters also completed an orthopedic sports medicine fellowship at Allegheny General Hospital in Pittsburgh, PA, where he provided care for professional sports teams, including the Pittsburgh Pirates. He currently serves as head team physician for Dillard High School in Fort Lauderdale, supporting student athletes across Broward County.



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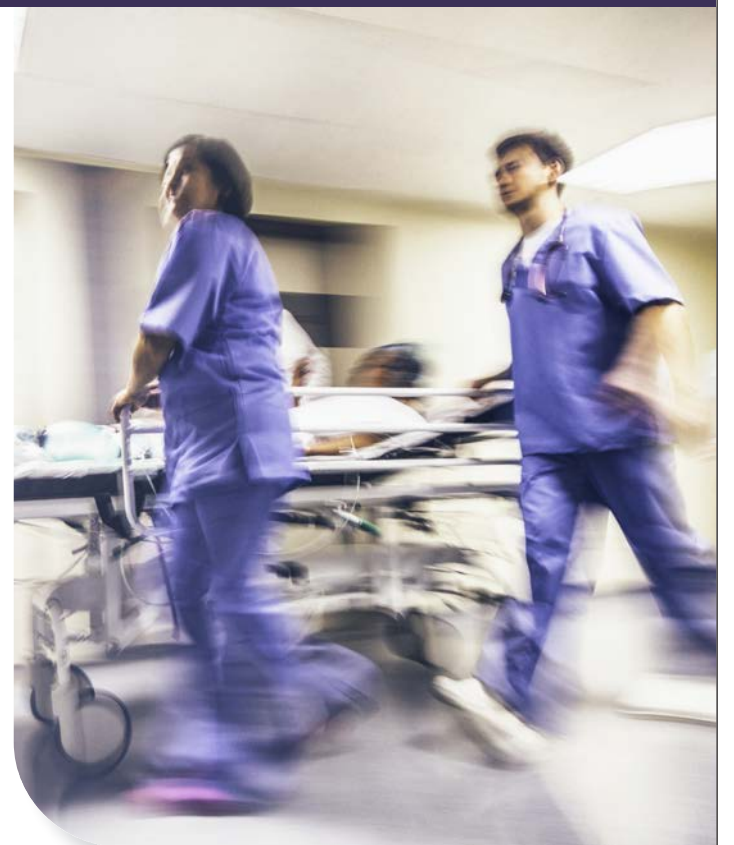
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SALUTE TO PHYSICIANS

Leading with Empathy and Innovation: Dr. Amit Rastogi Guides Jupiter Medical Center's Rise

BY DANIEL CASCIATO

When Dr. Amit Rastogi reflects on what first drew him to medicine, his answer reveals the foundation of his leadership philosophy today.

"From the beginning, I was drawn to medicine because it uniquely blends science, service, and human connection," Dr. Rastogi says.

That intersection of intellect and compassion continues to shape his approach as President and Chief Executive Officer of Jupiter Medical Center. Board-certified in internal medicine, with more than 15 years of clinical practice experience and training at Harvard- and Yale-affiliated hospitals, Dr. Rastogi brings both clinical insight and executive acumen to one of Florida's most respected healthcare institutions.

Under his leadership, Jupiter Medical Center has achieved remarkable recognition and growth. Most recently, the organization earned international distinction as one of *Newsweek's* World's Best Hospitals 2025 and was recognized by *U.S. News & World Report* as a 2024 "Top Hospital" in Florida. The institution has also been honored by *Forbes* as "The Top Health System Employer in Florida" in 2024 and named among the "Best Employers for Women" and "Best Midsize Employers" in 2025.

From Bedside to Boardroom

Dr. Rastogi's journey into leadership was not driven by a single defining moment but by a growing realization about the broader impact he could make.

"It was an accumulation of experiences," he explains. "As I became more involved in quality improvement and operational initiatives, I realized how much impact could be made by improving systems, not just individual encounters."

He adds, "Ultimately, I transitioned into administration because I recognized an opportunity to influence healthcare on a broader scale, to support thousands



Dr. Amit Rastogi

of patients instead of dozens per day, and to help shape an environment where clinicians could thrive."

Prior to joining Jupiter Medical Center, Dr. Rastogi held executive roles at Yale New Haven Health in Connecticut and Inova Health in Virginia. He also earned a master's degree in Healthcare

Management from Harvard University and completed a certificate in Artificial Intelligence from MIT, equipping him with a unique blend of clinical experience and forward-looking strategic expertise.

Academic Foundations, Practical Leadership

Training in elite academic environments profoundly influenced his leadership style.

"Training within those academic environments taught me the power of collaboration, accountability, and continuous learning," Dr. Rastogi says. "Excellence was the expectation, not the aspiration."

He emphasizes that these institutions modeled not only high standards but also culture. "These institutions modeled humility, curiosity, and respect for all members of the care team. Those principles guide me every day, especially as Jupiter Medical Center continues to evolve into a destination for high-quality, patient-centered care."

That philosophy is evident in Jupiter Medical Center's rapid expansion. The health system has launched a new 55,000-square-foot cancer center, established a cardiac surgery program, and opened a new 90,000-square-foot Surgical Institute. Growth, however, is never pursued for its own sake.

"For me, growth is never the goal on its own, it's a means to serve our community better," Dr. Rastogi says. "Innovation and compassion are not

competing forces; when approached thoughtfully, they strengthen one another."

A Physician's Perspective in the C-Suite

Dr. Rastogi believes his experience as a practicing internist remains central to how he makes executive decisions.

"Being a physician fundamentally shapes how I lead," he says. "I approach every decision through the lens of patient experience and clinical excellence."

He understands the daily pressures facing clinicians and prioritizes practical, frontline-informed strategies. "As a result, I work to ensure our strategies are practical, aligned with frontline needs, and grounded in what ultimately matters: better outcomes for patients and a positive, empowering environment for our physicians and staff."

That bridge between clinical insight and organizational strategy, he notes, is something he takes "tremendous pride in."

His leadership has not gone unnoticed. Dr. Rastogi has been recognized by Becker's Healthcare as one of the nation's "Great Leaders in Healthcare" and "Community Hospital CEOs to Know." He has been named among "Florida's 500 Most Influential Business Leaders" by Florida Trend and honored as one of the "50 Power Leaders in Healthcare" by the South Florida Business Journal. He also serves on multiple influential boards, including the Florida Hospital Association's Board of Directors, and has been appointed by Governor Ron DeSantis to Florida's Health Care Innovation Council.

Embracing the Future of Medicine

With a certificate in Artificial Intelligence from MIT, Dr. Rastogi is particularly attuned to the role emerging technologies will play in healthcare's future.

"Emerging technologies, especially artificial intelligence, have the potential

to transform nearly every aspect of healthcare," he says. "AI will support earlier diagnosis, personalize treatment plans, streamline workflows, and reduce administrative burden."

Still, he cautions against losing sight of medicine's human core. "Most importantly, we must remember that technology should enhance, not replace, the human relationship at the heart of medicine."

He advises physicians to prepare by embracing digital tools and strengthening data literacy while maintaining adaptability. "The future belongs to clinicians who can combine technological fluency with empathy and sound clinical judgment."

Guidance for the Next Generation

When asked what advice he would offer to medical students and early-career physicians considering leadership roles, Dr. Rastogi returns to themes that have defined his own path.

"Stay curious, stay humble, and stay connected to your purpose," he says. "Leadership is not a departure from medicine; it is an extension of your desire to help others."

He encourages young physicians to build strong relationships, seek mentors, and understand how healthcare systems operate. Most importantly, he urges them to preserve their clinical identity.

"The empathy, discipline, and integrity you develop as a physician will serve you, and those you lead, throughout your entire career," he says.

At Jupiter Medical Center, that blend of empathy, operational excellence, and forward-thinking innovation continues to elevate care across Palm Beach County and beyond. Under Dr. Rastogi's leadership, the organization demonstrates that growth and compassion are not mutually exclusive — they are, in fact, inseparable.

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SALUTE TO PHYSICIANS

Cover Story: The Best Physician Executives Still See Patients. Here's Why.

Continued from page 1

leges are not the same thing.

Physicians are also more receptive to corrective feedback when it comes from a leader whose clinical skills they recognize and respect. Physicians will trust another respected physician more than a "suit" in management, as they may suspect that management is more concerned with business motives than with ensuring clinical quality.

This is one of the primary reasons why, once a physician administrator stops seeing patients, their credibility begins to diminish relatively quickly. Colleagues begin treating them as management, severing the connection built over years of professional interaction, patient care, and time spent in the trenches together.

To combat this erosion of trust, it might be wise for health systems to negotiate a hybrid arrangement that allows physician administrators to continue providing patient care, even if for only a relatively small percentage of time. This is particularly important for surgeons whose expertise often relies on a consistent volume of procedures and experience with the latest innovations and technologies. In another example, a renowned orthopedic surgeon found that maintaining sufficient OR time conflicted with administrative duties, so he

shifted to evaluation and diagnosis while referring surgeries to younger partners—a smart compromise that preserved his expertise and clinical standing.

One of the best physician executives I ever hired was a subspecialty radiologist who chose to continue his clinical practice to maintain his standing with his colleagues and stimulate his professional development. He spent approximately 20 percent of his time providing radiology interpretations and interacting with colleagues about patients' status. He frequently told me that when he called a physician with a report, they'd be pleasantly surprised that he was still in the patient care game. He found that to be helpful in all future interactions.

A practical solution is the dyad model, pairing an experienced administrator with a respected physician to create balanced leadership. Many people can develop the background needed to succeed in administrative leadership. Far fewer have the rare discipline required to complete pre-med, medical school, residency, and fellowship. That hard-earned credibility among peers matters, and it shouldn't be given away lightly.

As administrative pressures mount, I'm hopeful we're nearing a shift—one that lets us use our resources more wisely while keeping patient care at the center of everything we do.

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PALM BEACH GARDENS MEDICAL CENTER

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, Ohio.

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.



