

THE SPECIALIST



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Time together at the table proves healthy.

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COMING TOGETHER

We help one of our own in need.

A MESSAGE FROM THE CEO

My Friends,

Remarkably, this month marks one year since the launch of our newsletter, The Specialist. The newsletter has served as an important yet fun and effective communication tool to proudly spread our message and act as a strong word-of-mouth catalyst.

I'm thrilled with how many of you have contributed to the newsletter's success over the last 12 months and excited to celebrate the first anniversary with an ever-growing team of even more readers.

From onboarding new team members to mergers and acquisitions, to expansion across Long Island and New York City, and of course, a year of an unprecedented pandemic, the newsletter has purposed as a written time capsule— a collection of announcements, stories, news, and nutritional tips that we can look back on for years to come.

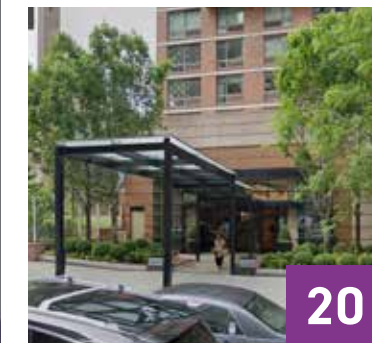
In this issue, you will read about an extraordinary patient of ours, Amy, and her battle with a rare blood disorder. We are also excited to share some important cancer-prevention recommendations and some healthy, low-carb recipes.

Please remember that as health care workers providing essential care to patients with compromised immune systems, it is my hope that those who aren't vaccinated against COVID-19 will do so. This will allow us to continue making our practice safer and healthier for all.

Thank you for your continued and tireless efforts.

Warm regards,

Dr. V



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NEW YORK CANCER & BLOOD SPECIALISTS

Conquering Cancer Together™

OVARIAN CANCER

Ovarian cancer develops in the cells of the ovary, the female reproductive organs that produce eggs and the hormones estrogen and progesterone. With nearly 22,000 new cases in the United States each year, ovarian cancer is the ninth most common form of cancer among women.

RISK FACTORS



FAMILY HISTORY



GENETIC MUTATIONS



AGE



HORMONE REPLACEMENT THERAPY



OBESITY



PERSONAL HISTORY

MAIN TYPES

THERE ARE MORE THAN 30 TYPES OF OVARIAN CANCER, WHICH CAN BE CLASSIFIED INTO THREE MAIN TYPES:

EPITHELIAL TUMORS:

Form in the cells that cover the surface of the ovary. This is the most common and dangerous form.

STROMAL TUMORS:

Form in the structural tissue of the ovary and produce hormones. These are rare.

GERM CELL TUMORS:

Form in the cells that support the development of eggs in the ovary.

THE NUMBERS

1 IN
78

WOMEN ARE DIAGNOSED WITH OVARIAN CANCER IN THEIR LIFETIME

TREATMENT



BIOLOGICAL THERAPY



SURGERY



CHEMOTHERAPY



RADIATION THERAPY

PREVENTION TIPS



USING BIRTH CONTROL



PREGNANCY AND BREASTFEEDING



REMOVAL OF FALLOPEAN TUBES AND OVARIES

Family Meals

By Wendy Kaplan, MS, RDN, CSO, CDN

August is Family Meals Month, and as we know, sometimes the term “family” includes friends. We’ve all felt the impact of limited social interactions during the pandemic, but the effect was even greater for those in cancer treatment.

Social connectedness is key, and unfortunately, patients could not have loved ones by their side during infusions. In addition, many people also chose not to gather with family, adhering to COVID-19 safety precautions.

The importance and benefits of family meals and being social with loved ones make a difference in overall well-being and food intake. When people get together with friends and family members, they tend to eat more! For those in cancer treatment and with low appetite, the social component is vital to optimal nutrition.

If there is no one around to prepare, serve and engage in conversation, and this sets the stage for loneliness, isolation, sadness, and cancer patients are more likely to skip meals or “not bother” eating, resulting in suboptimal nutrient intake.

Don’t underestimate visual appeal. In many cultures, socialization centers around food, and the more appealing food looks, the more people want to eat it. So pretty plates, lots of color, and a few fancy toothpicks can translate into greater calories and protein consumption.

In any culture, family meals and eating with others are vital components to promote overall health and lessen depression and other undesirable consequences—cheers to many meal get-togethers and breaking bread with the ones you love.