Hayder Al-Azzawi, MD

Dr. Hayder Al-Azzawi is a colorectal and general surgeon specializing in robotic abdominal and anorectal procedures for a wide range of colon and rectal cancers, digestive and abdominal diseases. He is on staff at Good Samaritan Medical Center and Palm Beach Gardens Medical Center. He has performed over 2000 da Vinci robotic assisted procedures. Dr. Al-Azzawi uses the da Vinci XI and the da Vinci 5 Surgical System by Intuitive for robotic-assisted surgical procedures. Dr. Al-Azzawi is board-certified by both the American Board of Surgery and American Board of Colon and Rectal Surgery. Dr. Al-Azzawi completed a Colorectal Surgery Fellowship at the Cleveland Clinic in Weston, FL, and his general surgery residency and internship at Indiana University, Indianapolis, IN. Dr. Al-Azzawi's offices are located in Palm Beach Gardens and West Palm Beach.



ST. MARY'S MEDICAL CENTER

Faris Azar, MD

Dr. Faris Azar serves as the Trauma Medical Director at St. Mary's Medical Center, where he leads a multidisciplinary team dedicated to delivering the highest level of care to critically injured patients. A graduate of Boston University School of Medicine, he completed his internship and general surgery residency at The Johns Hopkins Hospital before pursuing advanced fellowship training in trauma and critical care at the R Adams Cowley Shock Trauma Center.

With extensive experience in complex critical care, Dr. Azar manages patients across a broad spectrum of disciplines, including trauma, emergency surgery, and other acute medical and neurological conditions. He is highly skilled in performing life-saving surgical interventions and guiding patients and families through some of their most challenging moments.

Beyond the bedside, Dr. Azar is deeply committed to academic medicine. As an Associate Professor at Florida Atlantic University, he plays an active role in educating and mentoring residents and medical students, fostering the next generation of physicians through hands-on teaching and clinical leadership.



Lauren A. Huntress, MD

Dr. Lauren A. Huntress is a vascular surgeon on staff at St. Mary's and West Boca medical centers. She has been with the Palm Beach Health Network since 2023, joining the Prime Vascular Institute, a vascular and endovascular surgery practice founded by Dr. Joseph Ricotta, with an office in West Palm Beach.

Dr. Huntress attended Boston College where she obtained a Bachelor of Science in Biochemistry. She graduated Rutgers Robert Wood Johnson Medical School in 2018, earning her Doctor of Medicine and remained at RWJMS for her integrated vascular surgery residency which she completed in 2023.

Dr. Huntress is Board Certified by the American Board of Vascular Surgery. She has held her Registered Physician in Vascular Interpretation (RPVI) for performing, reading, and interpreting vascular ultrasound since 2022. Her favorite part of being a vascular surgeon is providing comprehensive medical and surgical care for a wide variety of complex pathologies and giving patients back their quality of life.



GOOD SAMARITAN MEDICAL CENTER

Abraham Betancourt, MD

Dr. Abraham Betancourt is a board-certified general and bariatric surgeon on staff at Good Samaritan Medical Center in West Palm Beach, FL. He is also a member of the Palm Beach Health Network Physician Group. He specializes in advanced minimally invasive and robotic-assisted procedures. His clinical focus is GI surgery, which includes bariatric surgeries, such as gastric bypass and sleeve gastrectomy, alongside the treatment of complex gastrointestinal conditions like GERD, gastroparesis, achalasia and abdominal wall hernias.

Dr. Betancourt earned his medical degree from the University of Carabobo before completing his residency at Abington Memorial Hospital. He further refined his expertise through a specialized fellowship in Advanced Gastrointestinal and Minimally Invasive Surgery at the Cleveland Clinic Florida followed by Robotic Surgery fellowship at Good Samaritan Medical Center. He currently serves as a director of the bariatric & metabolic surgery institute as well of the Gastrointestinal and Esophageal Center. Dr Betancourt is recognized for integrating cutting-edge surgical technology with patient-centered care.



Jason Meldau, MD

Dr. Jason Meldau is a fellowship-trained spine surgeon specializing in disorders of the cervical, thoracic, and lumbar spine. He provides both operative and non-operative care, developing individualized treatment plans designed to help patients return to the activities that matter most. Dr. Meldau is on staff at Good Samaritan Medical Center, where he delivers comprehensive, patient-centered spine care.

He graduated cum laude from Michigan State University and earned his medical degree there as well. He completed his orthopedic surgery residency at Loyola University Medical Center, known for complex spine training, followed by advanced fellowship training at the Spine Institute of Arizona, with a focus on minimally invasive techniques.

Dr. Meldau emphasizes clear communication and shared decision-making, ensuring patients feel informed and confident in their care. When surgery is indicated, he utilizes advanced approaches including minimally invasive, endoscopic, motion-preserving, and robotic-assisted procedures. He has authored numerous peer-reviewed publications and presents nationally on spine research and innovation.



DELRAY MEDICAL CENTER

Christopher Tallman, MD

Dr. Christopher Tallman is a board-eligible urologist who practices general urology with a special focus on minimally invasive surgical management of benign and malignant prostate disease. He earned his Master of Science in Miami, FL and his Doctor of Medicine from Medical University of the Americas in Nevis, West Indies. He went on to complete his surgical internship at the University of Miami and pursued a research fellowship under Dr. Mani Menon at Henry Ford Hospital in Detroit, MI. Dr. Tallman completed his residency as the first resident at the esteemed Houston Methodist Hospital.

Dr. Tallman is largely focused on advancing patient outcomes with the use of Aquablation for the management of benign prostate disease (BPH) and was the first in South Florida to treat prostate cancer utilizing Aquablation in a global multicenter, prospective, randomized FDA clinical trial. He provides cutting edge therapies to men with these conditions at Delray Medical Center.



John Roberts, MD

Dr. John Roberts is a distinguished cardiothoracic surgeon with decades of experience in advanced thoracic care. He graduated summa cum laude from Duke University and earned his medical degree with honors from Yale University before completing his surgical residency at Johns Hopkins Hospital. He went on to complete fellowships in surgical oncology and thoracic surgery and held academic leadership roles, including chief of general thoracic surgery at Vanderbilt University. Today, Dr. Roberts is on staff at Delray Medical Center, where he serves as vice chair of the hospital's robotics committee and Medical Director of Thoracic Surgery and specializes in minimally invasive lung cancer treatment and other thoracic malignancies, including esophageal cancer and thymic cancer. Using advanced robotic technology, he performs precise biopsies and robotic-assisted lobectomies through small incisions, reducing pain and shortening recovery time. This technology can be used in any disease of the chest.



SALUTE TO PHYSICIANS

WEST BOCA MEDICAL CENTER

Michael Stark, DO

Dr. Michael Stark is a fellowship-trained spine surgeon dedicated to delivering advanced, patient-centered care for complex cervical, thoracic, and lumbar spine conditions. Practicing at Delray and West Boca Medical Centers, Dr. Stark specializes in minimally invasive techniques, motion-preserving procedures, complex deformity correction, and spine trauma. He combines evidence-based surgical innovation with a personalized approach focused on restoring function, relieving pain, and accelerating recovery.

Known for clear communication and collaborative care, Dr. Stark partners closely with primary care physicians, physical therapists, and multidisciplinary teams to ensure seamless treatment from diagnosis through rehabilitation. His expertise spans degenerative spine disease, disc herniation, spinal stenosis, fractures, and revision surgery.

Committed to excellence and outcomes, Dr. Stark leverages state-of-the-art technology and precision-guided techniques to help patients return to the activities that matter most. He is committed to delivering safe, efficient, and high-quality spine care with compassion and integrity.



Manish Gupta, MD

Dr. Manish Gupta is a board-certified, fellowship-trained sports orthopedic surgeon and Founding Partner of the Sports & Orthopedic Center in South Florida, where he has delivered advanced orthopedic care for more than two decades. He specializes in shoulder, hip, and knee injuries, with expertise in sports medicine and total joint reconstruction. Known for his use of minimally invasive, robotic-assisted, and cartilage restoration techniques, Dr. Gupta is widely regarded as a leader in complex joint care.

He also serves as Principal Investigator on three FDA-approved regenerative medicine trials, advancing innovative therapies tailored to individual patients. An internationally recognized speaker, Dr. Gupta has lectured on artificial intelligence in musculoskeletal care, including digital knee modeling and performance optimization. Dr. Gupta previously served as lead orthopedic surgeon at Florida Atlantic University and remains clinical faculty in biomedical engineering. He is on staff at Delray Medical Center and West Boca Medical Center, caring for athletes and active individuals across South Florida.



FLORIDA COAST MEDICAL CENTER

William E. Carlson, MD

As Board Chair of Florida Coast Medical Center, Dr. William E. Carlson plays a key leadership role in shaping the hospital's mission, growth and commitment to delivering high-quality care to the Treasure Coast community. A respected orthopaedic surgeon and Managing Partner of South Florida Orthopaedics & Sports Medicine, Dr. Carlson brings decades of clinical and administrative experience to his leadership position.

Board-certified in orthopedic surgery, he earned his medical degree from St. Louis University School of Medicine and completed his residency training at Wayne State University in Detroit. Since beginning his practice in 1986, Dr. Carlson has developed a specialized focus on shoulder conditions, performing advanced arthroscopic procedures, complex reconstructions and total shoulder replacements. He is among the few surgeons in the region who routinely perform Reverse Total Shoulder Replacement for patients with severe rotator cuff damage and arthritis. Dr. Carlson is a Fellow of the American Academy of Orthopaedic Surgeons, an Assistant Professor at Florida State University College of Medicine, and an active contributor to clinical research and medical education nationwide.



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.



Training Tomorrow's Specialists: How Hospitals Are Preparing Physicians for the Future of Healthcare

Medicine is changing at an unprecedented pace. New procedures, emerging therapies, and rapidly evolving technology are transforming how care is delivered. As a result, the way physicians are trained must evolve just as quickly to ensure patients continue to receive safe, high-quality, and coordinated care.

Today's training programs must prepare physicians not only to master advanced procedures, but also to understand new medications, apply precision medicine, and responsibly integrate tools such as genomic testing and artificial intelligence into clinical decision-making. These innovations hold tremendous promise, but only if physicians are properly trained to interpret and apply them in ways that improve outcomes and protect patient safety.

While technology plays an important role, the foundation of strong graduate medical education remains engaged, committed faculty. At teaching hospitals, education must be embedded in the culture, with expectations that all medical staff contribute to training and mentorship. This goes beyond teaching clinical



BY DR. ALON WEIZER

skills. Faculty model professional behavior, patient-centered care, teamwork, and lifelong learning, all of which are essential for physicians who will eventually lead care teams and shape the next generation of healthcare delivery.

Encouraging residents and fellows to become lifelong learners is especially important. Medicine does not stand still, and neither can physicians. Training programs that emphasize inquiry, research, and continuous improvement prepare physicians not only to succeed in practice, but also to contribute to advancing medical knowledge and improving care for future patients.

As one of Florida's original statutory teaching hospitals, Mount Sinai Medical Center has long made education a core part of its mission and culture. That commitment is reflected in the Andrew Witkoff Graduate Medical Education Program, which trains more than 200 residents and fellows each year. To better serve community needs, Mount Sinai has expanded residency training in areas such as general surgery, urology, and anesthesia, and is actively developing fellowships in reconstructive urology, electrophysiology, and cognitive neurology.

Workforce development, however, must extend beyond subspecialty training. Strong primary care training is essential, particularly in internal medicine, obstetrics and gynecology, and pediatrics, as these physicians often coordinate a patient's care across an increasingly complex healthcare system.

This approach is strengthened by the breadth of Mount Sinai's training programs across multiple disciplines, including Internal Medicine, Emergency Medicine, Obstetrics and Gynecology, Surgery, and Urology. As healthcare policy and reimbursement continue to emphasize coordinated, value-based care, preparing physicians to lead teams and manage continuity of care becomes even more important.

Despite the growing demand for physicians, funding for graduate medical education has not kept pace with population growth. Federal support through the Centers for Medicare and Medicaid Services (CMS) does not fully cover the cost of training residents and fellows, and many hospital training positions have been capped since the 1990s. While some state programs help support new training positions, hospitals often operate above their funded caps, absorbing the cost of additional trainees to meet community

needs.

This funding structure creates challenges in states like Florida, where population growth continues to increase demand for physicians across nearly every specialty. Training positions have not expanded at the same rate as the population, which means many medical school graduates must leave the state to complete their training. Since physicians often practice near where they train, this can limit opportunities to retain talented clinicians who could otherwise care for local communities.

Hospitals and health systems play a vital role in addressing this gap by investing in new training programs and expanding existing ones, even when full funding is not available. These investments are essential to strengthening the healthcare workforce and ensuring access to care for growing populations.

Hospitals must remain not only centers of care, but also centers of learning. By advancing technology, strengthening mentorship, and expanding training opportunities, healthcare institutions can help prepare physicians who are equipped to lead, innovate, and deliver high-quality care for years to come.

Dr. Alon Weizer is Chief Medical Officer, Mount Sinai Medical Center.

Cybersecurity With a Human Focus: OneZero Solutions Brings Operational Clarity to Healthcare Risk

BY DANIEL CASCIATO

As healthcare organizations accelerate digital transformation, cybersecurity has become inseparable from patient safety, clinical continuity, and organizational trust.

From electronic health records and connected medical devices to cloud platforms and third-party vendors, today's healthcare environments are more interconnected, and more exposed than ever before.

For OneZero Solutions, addressing that reality starts with a philosophy that places people at the center of every technical decision.

"At OneZero, 'Customer First. People Always.' is not a slogan, it is an operating principle," says John Christly, Vice President of Commercial Services. "In healthcare and other mission-critical environments, cybersecurity decisions are inseparable from human outcomes."

Christly explains that every control, recommendation, and incident response plan is evaluated through the lens of how it affects patient safety, clinical workflows, and frontline staff. "Our role is to reduce risk without introducing unnecessary complexity, ensuring security supports care delivery rather than obstructing it," he says.

Where Healthcare Cyber Risk Often Hides

According to Christly, many of today's most significant healthcare cybersecurity risks stem from a convergence of aging infrastructure, rapid digitization, and ongoing staffing constraints.

"Many healthcare organizations are operating with legacy systems that were never designed for today's threat environment," he says. "Yet those systems are now deeply interconnected with cloud platforms, third-party vendors, and remote access technologies."



John Christly

Unexpected vulnerabilities often emerge at the boundaries between traditional silos. Christly points to medical devices, operational technology, identity and access management, and third-party integrations as areas where visibility and governance are frequently inconsistent.

"We also see organizations underestimate how

quickly a non-clinical system compromise, such as billing, scheduling, or facilities management, can cascade into clinical disruption," he says. "Attackers understand this interconnectedness and increasingly exploit it."

Applying National Security Discipline to Civilian Healthcare

OneZero's work spans federal, defense, and private-sector clients, an experience Christly says directly informs the company's healthcare approach.

"Our cross-sector experience allows us to bring disciplined, battle-tested practices into civilian environments in a way that is pragmatic rather than bureaucratic," he says.

Federal and defense work requires rigor in risk management, resilience planning, documentation, and accountability, principles that are increasingly relevant to healthcare as regulatory scrutiny intensifies.

"What we translate is not complexity, but maturity," Christly explains. "Healthcare organizations benefit from structured approaches to governance, incident response, supply chain risk, and continuity planning that have long been standard in national security and critical infrastructure sectors."

Crucially, those practices are adapted to healthcare's pace and resource realities. "We tailor those practices to fit healthcare's culture, ensuring they are achievable and sustainable," he says.

Designing Cybersecurity for Real-World Stress

While cybersecurity is often framed as a technical discipline, Christly emphasizes that breaches ultimately affect people and patient care.

"We deliberately design cybersecurity programs to function under stress, not just on paper," he says. "Advanced monitoring and technical controls are important, but they are ineffective if people do not understand how to act on them during an incident."

OneZero integrates cybersecurity directly into operational workflows, focusing on role clarity, decision paths, and scenario-based exercises that include clinical, administrative, and executive stakeholders.

"When an incident occurs, the goal is not perfect technical response," Christly says. "It is calm, informed action that protects patients, maintains trust, and restores operations quickly."

Executive-Level Guidance Without Overload

For healthcare organizations without in-house cybersecurity leadership, OneZero's Virtual Chief Information Security Officer (vCISO) and cyber risk management services provide executive-level guidance without the burden of a full-time role.

"Many healthcare organizations do not need a full-time executive cybersecurity role, but they do need executive-level guidance," Christly says. "Our Virtual Chief Information Security Officer model provides that leadership without the overhead."

He adds that OneZero acts as an extension of the leadership team, helping organizations prioritize risk, align security with care and business objectives, and make defensible investment decisions.

"Importantly, we absorb complexity on behalf of our clients," Christly says. "We translate regulatory requirements, risk assessments, and technical findings into clear, actionable guidance."

Preparing for the Next Five Years

Looking ahead, Christly says healthcare leaders must shift from a prevention-only mindset to one centered on resilience.

"No organization can assume it will avoid incidents entirely," he says. "The differentiator will be how quickly and safely operations can continue and recover."

Key trends include increased regulatory expectations for cybersecurity governance, deeper scrutiny of third-party and supply chain risk, and growing convergence between information technology and clinical and operational systems. Artificial intelligence will further raise the stakes on both sides of the threat landscape.

"Organizations that invest now in visibility, identity management, workforce training, and incident preparedness will be far better positioned than those that focus solely on perimeter defenses," Christly says.

Trust as the Ultimate Measure

At its core, Christly says healthcare cybersecurity is about trust.

"Patients trust providers with their lives and their most sensitive information," he says. "Maintaining that trust requires more than compliance or technology—it requires leadership, empathy, and preparedness."

"At OneZero, we view our role as helping healthcare organizations build confidence," he adds. "Confidence that their systems support care, that their teams know what to do when challenges arise, and that security is an enabler of mission, not a barrier."

For more information about OneZero Solutions and its cybersecurity and IT services for healthcare and critical infrastructure, visit www.onezerollc.com.

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

Good Samaritan Medical Center Names Tracey Crandall Chief Human Resources Officer

Good Samaritan Medical Center names Tracey Crandall, MBA, SHRM-SCP, to the position of Chief Human Resources Officer (CHRO). Crandall joins Palm Beach Health Network and Good Samaritan Medical Center from a hospital in Rhode Island where she served as Vice President of Human Resources.

Crandall brings a proven track record of success in leading human resources strategy across complex healthcare organizations, supporting stability, growth, and operational excellence. She is recognized for building and scaling high-performing HR teams in decentralized and matrixed environments, ensuring workforce strategy is closely aligned with organizational goals and patient-centered care. Her experience spans mergers, acquisitions, and organizational transformations, where she has consistently delivered sustainable results through strategic workforce planning and talent optimization.

She holds a Master of Business Administration with a concentration in human resources and is SHRM-SCP certified, bringing both strategic insight and operational discipline to her leadership roles.



Tracey Crandall

Palm Beach Gardens Medical Center Announces 2026 Governing Board

Palm Beach Gardens Medical Center has announced the members of its 2026 Governing Board, a respected group of community and industry leaders who will help guide the hospital's strategic priorities in the year ahead. Representing a broad cross-section of expertise, including healthcare, business, law, government, and civic service, the board plays an important role in supporting the hospital's mission and long-term growth.

The 2026 Governing Board includes two new members: Timothy Burke and Dr. Helda Gomez.

Full board:

Jose A. DeOlazabal, DO (Chair)

Dana P. Middleton (Vice Chair)

Shady S. Salib, MD

Stephen S. Mathison, Esq.

Robert Premuroso

Leslie Diaz, MD

Keith E. Bryer

Robert J. Avino, MD

Andres E. Suarez, MD

Timothy Burke

Dr. Helda Gomez

Eugene M. and Christine E. Lynn Cancer Institute Names Robert H. Press, MD, Clinical Director of Proton Therapy

Board-certified radiation oncologist Robert H. Press, M.D., has joined the Eugene M. and Christine E. Lynn Cancer Institute, part of Baptist Health, at Boca Raton Regional Hospital, and will serve as clinical director of proton therapy. He specializes in treating central nervous system tumors, head and neck cancers and thoracic malignancies.

Dr. Press comes to Lynn Cancer Institute from Baptist Health Miami Cancer Institute, where he was an attending physician and head of the thoracic service line in the Department of Radiation Oncology. Prior to joining Baptist Health in 2023, he was a radiation oncologist at New York Proton Center, serving as the disease site lead for both central nervous system tumors and head and neck cancers. During this time, he also served as an assistant clinical professor at Mt. Sinai Hospital and a visiting investigator for the Department of Radiation Oncology at Memorial Sloan Kettering Cancer Center in New York City.