Low-Carbohydrate Sandwiches

Michelle Slowey, MA, RDN, CDCES

Following a low-carb diet can be challenging if, most days, your lunch consists of a traditional sandwich. There are, however, many possibilities if you are willing to think out of the box.

If you are a traditionalist, low-carb bread options such as the *647* bread may pique your interest, or you can always make half a sandwich using whole grain or high protein bread such as Dave's Killer Bread.

Many people report missing "the crunch" when limiting carbohydrates. Parm Crisps, a cheese cracker with only 1 gram of carbs, makes a good alternative. The parm crisp pairs best with tuna, egg, or chicken salad. Try replacing half of the mayonnaise with plain greek yogurt to add more protein and reduce fat.

Another way to make a sandwich can be using low-carb tortilla wraps. Most brands only have 6 grams of net carbs, which means they are higher in fiber and keep you full for a more extended time.

Other bread choices are wraps made with cauliflower or eggs. In addition, you can eat a veggie, turkey, or lean beef burger on an iceberg lettuce wrap or two thick slices of tomato. And lastly, the newest kid on the block is the "Chaffle." It's a super easy and versatile bread-like product with only 3 grams of carbs. It's basically a waffle made with cheese and cooked on a waffle iron to get that crispy texture. A chaffle can be used in place of bread for sandwiches, or you can add Italian seasonings and use it as a mini pizza crust. Then, add Everything But The Bagel seasoning and spread cream cheese on top.

Make a savory "Chaffle" by adding 1/4 cup riced cauliflower, shredded zucchini, chopped broccoli, or spinach to increase your veggie intake. For a sweet version, add cinnamon or top with butter and sugar-free syrup.

Basic Chaffle Recipe:

Ingredients:

- 1 egg
- ½ cup finely shredded cheese (cheddar, mozzarella, parmesan, or non-dairy cheese)
- 1 tbsp almond flour

Mix all ingredients and pour onto waffle maker

Cook for 4-5 minutes or until browned and crispy

Other Low-Carb Sandwich Ideas:

Add turkey, gouda cheese, apple slices, and grain mustard to a low-carb bread and grill on a sandwich griller or waffle iron.

Mix tuna with plain greek yogurt, avocado oil mayo, and chopped onions. Serve on parm crisps.

Use grilled or rotisserie chicken to make a chicken salad with mashed avocado and plain greek yogurt. Add salt and pepper to taste.

Marinate slices of zucchini, eggplant, and bell peppers in an infused balsamic vinegar and grill. Add homemade basil pesto and fresh mozzarella cheese. Place on a low-carb wrap.



SARCOMA

Awareness Month

July was Sarcoma Awareness Month to educate others on this cancer type, often considered or referred to as the “forgotten cancer.” Though it’s sporadic, sarcoma is a deadly form of cancer that affects connective tissues such as fat, muscle, bone, blood vessels, nerves, skin, and cartilage. With a low average age for diagnosis of 36, the rarity and lack of education in the past of this cancer type has led to low survival rates. However, like most forms of cancer, the earlier it’s spotted, the better. The team at New York Cancer and Blood is diligently working to continue research for all forms of cancer so we can provide the best treatment options possible.

Here’s what you should know about Sarcoma Awareness Month:

How is Sarcoma Classified?

As cancer of the connective tissue, occurring in any location in the body, Sarcoma is divided into two main groups: bone sarcomas and soft tissue sarcomas. With more than 50 types, the specific tissue or location will determine the type of sarcoma diagnosed.

What Are The Symptoms of Sarcoma?

Symptoms will vary based on the types of sarcoma diagnosed. For example, in the early stage, soft tissue sarcoma may have no symptoms. But, a tumor causing no pain may be present if you notice a lump or swelling in the affected area. If this tumor does affect local tissues, nerves, or muscles, pain may occur. For bone sarcoma, the first sign could be pain with or without the presence of a lump. Long bones in the leg, arm, or pelvis are most commonly affected. When bone sarcoma is localized to the pelvis, signs, and symptoms may not appear until later.

What Causes Sarcoma?