After earning his medical degree at Emory University School of Medicine, Dr. Press remained at the university to complete his internal medicine internship. He completed his radiation oncology residency at Winship Cancer Institute of Emory University, serving as chief resident during his final year.



Dr. Robert H. Press

Holy Cross Medical Group Appoints Lawrence Ward, MD, MPH, MACP, as Chief Medical Officer

Holy Cross Health is pleased to announce the appointment of Lawrence Ward, MD, MPH, MACP, as its new Chief Medical Officer for Holy Cross Medical Group (HCMG). Dr. Ward is a nationally recognized physician executive with more than 25 years of clinical and leadership experience across major academic and integrated health systems.

Dr. Ward most recently served as Vice President of Physician Services & Clinical Integration at Bayhealth Medical Center in Dover, Delaware.

A board certified general internist, Dr. Ward has been recognized as a "Top Doc" by Philadelphia Magazine and has held faculty and leadership appointments at Thomas Jefferson University, Temple University and the University of Pennsylvania. He has earned multiple teaching awards throughout his career and, in 2025, was honored as a Master of the American College of Physicians—one of the organization's highest distinctions.



Dr. Lawrence Ward

Cardiothoracic Surgeon Melissa Levack, MD, Joins Palm Beach Health Network Physician Group

Cardiothoracic surgeon Melissa Levack, M.D., joins the Palm Beach Health Network Physician Group. She is on staff at Delray Medical Center and Palm Beach Gardens Medical Center.

Throughout her career, Dr. Levack has held key leadership positions and has remained deeply engaged in research, with a strong publication record across leading surgical and cardiovascular journals. Her work includes outcomes research in proximal aortic surgery, valve and annular biomechanics, advanced cardiac imaging and 3D echocardiography modeling, and clinical studies relevant to contemporary valve interventions, including TAVR-focused research and registry analyses.

Dr. Levack graduated cum laude from Dartmouth College and earned her medical degree cum laude from Emory University School of Medicine. She completed rigorous postgraduate training through general surgery at Massachusetts General Hospital, including service as chief resident, followed by a dedicated postdoctoral research fellowship at the University of Pennsylvania's Gorman Cardiovascular Research Laboratory. She then pursued advanced thoracic and cardiac surgery residency training at Cleveland Clinic, serving as chief cardiac surgery resident, before joining Vanderbilt's faculty as an Assistant Professor of Cardiac Surgery and advancing into major educational, mentorship, and leadership roles across the institution and the broader cardiothoracic community.



Dr. Melissa Levack

Cleveland Clinic Martin North Hospital Welcomes Cardiothoracic Surgeon

Cleveland Clinic Martin North Hospital has added Anibal Ibanez, M.D., to the medical staff. A highly trained cardiothoracic surgeon with extensive experience in complex cardiac and aortic procedures, Dr. Ibanez brings advanced surgical expertise and a strong commitment to delivering exceptional, patient-centered care. Dr. Ibanez completed a prestigious Advanced Cardiothoracic Surgery Fellowship at the Cleveland Clinic Foundation in Cleveland, Ohio, where he gained specialized training in state-of-the-art surgical and minimally invasive techniques. He completed his Cardiothoracic Surgery residency at the University of Chile in Santiago and earned his medical degree from the University of Santiago in Chile.



Dr. Anibal Ibanez

Cleveland Clinic Weston Hospital Welcomes Headache Medicine Specialist

Aysha Siddika, M.D., has joined the medical staff at Cleveland Clinic Weston Hospital. She brings a wealth of expertise in diagnosing and treating complex headache disorders. Board-certified by the American Board of Psychiatry and Neurology, Dr. Siddika completed her fellowship in Headache Medicine at the University of Miami Miller School of Medicine. She received her residency training in Neurology and internship in Internal Medicine at the University of Connecticut School of Medicine in Hartford, Connecticut. Her medical degree was earned at St. George's University School of Medicine in Grenada.



Dr. Aysha Siddika

Cleveland Clinic Tradition Hospital Adds Heart Failure and Transplant Cardiologist

Line Kemeyou, M.D., an advanced heart failure and transplant cardiologist has joined the medical staff at Cleveland Clinic Tradition Hospital. Dr. Kemeyou is board certified by the American Board of Internal Medicine in Advanced Heart Failure and Transplant Cardiology, Cardiovascular Disease and Internal Medicine. Dr. Kemeyou completed advanced fellowship training in Advanced Heart Failure and Transplant Cardiology at the University of Utah School of Medicine in Salt Lake City, followed by a Cardiovascular Disease Fellowship at the University of Florida College of Medicine in Jacksonville. She completed her internal medicine residency at Parkland Health & Hospital System in Dallas and earned her medical degree from The University of Texas Southwestern Medical School.



Dr. Line Kemeyou

Cleveland Clinic Indian River Hospital Expands Orthopaedic Team

Cleveland Clinic Indian River Hospital is expanding access to advanced orthopaedic, spine, and physical therapy services on the Treasure Coast through the acquisition of the Orthopaedic Center of Vero Beach. As part of this expansion, Cleveland Clinic Indian River Hospital is pleased to welcome orthopaedic surgeons Carl P. DiLella, D.O., and Richard Steinfeld, M.D., MBA, to its medical staff. Dr. DiLella earned his undergraduate degree from Georgetown University and received his medical degree from the Philadelphia College of Osteopathic Medicine. He completed a rotating internship and orthopedic surgery residency at Midwestern University/Chicago College of Osteopathic Medicine, with specialty training at the University of Chicago Hospitals and Northwestern Memorial Hospital. During residency, he was selected for the AO Trauma Fellowship, which included advanced training in Davos, Switzerland. He went on to complete a sports medicine fellowship at the Los Angeles Orthopedic Institute, gaining experience in complex arthroscopic knee and shoulder procedures. Dr. Steinfeld completed his medical education at the University of Medicine and Dentistry of New Jersey and his orthopaedic surgery residency at Mayo Clinic, where he also completed a general surgery internship. He pursued advanced subspecialty training through a clinical fellowship in knee surgery in Australia and later earned a Master of Business Administration through the University of Tennessee Physician Executive MBA Program.



Dr. Carl P. DiLella



Dr. Richard Steinfeld

**E-mail Your Editorial Submissions to
editorial@southfloridahospitalnews.com**

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

The 32nd Conine All-Star Golf Classic Continues Legacy of Giving for Joe Dimaggio Children's Hospital Foundation

More than \$600,000 was raised during 32nd Annual Conine All-Star Golf Classic where golfers, community leaders and philanthropists recently gathered for an inspiring day on the green in support of Joe DiMaggio Children's Hospital at the Fort Lauderdale Country Club. This exciting day was one filled with golf, hope and connection.

Co-founded by Jeff Conine, former MLB star and Miami Marlin's Hall of Famer, and his wife Cindy Conine with presenting sponsor the Levitz Family Foundation, this year's tournament continued a legacy of giving back that has spanned more than three decades. The Conine All-Star Golf Classic proceeds benefit Joe DiMaggio Children's Hospital's mission to deliver exceptional, family-centered pediatric care to children across South Florida and beyond.

Since its inception, the Conine Classic has raised millions to support families at Joe DiMaggio Children's Hospital. The tournament has helped cover the operating expenses of the Conine Clubhouse, a home-away-from-home for families of children receiving long-term treatment. The Clubhouse is a nonprofit residence funded through donations to the Joe DiMaggio Children's Hospital Foundation. With each year, the impact grows, highlighting how friendly competition, community and philanthropy can come together in powerful ways.



Levitz Family Foundation (l-r) Ron Gasserman, Pepi Valdivia, Zach Christian, Jack Carroll, Greg Marsh, Jeff Conine

Good Samaritan Medical Center Successfully Performs Focal Cryoablation for Prostate Cancer Using Advanced KOELIS Trinity® Fusion and Varian Cryoablation Technology

Good Samaritan Medical Center announced a major advancement in minimally invasive prostate cancer treatment with the successful completion of a Focal Cryoablation using MRI overlay technology. The milestone procedure was performed by urologic surgeon Dr. Joshua S. Jue. Good Sam and Dr. Jue are the only hospital and surgeon from Orlando through Miami to perform the surgery. The procedure combined the cutting-edge precision of the KOELIS Trinity® 3D fusion platform with the power and control of the Varian CryoCare cryoablation system, in order to deliver a highly targeted treatment option designed to preserve healthy tissue and reduce treatment side effects.



Dr. Joshua S. Jue

Precision Fusion Technology for Personalized Treatment

The KOELIS Trinity® system enables physicians to create a real-time, patient-specific 3D prostate map using advanced ultrasound and MRI fusion. Its exclusive Organ-Based Tracking® technology helps compensate for motion and deformation, delivering millimetric accuracy for targeted procedures. The platform supports precise lesion localization, treatment planning, and continuous quality control, making it especially suited for focal therapy approaches. Pre-treatment MRI data, PSMA PET scan data, and prior biopsy data can be overlaid onto the real-time image within the operating room. This allows the surgeon to visualize the cancerous areas identified on prior imaging and biopsy during the treatment planning and delivery, in order to limit tissue destruction to the small area within the prostate previously proven to be cancerous. The fusion technology provides multiple layers of additional information to ensure that the tumor is treated, while healthy surrounding tissue is preserved.

Targeted Cryotherapy With Varian's CryoCare System

Dr. Jue utilized the Varian CryoCare cryotherapy system as his energy source, which provides real-time monitoring, streamlined workflow, and highly customizable probe control. Varian's V-Probes produce spherical "ice-ball" formations at lethal temperatures (down to -40°C), allowing for precise destruction of cancerous tissue. The system's probe-integrated temperature sensors, planning software, and rapid cooling cycles contribute to safe, effective, and repeatable outcomes. The software, urethral warming catheter, and thermocouples help preserve critical structures and noncancerous prostate tissue. Overall, needles are placed through the skin to deliver the treatment, and the patient returns home the same day without any incisions or sutures.

16th Annual Holy Cross Golf Classic Raises Over \$280,000 for New Mammography Equipment

The 16th Annual Holy Cross Health Golf Classic, presented by The Harry T. Mangurian, Jr. Foundation, hosted at Coral Ridge Country Club, raised more than \$280,000. These funds will help to accelerate access to next generation mammography technology at the Dorothy Mangurian Comprehensive Women's Center, supporting Holy Cross Health's ongoing commitment to earlier detection and improved patient experience. The daylong event featured lunch followed by a full round of golf, an awards reception and dinner, where guests came together in support of women's health. In addition to on-course contests, attendees supported the cause through a live and silent auction and special giving opportunities throughout the program.

"We are deeply grateful to our corporate leaders and longtime supporters who came together for this tournament and believe in our mission," said Pierre Monice, MBA, FACHE, President and Chief Executive Officer at Holy Cross Health. "Because of their generosity, we're able to invest in advanced mammography technology that will help detect breast cancer earlier and offer peace of mind to the women and families we serve. This is more than new equipment, it's a powerful step forward in delivering compassionate, lifesaving care to our community."

The 16th Annual Holy Cross Health Golf Classic was made possible thanks to the generosity of The Harry T. Mangurian, Jr. Foundation, BLU by ThriveWell, Stiles, Gunther Motor Company, Goldman Sachs, Sandy and John Harrington, David and Bette Lauer, Alice and Doug Donn, The Wheelchair Foundation, The Thomas Family Foundation, il Mulino, Priscilla and John Oughton, and Sheri and Don Whittington.



(l-r) Pierre Monice, President and Chief Executive Officer at Holy Cross Health, and Rudy Molinet, Chair of the Board of Directors of Holy Cross Health Photo Credit: Downtown Photo

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A message from our President

The Graying of Healthcare: Navigating a Generational Workforce Inflection Point

BY JAIME CALDWELL

The healthcare workforce in the United States is undergoing a structural transformation driven by demographics. The “graying” of the workforce—particularly among physicians, nurses, and allied health professionals—coincides with the rapid ascendance of younger generations whose expectations about work, leadership, and organizational culture differ markedly from their predecessors. The result is not merely a generational shift, but a recalibration of workforce strategy across the industry.

According to data from the Association of American Medical Colleges (AAMC), nearly 20 percent of practicing physicians are age 65 or older. In nursing, the median age of registered nurses hovers in the early 50s, with a significant cohort expected to retire over the next decade. This demographic compression affects clinical capacity, leadership continuity, and institutional memory. As seasoned clinicians exit the workforce—accelerated in some cases by burnout during the COVID-19 pandemic—healthcare organizations face the dual challenge of replacing technical expertise while also reimagining workforce engagement models.

The operational implications are substantial. First, workforce supply constraints intensify. Retirements outpace the pipeline in certain specialties, particularly in primary care and rural health. Organizations are responding with expanded residency slots, international recruitment strategies, and partnerships with academic institutions to strengthen talent pipelines. Some health systems are also investing in “encore careers,” creating flexible roles for late-career clinicians that preserve mentorship and part-time clinical capacity without the demands of full schedules.

Second, leadership succession has become a strategic priority. Many executive teams historically advanced through tenure-based progression, but organizations are now formalizing leadership development programs earlier in clinicians’ careers. Structured mentorship, cross-functional exposure, and executive fellowships are designed to accelerate readiness among Generation X and Millennial leaders. The goal is to avoid leadership vacuums as Baby Boomers retire from C-suite and departmental roles.

At the same time, the expectations of emerging generations—Millennials and Generation Z—are reshaping employment value propositions. These cohorts prioritize flexibility, purpose alignment, well-being, and opportunities for rapid professional growth. Unlike previous generations that may have equated longevity with loyalty, younger workers often evaluate employers based on culture, transparency,



Jaime Caldwell

and work-life integration.

Healthcare organizations are adapting in several concrete ways. First, Flexible Scheduling and Alternative Staffing Models. The traditional five-day clinic schedules and 12-hour hospital shifts are being reexamined.

Second, Investment in Well-Being Infrastructure. Burnout remains a systemic risk. Younger clinicians, in particular, are vocal about workload intensity and administrative burden. Health systems are investing in scribes, AI-assisted documentation, peer support programs, and mental health services. Executive dashboards increasingly include workforce engagement and burnout metrics alongside financial indicators,

signaling that well-being is now considered as a core performance variable rather than a peripheral concern.

Third, Cultural and Mission Alignment. New generations often seek employment with organizations that demonstrate tangible commitments to equity, sustainability, and community impact. Hospitals are responding by amplifying diversity, equity, and inclusion initiatives, strengthening community benefit programming, and creating employee resource groups.

And, fourth, Accelerated Career Pathways. Millennial and Gen Z professionals frequently expect faster skill acquisition and clearer advancement tracks. Healthcare employers are responding with tuition reimbursement, micro-credentialing programs, leadership tracks for nurses and allied health professionals, and internal mobility platforms.

Technology serves as both a bridge and a fault line in this transition. While younger clinicians are generally digital natives, older clinicians may experience friction (I know I do) with electronic health records and emerging AI tools.

Intergenerational workforce management also requires nuanced leadership. Baby Boomers often value autonomy and professional authority derived from tenure, while younger workers may expect collaborative governance and frequent feedback. Effective organizations are investing in leadership training focused on emotional intelligence, conflict resolution, and adaptive management styles. Multigenerational advisory councils and reverse-mentorship programs are becoming more common, enabling bidirectional knowledge exchange.

Financially, the demographic shift has implications for compensation structures. Retention incentives for late-career clinicians must be balanced against competitive recruitment packages for early-career professionals burdened by educational debt. Some systems are experimenting with loan repayment programs, retention bonuses tied to mentorship contributions, and phased retirement packages that reduce sudden workforce cliffs.

Ultimately, the graying of the healthcare workforce is not solely a staffing issue; it is a strategic inflection point. Organizations that treat generational change as a compliance exercise—simply filling vacancies—risk erosion of culture and continuity. Those that approach it as a transformation opportunity can strengthen resilience, diversify leadership pipelines, and modernize workforce design.

Outpatient Care Continues to Grow at Florida Coast Medical Center

The Medical Office Building (MOB) adjacent to the newly opened Florida Coast Medical Center (FCMC) is continuing its rapid expansion, announcing that one final practice space remains available for a healthcare group looking to join a growing network of established specialists on the campus.

Since opening alongside FCMC in September 2025, the MOB has quickly become a hub for advanced outpatient care. The building is already home to Independence ENT, Stuart Cardiology, and the Palm Beach Neuroscience Institute in conjunction with Palm Beach Health Network Physician Group, bringing essential specialties directly to the Treasure Coast community.

The continued growth reflects the medical campus’ mission to expand access to high-quality healthcare and provide convenient, coordinated services in one location.

In addition to office-based clinical practices, the MOB is preparing for the next major enhancement to the campus: a new ambulatory surgery center planned for the second floor, expected to open next year. This addition will bring outpatient surgical capabilities even closer to patients, offering convenience, efficiency, and the latest minimally invasive technologies.



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FAU College of Nursing Named WCSI's Lead Caring Science Academic Affiliate

BY VANESSA ORR

Florida Atlantic University's (FAU) Christine E. Lynn College of Nursing recently received a rare honor: it was named the Lead Caring Science Academic Affiliate of the Watson Caring Science Institute (WCSI). This new national/international designation recognizes the college's legacy and global leadership in advancing caring science in nursing education, practice, research and theory.

"This is a generational milestone for our college and for nursing," said Cameron G. Duncan, Ph.D., dean of the Christine E. Lynn College of Nursing. "This designation highlights FAU's four-decades of leadership in caring science and charges us with helping set the national and global agenda for how the discipline evolves from classroom to bedside to community."

WCSI has formal Caring Science Global Networks and programs in over 19 countries, especially in Latin America, and this Global WCSI Network identified FAU as the Lead Caring Science Academic system.

"WCSI and FAU have a similar history and commitment to caring science education, practice, research and leadership," said Watson Caring Science Institute Executive Director Julie Watson. "Dean Duncan recognizes our shared paths in developing theories, philosophies and practices of human caring/caring science scholarship, supporting Christine E. Lynn's mission to expand caring and holistic health excellence."

For FAU students and faculty, this lead affiliate status means front-row access to the most advanced thinking, training and scholarship in caring science, along with meaningful opportunities to help shape its future through curriculum design, research and practice

partnerships.

"For nurses across our clinical affiliates, it signals a disciplined, evidence-informed path to cultures of compassion, dignity and authentic human connection—the human outcomes patients feel and the professional outcomes clinicians need," said Dean Duncan. "And because caring science is the throughline of our Bachelor of Science in Nursing to Doctor of Nursing Practice/Doctor of Philosophy programs, this partnership strengthens the professional identity formation of every nurse we graduate."

As part of this collaboration, the organizations will work together to launch continuing education courses focused on caring science, academia and practice; collaborate on national and international events including conferences, webinars, podcasts and scholarly exchanges; expand opportunities for faculty and student engagement in caring science curriculum development, pedagogical innovation and research, and elevate caring science scholarship, showcasing the college's longstanding contributions to theory development and holistic nursing practice.

"We are stepping into a collaborative relationship that involves research, education, and community/global outreach," said Watson. "The gifts, such as technology-resources-experiences that FAU brings to our shared collaboration, will support the evolution and innovation of future and current programming."

Recently WCSI has offered FAU senior faculty international platforms via webinars and conferences to showcase the valuable educational offerings at FAU. FAU Ph.D. students have engaged with WCSI in self-caring and holistic healing modalities as part of their curriculum.

"Nursing is at an inflection point, and this partnership reflects a commitment to a future where caring is not a soft add-on but a rigorous, scalable science that



(l-r) Lori M. Gdanetz, WCSI Director of Education and Professional Development; Julie Watson, WCSI Executive Director and Managing Editor of Lotus Library; Cameron Duncan, Dean of the Christine E. Lynn College of Nursing; Dr. Jean Watson, WCSI Founder/Director

advances outcomes and sustains the workforce," said Dean Duncan. "As WCSI's lead academic affiliate, Florida Atlantic Nursing will help chart that course, translating caring science into everyday practices that renew the profession and improve lives."

"The current healthcare model is awakening to the essential value of human caring in the midst of prominence of technology," agreed Watson. "This evolving view for humankind returns us to the heart of our humanity; it invites and requires knowledge, practice and scholarship in nursing to sustain

human caring for humanity, the planet and our collective well-being."