Unfortunately, there are few known risk factors of sarcoma, and occurrence appears without a known family history or distinct cause. The few common potential risks that researchers have pinpointed include:

- High doses of radiation
- Genetic conditions
- Exposure to certain chemicals
- Human herpesvirus 8

Though there is no known way to prevent sarcoma. A healthier lifestyle, routine doctor’s visits, and reaching out to your doctor if you notice a new lump growing or causing pain can help you spot any signs of cancer early on.



Amy's Story

By Sarah Gould



Amy has been a patient at New York Cancer and Blood Specialists for over 16 years. She has a blood disorder, Beta Thalassemia, which is fairly rare in the United States.

However, it is one of the most common autosomal recessive disorders globally in Italy, Greece, and Asia. Amys' parents were born in Greece and came to the U.S. as children.

At three months old, after suffering from pneumonia, Amy was diagnosed with beta-thalassemia—the most severe form of the condition.

Thalassemia occurs when the body doesn't make enough hemoglobin protein, an essential part of red blood cells. When there isn't enough hemoglobin, the body's red blood cells don't function properly, and they last shorter periods, so fewer healthy red blood cells are traveling in the bloodstream.

Red blood cells carry oxygen to all the cells of the body. Oxygen is a sort of food that cells use to function. When there are not enough healthy red blood cells, there is also not enough oxygen delivered to all the other body cells, which may cause anemia.

There are different "types" of thalassemia, which focus on the specific part of hemoglobin that is affected, such as "alpha" or "beta." In addition, trait, carrier, intermedia, or major define the severity of thalassemia.

When thalassemia is called "alpha" or "beta," this refers to the part of hemoglobin that isn't producing. If either the alpha or beta part is not made, there aren't enough building blocks to make regular amounts of hemoglobin. Therefore, low alpha is called alpha thalassemia. Low beta is called beta-thalassemia.

The words "trait," "minor," "intermedia," or "major" describe how severe the thalassemia is. A person who has the thalassemia trait may not have any symptoms or may have only mild anemia. In contrast, a person with a thalassemia major, like Amy, may have severe signs and require regular blood transfusions.

At 18 months old, she had her spleen removed to prolong the time between her treatments. She has been receiving blood transfusions twice a month ever since to maintain a normal hemoglobin.

Amy moved out of Brooklyn to Long Island at the end of fifth grade. She started going to Mercy Medical Center and saw pediatric hematologist-oncologist Dr. Mario LiPera for thirty-two years until the unit closed.

"Change is scary, especially when you have had the same doctors and they know everything about you," she said. Finally, her primary care physician referred her to Dr. William LiPera, and the rest is history. When she met him for the first time, she asked him, "do you know a doctor named Mario Lipera?"

It was his father, and she believed it was divine intervention.

Dr. LiPera personalized her treatment plan, reducing her blood transfusions from every four weeks of getting two units of blood to every two weeks of getting one unit of blood. The change meant 25% fewer transfusions a year and a reduced risk of reaction dealing with two different donors.

Amy receives desferrioxamine, an iron chelator drug that removes excess iron from her body caused by the frequent transfusions. "That has been my saving grace," she said. She also receives calcium infusions and hydration at NYC&B when she feels fatigued and dehydrated.

"It's like going to Cheers where everybody knows your name," she laughed. "And what's great about NYCBS is, 24 hours a day, even weekends, someone's on call if you need them. All of the doctors and nurses deliver outstanding care."

"So many people here are not just cancer patients," she continued. "Some need hydration, iron, or antibiotic infusions. NYCBS can treat all of that. And there are so many offices, it's convenient. And I truly believe that all of the nurses are "like angels in comfortable shoes."

In addition to thalassemia, Amy has type 2 diabetes and hypocalcemia. She sees eight of her doctors regularly, and they confer with each other. "It's all coordinated," she said.

Amy doesn't let her condition define her. She was in the travel and tourism sector for 34 years and graduated from the Disney College of Knowledge in Orlando, Florida, working with various travel agencies and airlines. Then on to Stony Brook University to pursue diabetes education.

Amy is fluent in Greek, conversational Spanish and is recently learning the Italian language online. With 28% of Sicilian in her DNA, it's no surprise that she loves cooking— Italian food. Throughout her life, Amy's family has been an amazing support system, and she hopes to one day return to Greece with them again and experience their culture and visit family.

In sharing her story, Amy hopes to raise awareness on Thalassemia and encourages people to go for Thalassemia genetic testing if the trait runs in their family and they plan to have a child. She also hopes to inspire others to donate blood. "Don't be afraid to donate; one unit can save three lives."