The Christine E. Lynn College of Nursing offers the Advanced Holistic Practice and Nurse Coach Certificate, grounded in caring, a 12-credit graduate certificate that advances knowledge of the contemporary views of healing and holistic nursing practice.

The certificate is available for non-degree seeking students and is delivered fully online. Learn more at <https://www.fau.edu/nursing/academics/master-of-science-nursing-program/advanced-holistic-practice-nurse-coach-certificate/>

Accolades Accolades Accolades Accolades

Sarasota Memorial CIO Pam Ramhofer Receives Florida's Prestigious ORBIE Award

Pamela Ramhofer, chief information officer at Sarasota Memorial Health Care System, was recently recognized with Florida's prestigious ORBIE Award. She was one of six leading CIOs to win the prestigious leadership award for industry innovation and impact.

Ramhofer has served as chief information officer at SMH since May 2015 and has worked at the 100-year-old community health system for more than 40 years. Early in her career, she worked as a cardiac and intensive care nurse and played a leading role in the implementation of electronic medical records. After 12 years as a nurse, she transitioned to clinical and business systems, where she has directed major IT initiatives supporting critical systems.



Pam Ramhofer

Sarasota Memorial Hospital Ranks Among Nation's 50 Top Cardiovascular Hospitals

Sarasota Memorial Hospital was recognized among the nation's "50 Top Cardiovascular Hospitals®" in an independent quality analysis provided by Premier Inc. and published in Modern Healthcare.

According to the 2026 report, SMH and other top-performing hospitals have:

- Better survival rates: Top facilities had significantly higher inpatient survival rates (24-56%) across all patient groups – heart attacks, heart failure, cardiac bypass and coronary angioplasty.
- Fewer complications: Patients undergoing cardiac bypass and angioplasty at top hospitals had shorter hospital stays and lower complications.
- Fewer readmissions: Patients treated at top hospitals had lower 30-day readmission rates as well as higher 30-day survival rates.
- Better patient experience: Patients had a better experience (HCAHPS survey),
- Lower costs: Top hospitals showed lower average costs per patient case in all patient groups. The most notable difference was in the heart failure patient group, with a 19.6 percent difference (\$9,859 vs. \$12,264, respectively).

SMH-Sarasota was the only hospital in the Tampa Bay region that made this year's list. David Verinder, CEO of Sarasota Memorial Health Care System, said the recognition belongs to every member of Sarasota Memorial's heart team, as well as the many clinicians and staff that help support SMH's safe, high-quality care.



David Verinder



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editorial@southfloridahospitalnews.com

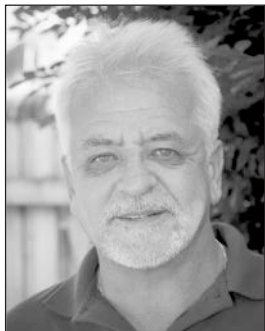
The Hidden Health Hazard: How HVAC Air Duct Leakage Affects Indoor Air Quality in 24-Hour Healthcare Facilities

In 24-hour healthcare facilities, where patients' well-being and staff productivity are paramount, maintaining optimal indoor air quality (IAQ) is critical. HVAC systems, responsible for regulating air temperature, humidity, and ventilation, play a crucial role in ensuring a safe and comfortable environment. However, in addition to ensuring the facility's ductwork and equipment is visually clean, unnoticed air duct leakage can severely compromise air quality, creating risks that are often overlooked but can have serious consequences.

The Dangers of Air Duct Leakage

Air duct leakage occurs when air escapes from ducts, resulting in an inefficient HVAC system. In healthcare settings, this leads to the introduction of contaminants into the air, increased energy consumption, and difficulty maintaining proper ventilation. The impact on indoor air quality can be profound and particularly harmful in healthcare environments where vulnerable populations are at greater risk.

The leaks can allow pollutants such as dust, mold spores, and bacteria to enter the air supply. In hospitals and healthcare facilities, this is especially concerning because patients may already have



BY MICHAEL TEBOR,
ASCE, CIE, CMR -
STATE LICENSED
MRSA 1924

compromised immune systems, respiratory conditions, or sensitivity to allergens. Poor air quality can exacerbate existing health problems and contribute to the spread of airborne infections. Furthermore, improper ventilation resulting from duct leaks may cause an increase in humidity levels, which can foster the growth of harmful mold or mildew.

The Role of HVAC Ductwork Leak Repair, Test & Balance, ASHRAE Standards, and CDC Guidelines

Addressing air duct leakage requires more than just a quick fix; it demands a comprehensive approach that ensures the HVAC system operates as efficiently and effectively as possible. As AeroSeal® service providers, we use automated technology for detecting and sealing leakage in ductwork using a patented NON-TOXIC sealant. This process drives sealant particles directly to the leak sites to seal them from the inside. Both non-invasive and verifiable, AeroSeal® provides all the benefits of IAQ and much more.

Additionally, professional diagnostic tools, like Test & Balance (T&B) services, are essential in assessing HVAC system performance.

Adherence to established guidelines,

such as those outlined by the American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) and the Centers for Disease Control and Prevention (CDC), is also essential. ASHRAE standards, specifically Standard 170, provide guidance on ventilation for healthcare facilities, ensuring that adequate air exchanges occur to reduce the risk of airborne diseases. These standards focus on the importance of maintaining ventilation systems to reduce contaminant buildup, which air duct leakage can significantly undermine.

The CDC's guidelines also emphasize the importance of maintaining high indoor air quality in healthcare settings. For instance, poor ventilation can contribute to the spread of infectious diseases, which is a major concern in hospitals where pathogens are easily transmitted. Compliance with both ASHRAE and CDC recommendations helps ensure that healthcare facilities are not only meeting minimum standards but are proactively working to protect patients and staff from potential harm.

Proactive Diagnostics and Repair: A Vital Step for Health and Safety

To prevent the detrimental effects of HVAC air duct leakage, healthcare facilities must prioritize routine air duct diagnostics and repair. Implementing regular inspections and testing with certified professionals can identify small issues before they turn into large-scale problems.

By utilizing advanced diagnostic tools, healthcare facilities can pinpoint air duct leaks and address them promptly. This leads to improved indoor air quality, a healthier environment for patients, staff, and visitors and a reduction in energy waste.

In conclusion, HVAC air duct leakage is not just an inconvenience—it is a serious issue that directly impacts the indoor air quality of healthcare facilities. With increased awareness and proactive measures such as air duct diagnostics and repair, facilities can comply with industry guidelines, protect vulnerable patients, and ensure a safer, healthier environment for all.

To learn more about AeroSeal® leakage repair solutions, call Air Duct Aseptics at 888-707-7763.

Michael Tebor is Vice President of Air Duct Aseptics, a NADCA certified air duct cleaning company with more than 35 years' experience specializing in providing Certified Duct Cleaning and indoor air quality solutions to Florida's top health care facilities. Michael is a Certified Air Systems Cleaning Specialist (NADCA), a Certified Indoor Environmentalist (ACAC) and a Certified Mold Remediator (ACAC). He is also a state licensed Mold Assessor. The company's skill sets, experience and multi-disciplinary approach to problem solving sets it apart in the industry. Michael Tebor can be reached at 888-707-7763 or visit www.ADAFlorida.com.

HCA Florida Healthcare Announces Opening of New HCA Florida City Center Emergency

HCA Florida University Hospital announces the opening of a new emergency care center as part of HCA Florida Healthcare's continued expansion across the state. HCA Florida City Center Emergency, a 10,860-square-foot facility in Pembroke Pines, provides a full range of medical services for children and adults experiencing emergent issues.

This new, state-of-the-art ER is staffed with board-certified emergency medicine physicians and nurses, 24-hours a day, 365 days a year, just like an emergency room that is housed within the walls of a hospital. Physicians and colleagues treat a range of general and specific conditions, including infections, chest pain and broken bones, and offer several diagnostic services on site.

HCA Florida City Center Emergency enables HCA Florida Healthcare to offer patient-centered, high-quality care to more Floridians and expands access to HCA Florida Healthcare's advanced treatments, innovative technologies and experienced care teams. Designed to meet the community's growing healthcare needs, HCA Florida City Center Emergency features:

- 11 private treatment rooms
- 1 dedicated triage room
- 1 trauma resuscitation room
- Digital diagnostic equipment, including CT, ultrasound and portable X-ray machines



- On-site laboratory for rapid diagnostics
- Telemedicine technology with a specific focus on stroke care and behavioral health
- Care Like Family, 24/7/365

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Delray Medical Center Expands Advanced Robotic Care with New State-of-the-Art Operating Room



Delray Medical Center is continuing to invest in the future of patient care with the opening of a new, state-of-the-art operating room designed to support some of the most advanced robotic and minimally invasive procedures available today, helping patients recover faster and return more quickly to the lives they love. The \$1.9 million operating room spans 450 square feet and completes the hospital's operating room procedural suites, bringing the total to 21 fully equipped operating rooms. Designed to function similarly to an ambulatory surgery center, the enhanced procedural area allows patients to prepare, recover, and return home from the same location, streamlining care while improving efficiency, comfort, and outcomes. The new operating room is equipped to support a wide range of specialties, including urology, breast surgery, general surgery, ENT, thoracic surgery, and interventional pulmonology. All of the following advanced technologies will be performed in this operating room:

- Robotic-assisted surgery, including the latest-generation da Vinci robotic platform
- Aquablation therapy, a minimally invasive, robotic treatment for benign prostatic hyperplasia (BPH)
- ION robotic-assisted bronchoscopy, used for precise lung biopsies and surgical planning

The Tamer Family's Generous Commitment to Advancing Women's Health - InventUM

UHealth—University of Miami Health System announced a landmark philanthropic gift from Tony and Sandra Tamer, whose vision for advancing health care in South Florida will redefine women's health for generations to come.

The Tamers' extraordinary gift establishes the Tamer Institute for Women's Health within UHealth and the University of Miami Miller School of Medicine. This flagship program will combine clinical excellence, research innovation and education to deliver seamless, comprehensive patient care across the lifespan, from prevention to complex specialty treatments.

The institute will offer:

- A holistic care model with co-located multidisciplinary teams
- Personalized treatment experiences tailored to life stages
- Family-friendly design and flexible scheduling to meet real-life responsibilities
- Accessibility through its location on the university's medical campus

The institute will serve as a hub for research and education, convening leading practitioners and scientists to anchor innovative treatments and community transformation through evidence-based care.



Outpatient Care Continues to Grow at Florida Coast Medical Center

The Medical Office Building (MOB) adjacent to the newly opened Florida Coast Medical Center (FCMC) is continuing its rapid expansion, announcing that one final practice space remains available for a healthcare group looking to join a growing network of established specialists on the campus.

Since opening alongside FCMC in September 2025, the MOB has quickly become a hub for advanced outpatient care. The building is already home to Independence ENT, Stuart Cardiology, and the Palm Beach Neuroscience Institute in conjunction with Palm Beach Health Network Physician Group, bringing essential specialties directly to the Treasure Coast community.

The continued growth reflects the medical campus' mission to expand access to high-quality healthcare and provide convenient, coordinated services in one location. In addition to office-based clinical practices, the MOB is preparing for the next major enhancement to the campus: a new ambulatory surgery center planned for the second floor, expected to open next year. This addition will bring outpatient surgical capabilities even closer to patients, offering convenience, efficiency, and the latest minimally invasive technologies.



Hospital Board Approves Plan for Outpatient Endoscopy Center Next to SMH-Venice Campus



Sharon Roush

Sarasota Memorial Health Care System is moving forward with plans to open a new endoscopy and digestive health center next to its Venice hospital campus.

The Sarasota County Public Hospital Board recently approved plans for the \$12 million outpatient center, which will be located in a leased facility that is being developed contiguous to the SMH-Venice campus at 2695 Curry Lane, Nokomis.

Flagship Healthcare Properties is developing a three-story, 54,000-square-foot medical office building on the vacant parcel adjacent to the Venice hospital campus. Sarasota Memorial signed a lease to occupy at least one floor with outpatient endoscopy services.

"We are looking forward to opening the outpatient center and expanding capacity as soon as possible," said SMH-Venice President Sharon Roush. "The need for screenings, both routine outpatient and inpatient, has been increasing every year. Expanding our capacity will reduce wait times and the amount of time from screening to diagnosis, ensuring timely care for all of our patients."

Since the SMH-Venice hospital opened in late 2021, the volume of gastrointestinal procedures has nearly quadrupled,

from just over 1,000 in fiscal 2022 to 3,762 in fiscal 2025. Currently, both inpatient and outpatient endoscopies are performed inside the hospital.

Expanding endoscopy services to an adjacent center will allow the SMH-Venice gastrointestinal team to schedule more colonoscopies and routine diagnostic procedures outside the hospital, while increasing capacity to treat acute, complex cases inside the hospital, Roush said. The outpatient location, which will remain a department of the hospital, also will provide easier access and more convenient parking for outpatients.

Pending permitting and city approvals, Flagship plans to complete the outpatient building in the second quarter of 2027. SMH's design/build team will work in tandem to develop a 17,000-square-foot endoscopy center in the building, with an opening goal in late 2027. As proposed, the endoscopy center will have 24 exam rooms and four procedural suites, as well as pre- and post-procedural areas. It will be equipped with the latest endoscopic testing and treatment technology to diagnose and treat diseases and disorders involving the esophagus, stomach, colon, intestines, liver, pancreas and biliary tree.



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Knowing Where to Go for the Right Care Emergency Department or Urgent Care?



Lighthouse Point



Sunrise



Dr. Evan Boyar

BY LINETH FERNANDEZ MAURY

Broward Health is expanding access to emergency care across Broward County by developing three freestanding emergency departments in Sunrise, Lighthouse Point and Fort Lauderdale.

“We are committed to bringing high-quality, hospital-level emergency care closer to where our community lives and works,” said Evan Boyar, M.D., chief medical officer of Broward Health. “These new freestanding emergency departments will expand access to pediatric and adult patients, reduce travel times for patients and ensure seamless continuity of care across our system.”

Each location will provide 24/7 emergency care, advanced imaging, including X-ray, CT scans, ultrasound and point-of-care laboratory testing. In the event of a life-threatening emergency, care teams will be equipped to provide the necessary stabilizing care. Patients requiring hospital-based care or surgery will be transferred as needed, ensuring continuity of care within the Broward Health system and access to a full range of medical specialties.

In Lighthouse Point, Broward Health is building the city’s first freestanding emergency department. The facility will include 10 exam rooms, supported by nine additional exam rooms on the second floor of the medical offices. It will be located at 5360 N. Federal Highway in Lighthouse Point.

The Sunrise location, developed in collaboration with Joe DiMaggio Children’s Hospital, will offer both adult and pediatric emergency services, creating a public health system partnership designed to serve families closer to home. It will be located at West Oakland Park Boulevard and North Pine Island Road in Sunrise. The Sunrise and Lighthouse Point facilities are slated to open in the summer of 2026.

In Fort Lauderdale, Broward Health is partnering with the YMCA of South Florida and the City of Fort Lauderdale to develop a freestanding emergency department at Holiday Park, adjacent to a new YMCA Family Center. The 12,000-square-foot emergency department will provide full emergency services staffed by board-certified physicians while integrating community health education and wellness programming through the YMCA. The Fort Lauderdale project is expected to be completed in 2027.

What is a Freestanding Emergency Department?

A freestanding ED delivers the same emergency care as a hospital emergency room in a more convenient setting.

“Freestanding emergency departments combine the advanced capabilities of a hospital emergency department with the convenience of a standalone location,” said Dr. Boyar. “Residents receive the same level of care more quickly, while also helping reduce volumes in hospital emergency rooms so trauma and critically ill patients can be treated at the hospital.”

Broward County residents will have fast access to comprehensive emergency care, including:

- **Efficient Care:** The new ED is equipped to treat serious conditions that require more treatment than urgent care can provide, helping patients receive timely care closer to home.

- **Comprehensive Emergency Services:** The freestanding emergency departments are fully equipped with on-site lab testing and advanced imaging and are staffed 24/7



Fort Lauderdale

by board-certified emergency physicians and highly trained nurses to deliver the same standard of care as a Broward Health hospital emergency room.

- **Shorter Wait Times:** On average, discharge times at a freestanding emergency department are one to two hours, compared to two to three hours at a hospital.

- **Seamless Integration with Broward Health:** If specialized care or hospital admission is needed, patients are transferred to the appropriate Broward Health facility for continued treatment.

Choosing the Right Level of Care

Understanding the differences between urgent care centers, hospital-based emergency departments and freestanding emergency departments can help patients choose the right level of care when a medical issue arises.

Urgent Care Centers

Urgent care centers treat non-life-threatening injuries and illnesses that need prompt attention but do not require emergency care. Patients should consider urgent care for minor cuts or wounds, sprains and strains, flu or cold symptoms, and minor infections.

Hospital-Based Emergency Departments (EDs)

Hospital-based EDs are emergency departments within hospitals that handle the most serious and complex emergencies, with direct access to inpatient care. Patients should go to a hospital-based ED for severe trauma, heart attack or stroke symptoms, complex emergencies, or conditions that may require surgery or admission.

Freestanding Emergency Department (EDs)

Freestanding EDs offer hospital-level emergency care in convenient neighborhood locations. Patients should visit a freestanding emergency department for chest or abdominal pain, severe headache, breathing problems, trauma, injuries, broken bones, nausea and vomiting, dehydration, allergic reactions or severe infections.

For more information about Broward Health’s emergency services, visit BrowardHealth.Org/Emergency.

Visit us on the web at www.southfloridahospitalnews.com

Cover Story: Baptist Health Breaks Ground on Future-Ready Sunrise Hospital to Expand Access in Western Broward

Continued from page 1

ters, urgent care locations and physician practices. But leadership says those efforts highlighted a larger need for hospital-based services within the community.

"For more than a decade, Baptist Health has been caring for patients in Broward through outpatient centers, urgent care locations, and physician practices," Lopez-Blazquez says. "As we listened to residents, community leaders, and local partners, it became clear there was a need to bring more comprehensive services closer to home. This hospital allows us to build on an established presence and expand access in a thoughtful, responsible way that aligns with our mission and long-term regional strategy."

A New Kind of Hospital Campus

Unlike many hospital expansions that build onto existing facilities, Sunrise Hospital is designed from the ground up as a future-ready campus.

"This hospital is different because it was designed from the beginning as a long-term, adaptable campus shaped by community input," Lopez-Blazquez says. "Rather than expanding an existing facility, we had the



opportunity to create a hospital that reflects how care is delivered today and how it will evolve in the future."

She emphasizes the historic significance of the project.

"It also represents Baptist Health's first hospital in Broward County, which makes it a significant milestone for our organization," Lopez-Blazquez says. "The Sunrise hospital combines flexible design, advanced technology, and a strong focus on patient experience, sustainability, and resilience, setting a new standard for how we approach hospital development."

At full capacity, the hospital will feature 100 inpatient beds, including 10 critical care beds, with room for expansion. A 30-



bed emergency department will operate 24/7, supported by three triage areas designed to streamline patient flow. Four surgical suites will include robotic-assisted capabilities, with additional capacity planned for the future. A 25,000-square-foot medical office building will house outpatient and specialty services.

Technology Supporting Compassionate Care

Central to the hospital's design is advanced clinical technology, including AI-enabled systems and robotic-assisted surgery.

"These technologies are designed to support caregivers and enhance the patient experience," Lopez-Blazquez says. "AI-enabled systems will help clinicians access information more efficiently and support clinical decision-making, allowing them to focus more of their time on direct patient care."

She says the goal is not to replace human judgment, but to enhance it through smarter tools and better connectivity across the care continuum.

"For patients, this means smoother care coordination, more personalized treatment, and access to advanced surgical capabilities," Lopez-Blazquez says. "Robotic-assisted surgery and integrated digital systems will support precision and consistency while preserving the personal, compassionate care that remains at the center of our mission."

Importantly, the hospital's infrastructure is built to adapt.

"From the outset, this hospital was designed with flexibility in mind," Lopez-Blazquez says. "Clinical spaces, infrastructure, and support services were planned to allow for expansion and adaptation as healthcare delivery and community needs change."

She adds that this forward-looking approach reduces the need for disruptive overhauls down the road.

"This ensures the hospital can integrate future innovations, expand capacity when needed, and continue serving the community effectively without major disruption," she says. "It reflects a long-term investment in both the facility and the people it serves."