COMING TOGETHER

Family is about coming together to help and support each other in good times and bad. It is about feeling safe and comfortable through laughter and tears. Family lifts you when you're down and stands by your side to help you overcome worry or fear. At New York Cancer & Blood Specialists, we are family. When someone is in need, we unite and offer a helping hand.

On Wednesday, June 16, 2021, Patricia (Trish) D'Andraia and her family suffered a devastating house fire and lost everything. Thankfully, everyone was able to get out safely, including their pets. Trish has three children, ages 10, 13, and 20, and she cares for her mother. Trish and her family are remarkable people, always offering to help others, and now it was our turn to help them.

In the months that follow, her family will need to replace lost items and cover expenses. We, as a family, raised money through GoFundMe on her behalf to lessen her financial burden. In addition, many donated non-monetary items help rebuild what they have lost. Trish wanted to extend a special message of appreciation to everyone for their selflessness.

To My Colleagues, Friends, and Family

"Words cannot explain my appreciation for everyone who has donated and reached out to see how my family and I are doing. Your love and support have been overwhelming and truly appreciated. It has been a privilege to work at New York Cancer & Blood Specialists for the past 15 years, and it is an honor to call you all colleagues, friends, and family.

Going through this difficult time has shown me how lucky I truly am to have so many people in my corner to help get us back on our feet. It means the world to us, and my heart is so full of love for you all.

Endless thanks!"

Patricia D'Andraia (AKA Trish)
Director of Credentialing Services







Announces Appointment of President



New York Cancer & Blood Specialists (NYCBS), one of the Nation's leading oncology practices, is excited to announce the appointment of Todd O'Connell to the position of President.

Todd O'Connell previously served as Chief Operating Officer/Chief Financial Officer of NYCBS. He has more than 20 years of management experience in accounting and financial operations. Since 2016, he has been a significant contributor to the growth and success of NYCBS, leading the practice in the areas of business negotiation, planning, and development. In addition, Todd executes organizational strategies, evaluates and revises processes and procedures, and serves as a business partner to the CEO.

"I've had the pleasure of knowing Todd on both a professional and personal level for many years now," said Jeff Vacirca, CEO of NYCBS. **"With his tenure at our practice, he has developed an internal system that has revolutionized our financial department and shaped our organization."**

Todd is the Treasurer of the New York Cancer Foundation, sits on the Board of Directors of the Community Oncology Alliance, and is a member of the International Oncology Network (ION) Advisory Council.

"Todd has served various leadership roles on our physician advisory board," said Brian Ansay, President of ION Solutions and IPN Solutions, AmerisourceBergen. "Our ability to continue with his leadership in his new role will be very exciting for him and our overall membership."

Additionally, he has served as Interim Chief Operating Officer for OneOncology.

"Todd is an incredible leader who has played a major part in New York Cancer and Blood Specialists' success growing from a small oncology practice into one of the leading cancer care centers in the country," said Jeff Patton, MD, CEO, OneOncology. "Not only has Todd's talents been instrumental in the growth of NYCBS, but his knowledge and expertise have helped other practices that have joined the OneOncology platform thrive. In his role as President of NYCBS, I'm confident his leadership will help NYCBS and OneOncology continue to improve the lives of everyone living with cancer."

Todd is a 1999 graduate of the University of Nebraska-Lincoln, earning a bachelor's degree in business administration and a minor in communication studies. He is a 2008 graduate of Nebraska Methodist College-Omaha, earning a Master of Science degree in Medical Group Administration. Todd also holds a certified medical practice executive (CMPE) designation through the Medical Group Management Association.

EMPLOYEE OF THE MONTH



Shevon Hart

MA/Lab Quality Assurance Associate

Shevon is currently working as a member of the Quality Assurance Team. She travels to all locations daily to provide assistance and ensure that our satellite laboratories meet state standards while providing the best care for our patients.

"My success is a combination of drive and determination, which I owe to my parents and myself. I'm forever thankful to them for their continued support with all that I have accomplished and continue to do. I appreciate NYCBS for allowing me to come as far as possible and recognizing my hard work. For me, the only way up is to continue pushing through; you only lose when you stop trying."