Expanding Emergency Access

One of the most immediate impacts of the project is improved access to emergency and inpatient care for residents of Sunrise and nearby communities. Currently, many western Broward residents must leave their community for hospital-level care, a

dynamic that can delay treatment and strain local emergency systems.

"With a 30-bed emergency department and inpatient beds located within the community, the hospital will reduce travel times, support faster emergency response, and allow patients to receive care closer to home," Lopez-Blazquez says. "This will also help strengthen the broader healthcare network across western Broward County."

A Commitment to Sustainability

Sustainability and long-term resilience were built into the project from the outset. Plans include a 15-acre conservation easement to protect nearby wetlands and local biodiversity, along with energy-efficient systems and infrastructure designed to withstand South Florida's climate challenges. The campus will also provide 1,080 parking spaces across a five-story garage and surface lots.

"Environmental stewardship was an important consideration from the earliest planning stages," Lopez-Blazquez says. "As a not-for-profit organization, Baptist Health takes a long-term view of its responsibility to the communities it serves, including protecting natural resources and building resilient facilities."

According to her, the sustainability measures are not just symbolic, but operationally important.

"The conservation easement, energy-efficient systems, and resilient infrastructure reflect a commitment to sustainability, durability, and responsible development," Lopez-Blazquez says. "These elements help ensure the hospital can serve the community reliably while respecting the surrounding environment."

Defining Success in 2029

When the hospital opens in 2029, Lopez-Blazquez says success will be measured by more than occupancy rates or technological achievements. She points to both patient and caregiver experience as critical benchmarks.

"That includes patients feeling confident they can access high-quality, compassionate care close to home and caregivers having the tools and environment they need to deliver care effectively," Lopez-Blazquez says. "We will also measure success by how well the hospital integrates into the community, supports emergency services, and adapts as healthcare continues to evolve."

The goal is enduring impact, according to Lopez-Blazquez.

"Ultimately, success means making a lasting, positive difference in the health and well-being of the Sunrise community and western Broward County," she says.

For Baptist Health, the Sunrise groundbreaking is more than ceremonial. It signals a long-term investment in infrastructure, innovation and, above all, access to care where it is needed most.

For more information, visit BaptistHealth.net.

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Taking a Look Back

Over the past half-century, medical architectural design has transformed dramatically, and Saltz Michelson Architects, celebrating its 50-year anniversary, has grown alongside these changes. In the 1970s, medical facilities were largely utilitarian, prioritizing function over form. Designs were clinical, with long, impersonal corridors and open wards—spaces that emphasized efficiency over the patient experience. I remember early projects in local hospitals where I redesigned 4 and 8 patient wards into semi-private rooms.

By the 1980s and 1990s, the design philosophy shifted toward patient-centered care. Natural light, single-patient rooms, and spaces for families became integral, aiming to reduce stress and promote healing. Hospitals were no longer just places of treatment but spaces that fostered comfort and recovery.

With the turn of the millennium, flexibility became paramount. Medical technology was rapidly evolving, and hospitals needed modular designs that could adapt to new equipment and evolving care models. This led to adaptable floor plans and future-proof infrastructure. The original IT closets were janitor closets with a router sitting on a five-gallon bucket!

In the last two decades, healing environments have been at the forefront. Biophilic design, integrating nature, calming color palettes, art, and outdoor spaces, has been shown to improve patient outcomes. More recently, post-pandemic design has emphasized infection control, touchless technology, telehealth integration, and resilient, sustainable buildings.

From sterile corridors to vibrant, patient-focused, and adaptable environments, Saltz Michelson's journey mirrors these remarkable changes, ensuring that each medical project responds to the evolving needs of healthcare and the people it serves.

Charles Michelson, President, Saltz Michelson Architects, can be reached at (954) 266-2700 or cmichelson@saltzmichelson.com or visit www.saltzmichelson.com.



BY CHARLES
MICHELSON, AIA,
ACHA, LEED AP

Palm Beach Gardens City Council Approves New Freestanding Emergency Room in Avenir



The Palm Beach Gardens City Council has approved plans for a new, \$18 million freestanding emergency room in the rapidly growing Avenir community.

The 12-bay, 24/7 emergency room will be located near the corner of Coconut Boulevard and Northlake Boulevard and will be staffed around the clock by board-certified emergency physicians, experienced nurses, and support staff. Designed to bring hospital-level emergency care closer to home, the facility will feature advanced diagnostic capabilities, including CT imaging, ultrasound, X-ray, and on-site laboratory services.

Affiliated with Palm Beach Gardens Medical Center and part of Palm Beach Health Network, the freestanding emergency room will ensure seamless continuity of care. Patients requiring hospital admission will be transferred directly to Palm Beach Gardens Medical Center, with close coordination alongside Palm Beach Gardens Fire Rescue.

Construction is expected to begin in the summer of 2026.



Holy Cross Health Advances a New Model of Care with Deerfield Beach Campus and Free-Standing Emergency Department

When Holy Cross Health was founded 70 years ago, Broward County had less than 100,000 residents¹, and Deerfield Beach had a population of about 2,000¹. Today, there are nearly two million residents in Broward County² and almost 100,000 people in Deerfield Beach³ and those numbers are projected to continue growing.

As Broward County and South Florida continue to grow, so does the need for accessible, high-quality health care. Responding to this shift, Holy Cross Health is expanding beyond its historic Fort Lauderdale campus with a new Free-Standing Emergency Department (FSED) and comprehensive outpatient medical clinic in Deerfield Beach.

This campus reflects a thoughtful evolution in how care is planned and delivered, bringing essential services closer to the communities they serve. Developed in close collaboration with physicians, clinical



BY BRANDON
CHARETTE, CSSBB,
PMP, MS

leaders and operations teams, the facility is designed around how care is practiced with clear circulation, intuitive wayfinding and a deliberate separation between emergency and scheduled services.

The Deerfield Beach campus introduces a big-box health care model that brings together emergency and outpatient care within a single, efficient medical destination. Patients can access the appropriate level of care in one location without confusion or delay.

Though housed within the same building, the campus is intentionally designed as two fully independent health care entities. With a projected opening in May, the Free-Standing Emergency Department operates as a focused, 24-hour emergency service, offering advanced diagnostic imaging, a fully functional on-site laboratory, private treatment rooms, dedicated ambulance access and direct transport capability to

the Fort Lauderdale campus when hospital admission is required. The outpatient clinic functions as a multi-specialty medical center, offering primary care, cardiology, gynecology, gastroenterology, diagnostic lab services, and physical and occupational therapy.

The two services are fully separated by a dedicated, demising firewall, as required by the Agency for Health Care Administration (AHCA), ensuring complete operational, life-safety and regulatory independence. Each entity functions on its own terms, with distinct workflows, staff circulation and patient pathways, while remaining co-located to provide convenient access to comprehensive care. This clarity supports patient safety, regulatory compliance and a more straightforward care experience.

At \$41 million and 25,000 square feet, the one-story structure offers a range of services rarely found within a single medical facility. The Deerfield Beach campus reflects a deliberate expansion strategy centered on access, responsiveness and long-term community need, as well as a practical, community-focused approach to modern health care delivery. By repurposing an existing building along Federal Highway, Holy Cross Health can deliver care more quickly and efficiently, while embedding health care services directly into the fabric of a growing neighborhood.

This approach shortens the distance

between patients and care, supports continuity across emergency and outpatient services, and allows the health system to respond thoughtfully as population patterns evolve. It is an expansion rooted not in scale for its own sake, but in proximity, practicality and patient-centered planning.

Situated at the northern edge of Broward County, the Deerfield Beach campus will also serve residents of Boca Raton and surrounding areas in South Palm Beach County. As Holy Cross Health's northernmost location to date, the project reflects a measured, data-informed expansion aligned with population growth and regional demand.

More than an expansion, this campus establishes a repeatable, community-based model for future growth, demonstrating how emergency and outpatient services can be delivered clearly, compliantly and closer to where people live. It strengthens access today while positioning Holy Cross Health for sustainable growth in the years ahead.

Brandon Charette is Vice President, Strategy & Business Development at Holy Cross Health.

¹ U.S. Department of Commerce Bureau of the Census 1950 Census of Population

² United States Census Bureau

³ Broward County Government

Kindred Hospital South Florida

Specializing in Medically Complex Patients

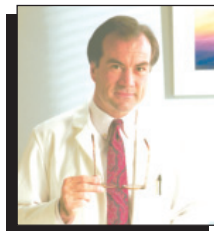


Kindred Hospitals are owned by Kindred Healthcare, Inc., a national network of Long Term Acute Care Hospitals (LTACH's).

Kindred Hospitals provide specialized, high quality care for acutely ill patients. For more than a decade, we have fine-tuned the art of medically complex care.

Our services range from complex catastrophic illnesses that require intensive care, post-surgical medical rehabilitation to patients suffering from chronic diseases requiring respiratory and rehabilitative therapies. Kindred Hospitals provide outcome-oriented cost effective care for patients with a wide spectrum of medical conditions.

Admissions to Kindred Hospitals may be recommended by physicians, acute-care hospitals, rehabilitation hospitals, managed care providers, case management companies or by the patient's family. In all cases family tours are encouraged.



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SMH recently began laying deep foundations at its new, \$507 million hospital in North Port, and has several other expansion projects under way, including an \$82.5 million inpatient rehabilitation facility at its SMH-Venice campus and more than \$50 million in radiology upgrades and expansions in Sarasota and Venice.

Some key projects under way include:

- **SMH-North Port:** Slated to open in 2028, SMH-North Port will be the city's first acute-care hospital. The nine-story facility will initially feature 100 beds with built-in "shell space" to quickly double capacity to 208 beds as demand grows.

- **Milman-Kover Cancer Pavilion:** Opening in Spring 2026 at the Sarasota campus, the outpatient cancer pavilion is the third in a series of premier facilities that are part of the health system's expanding Brian D. Jellison Cancer Institute, providing cancer patients, caregivers and medical providers access to the latest treatments, technologies, clinical trials and supportive care in their own community.

- **Venice Rehabilitation Pavilion:** Slated to begin construction this year, the new, \$82.5 million, four-story facility in Venice will offer specialized inpatient and outpatient rehab for people in the south county region.



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