ACP Upper East Side Opened Thursday, July 1st



Ali Ameri, MD

New York Cancer & Blood Specialists (NYCBS), one of the Nation's leading oncology practices, now provides state-of-the-art cancer care services at 215 East 95th Street, New York, NY 10128. This will be the practice's fourth Manhattan cancer and blood disorder center.

Keeping cancer care close to home is a priority. As a result, NYCBS will co-locate at AdvantageCare Physicians' office in the Upper East Side with their world-class, multidisciplinary team.

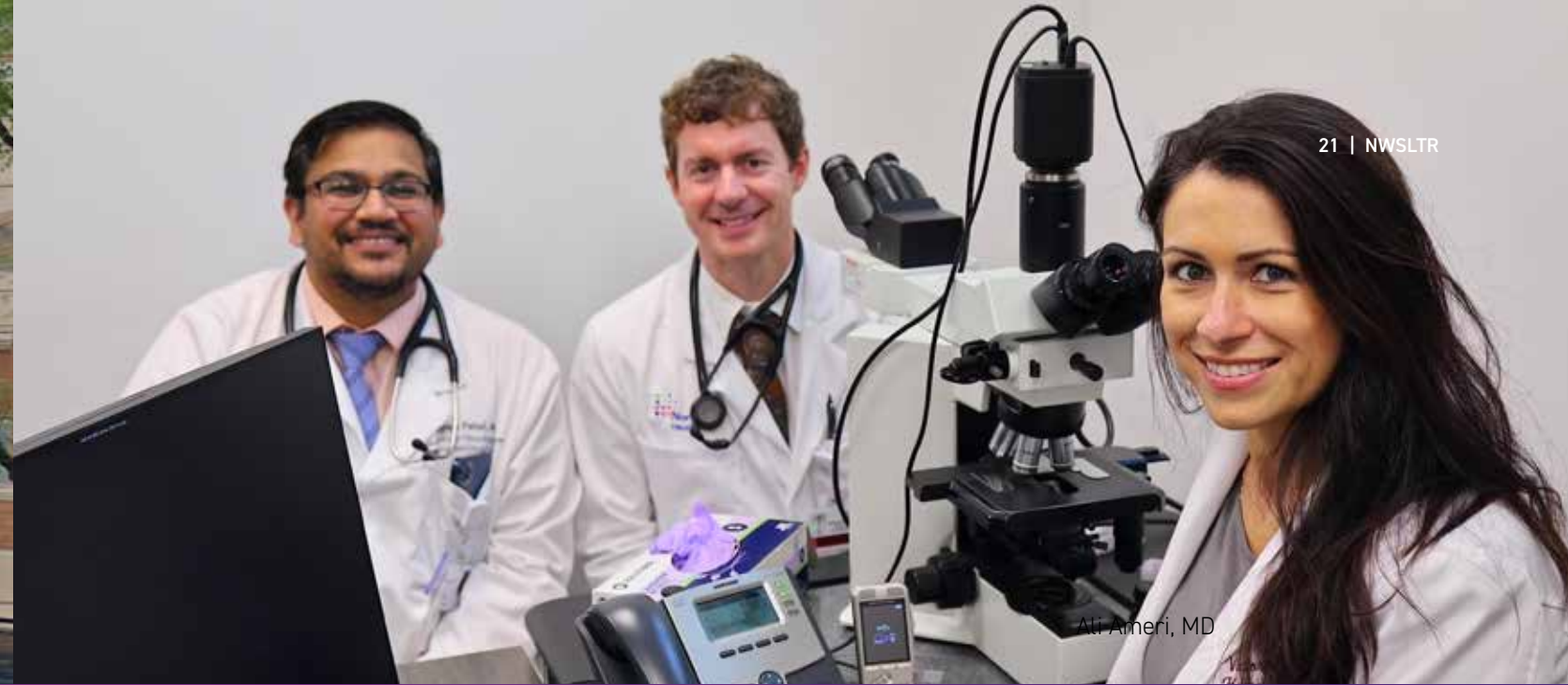
"We are so excited to continue expanding our footprint and provide dedicated cancer care and blood disorder services to the New York City population of patients looking for trusted care close to home," said Jeff Vacirca, MD, CEO of NYCBS.

Board-certified hematologist-oncologist Dr. Ali Ameri will practice at the new location under NYCBS leadership to provide patients with the highest quality cancer and blood disorder care. Dr. Ameri earned his Doctor of Medicine degree at The George Washington University School of Medicine. He completed his Internal Medicine Internship at Johns Hopkins/Sinai Hospital and his Internal Medicine Residency at Georgetown University Washington Hospital Center. He completed his Hematology-Oncology Fellowship at UMDNJ/Robert Wood Johnson Medical School Cancer Institute of New Jersey.

Dr. Ameri is familiar with the community and has practiced exclusively at the Upper East Side office, providing care to the diverse population his entire career. He speaks multiple languages, including English, French, Farsi/Persian, and conversational Spanish.

"NYCBS allows me to pursue my passion of providing outstanding care to my patients by giving me the support I need. NYCBS is run efficiently and has had incredible success establishing itself as one of the leading treatment centers in our community with some of the best oncologists in the country," Dr. Ameri said.

To make an appointment with Dr. Ameri, please call (718) 732-4049.



Ali Ameri, MD

Fellowship Program The addition of Dr. Martin Barnes

We are pleased to welcome Martin Barnes, MD, to our joint hematology-oncology three-year fellowship program with John T. Mather Memorial Hospital that started two years ago. Dr. Barnes joined the New York Cancer & Blood Specialists (NYCBS) team on July 1, completing our complement of three fellows: Victoria Schuster, MD, and Dipen Patel, MD.

Harry Staszewski, MD, the program's director, said, "The addition of Dr. Barnes, who trained in internal medicine at Mather Hospital, enables us to have a critical mass of fellows that we are training to be the next generation of community oncologists, Dr. Staszewski continued, We're proud to have Dr. Barnes added to the NYCBS family." Over 200 internal medical residents from around the country apply for the one position per year allotted to our program.

NYCBS and Mather's oncology fellowship program strives to engage and educate oncology-hematology trainees, emphasizing the provision of cancer care within the community setting. Dr. Jeff Vacirca inspired the unique initiative and enabled fellows to build their skill set while exploring the opportunities community oncology offers.

As they complete their three-year oncology and hematology fellowship, the goal for physicians is to train in a diverse environment, being exposed to various patient demographics and communities while receiving excellent instruction from board-certified hematologist-oncologists. Therefore, the selection process is very rigorous, requiring academic records, letters of recommendation, and an interview.

We continue to look forward to Dr. Barnes's involvement and the continued success of the fellowship program.



Proudly Hosts

Hockey For Hope

FACING OFF TO FIGHT CANCER

The New York Cancer Foundation (NYCF) will host the first charity hockey game Hockey For Hope. The family-friendly event will feature two teams: the NYCF and Suffolk County Boldest Hockey, the Suffolk County Sheriff's Office Hockey Team, as they face off to fight cancer at the Dix Hills Ice Rink located at 575 Vanderbilt Pkwy, Dix Hills, NY 11746 on August 28, 2021, at 6 pm.

"Over the past year, despite being unable to come together in-person to raise funds and awareness for the New York Cancer Foundation, our supporters have proven yet again their commitment to cancer patients in need," NYCF Chair Jeff Vacirca, MD, said. "We are thrilled to be able to host our Hockey For Hope game finally, and we look forward to strengthening our rapport with the Suffolk County Sheriff Office and continuing to provide cancer patients in need for many years to come."

Suffolk County's Boldest is an amateur hockey team comprising Correction Officers from the Sheriff's Office. Sheriff Toulon had approached the foundation about organizing a charity ice hockey game to help raise funds for cancer patients who need financial relief. As a two-time cancer survivor, the cause is near and dear to Suffolk County Sheriff Errol Toulon Jr.'s heart.

"I know how hard it is when times are rough, and your bills are here," Sheriff Toulon said. "I cannot thank The New York Cancer Foundation enough for supporting cancer patients with financial assistance when they're in need."

The New York Cancer Foundation created their hockey team, comprised of physicians and staff from New York Cancer & Blood Specialists (NYCBS) and other amateur hockey players wanting to support a great cause.

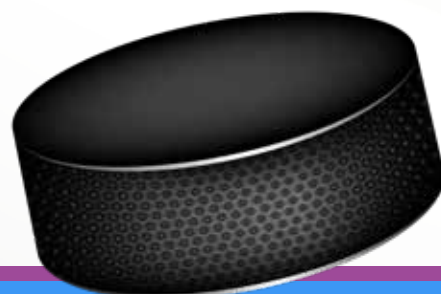
Also attending the event is the superintendent of the Brentwood school district, Richard Loeschner, and 20 of his students interested in a career in the medical field and law enforcement. In addition, members of the sheriff's office and physicians from NYCBS will attend the event to serve as mentors and assist these students with that evolution.

The New York Cancer Foundation has been awarding grants to qualifying patients undergoing cancer treatment since 2014. This year, COVID-19 has made it especially difficult for patients to leave their homes. Now more than ever, assisting these individuals, no matter how small or large, can make a difference.

For those who cannot attend, the event will live-stream on YouTube. For more information and how to donate, visit nycancerfoundation.org.

About New York Cancer Foundation

The New York Cancer Foundation is a 501(c)(3) organization that offers financial assistance grants for non-medical expenses to qualifying patients actively undergoing cancer treatment in the Greater Metro Area (within the counties of New York City, as well as Nassau & Suffolk). The Foundation strives to relieve some of the financial burden patients face so they may focus on their treatment and healing.



Proceeds Will Benefit Cancer Patients Undergoing Treatment



Supportive and Palliative Care



By MaryAnn Fragola, DNP, ANPc, ACHPN

Palliative care is best delivered through an interdisciplinary teaching approach. Although the core focus is to optimize the quality of life in patients with a chronic illness, in our practice, the focus is mainly on the care of the Hematologic/Oncologic patient. Over recent years, we have seen a shift in acknowledging the importance of palliative care as an integral part of patient care.

The best way palliative care is introduced to the patient initially is from their primary oncologist, APP, or primary team. In doing so, this fosters a team approach with a focus on trust. Supportive and palliative care does not seek to take over any element of care but instead serves to enhance the overall care delivered. Much of the current literature in advanced cancer concludes that early palliative and supportive care can improve quality of life and survival. These outcomes were better in patients receiving a systematic, multi-disciplinary approach to their care. Best supportive care is also becoming an important aspect of anti-cancer treatments to help patients achieve optimum results.

Patients are more likely to pursue a palliative care referral if their oncologist recommends it. The supportive care team will collaborate with the oncology care team to manage the patients' care and maintain the best possible quality of life. Palliative and supportive care specialists also provide caregiver support, facilitate communication among members of the health care team, and help with discussions focusing on goals of care for the patient.

Being introduced as part of the team upfront from the Oncologist or Advanced practice provider promotes support as a whole. In addition, it enables the patients to accept the referral as it is coming from someone they already trust and respect.

For many patients and/or families, their only association with palliative care equates to hospice-type care. Introducing this service early and focusing on symptom control will ease them into the more difficult conversations when that time may come. In addition, referral for symptom management was frequently identified as a mechanism to promote relationship building between palliative care clinicians and patients with poor prognoses.

Initially, the short term focus may be on better management of symptoms that affect the quality of life, but long term, you're developing a rapport with a team who has become familiar with the wants and wishes of the patient, so when the time to discuss hospice presents, they are comfortable with the decision because these are not strangers anymore; instead, they have been involved as a team all along.

The earlier referral makes palliative and supportive care not such a scary concept. Referrals can come from any part of the NYCBS team. So many people are involved in the care of our patients, and our patients find comfort in all our disciplines. From the first person that greets them at the front desk and spends the time making their appointments, to the lab technician who makes the blood draws less scary, the infusion or shot room nurses that get to know these patients' whole life stories and see them as they are, and the medical assistants who take their time updating their information at each visit. Our entire staff takes the time to do the respected elements of their job and develop relationships. It means so much to our patients that they are not treated only as patients but as people. Over time all these encounters allow bonds to be built. As you develop this, patients confide in their needs because of their comfort level. If anyone feels a patient can benefit from these services, please refer to the palliative and supportive team. Tell the patients about the service, ease their fears, and promote the team approach. In doing so, we will continue to foster exceptional service and delivery of patient care.



Additional Recommendations

Achieve and maintain a healthy body weight.
Keep body weight within the healthy range and avoid weight gain.

Be physically active

Engage in 150-300 minutes of moderate-intensity physical activity per week or 75-150 minutes of vigorous-intensity physical activity. Achieving at least 300 minutes per week is optimal.

Limit sedentary behavior, such as sitting or lying down and watching television for long periods.

Follow a healthy eating pattern.

Consume foods that are high in nutrients.

Eat the rainbow - Consume a variety of colorful vegetables and fruits.
Enjoy whole grains.

Limit

- Red and processed meats
- Sugar-sweetened beverages
- Highly processed foods and refined grain products

It is best not to drink alcohol.

Limit consumption of alcohol to one drink per day for women and two drinks per day for men.

The Bulletin Board

Support the New York Cancer Foundation

Do you or someone you know have the need to provide a donation? Financial assistance? Rides to and from treatment? To be an advocate? If you've answered yes to any of the above, please call our toll-free line at **1-833-588-6923**, or scan the QR Code, or go to our website: nycancerfoundation.org.



What's New in IT

Network and computers for two upcoming offices in Brooklyn going live 8/1. ACP Downtown Brooklyn, ACP East New York.

Social Work

Social work continues to expand therapeutic visits to patients. We met with 256 new patients and had 399 follow-up visits, including case management and therapeutic visits. We will be expanding on-site into additional NYHealth offices soon as well.

State of Palliative Care Webinar

On Tuesday, July 20, the NYCBS Supportive and Palliative Care team hosted a webinar for our staff to provide an overview of their services and a better understanding of what supportive and palliative care means. The panel included Supportive & Palliative Care Chief, Dr. Isaac Haroon, Palliative Care Physician, Dr. Janaya Raynor, Nurse Practitioner, MaryAnn Fragola, and Social Worker, Jason Blecher. The team discussed the common misconceptions surrounding palliative care and interacted with participants. Dozens of staff joined the discussion and asked questions as the Supportive and Palliative Care team covered various topics, including common misconceptions, advanced care planning, how the palliative care team can help, and social work. The webinar is available to watch on the Intranet, under Video Resources.

For more information on NYCBS Supportive and Palliative Care Services, please call **631-675-5063**

Congratulations to Paul Kazemier on his promotion to Vice President of Patient Communications!

The Patient Communication departments include the Call Center, New Patient Coordinators, Triage, CCM, Hospital Coordinators, MSK Patient Navigators, and Scheduling Coordinators. The departments currently consist of 140 staff members, and we are continuing to grow at a tremendous rate, handling calls for both NYCBS and NY Health.



"I am excited to develop the supervisors underneath me so that they can assist with each department's success, which will ensure that my employees can provide the best experience possible to our patients. Many employees from the Call Center continue to be promoted to other positions within the practice, such as reception, new patient coordination, etc. I want to continue to have my employees advance and succeed."

~ Paul Kazemier

Quote of The Month

"Seeds of faith are always within us; sometimes it takes a crisis to nourish and encourage their growth."

~ Susan Taylor

Upcoming Holidays & Events

August 28th - Hockey for Hope

Sept 20th - 3rd Annual Raising Hope Golf Classic

The month of September
Hispanic Heritage Month

THE NEW HIRES

Adam Datkun
(Marketing Admin Assistant)

Akazia Bissram (RN)

Alyssa Lopez Hough (NP)

Anamarie Falke
(Receptionist)

Ariel Patterson (MA)

Breanne Lynch (Core Lab)

Chardlie Thelismond
(Lab Assistant)

Christine Bouchard
(Histology Tech)

Christine Kadien (NP)

Christa Reilly
(Paperwork completed)

Christian Malave
(Receptionist)

Christopher Ng (PT Aide)

Cristina Zervos
(Office Manager)

Dana Colton
(Ultrasound Tech)

Daniel Bazemore
(CT Technologist)

Deu'Boyce Robinson
(Lab Assistant)

Elouse Jeangilles (Call
Center)

Faith Haller (RN)

George Sangalang (Lab MA)

Gwendolyn Hernandez (NP)

Heather Koppelman
(Authorization Coordinator)

Jackie Ferrufino (Call Center)

Jahaziel Mesa
(Medical Assistant)

Janice Eguizabal (LPN)

Jeheil Starks (LPN)

Jennifer Laporta (Lab MA)

Joymyra Diaz
(Receptionist)

Joselin Franco (RN)

Julianna Steinberg
(CT Technologist)

iliana Zavala
(Pharmacy Technician)

Kira McCaffrey
(UTI Technician)

Latoya Shaw (Receptionist)

Lauren Maurizi
(Ultrasound Tech)

Leah Gallagher
(Fish Technologist)

Marissa Shuba Infusion (LPN)

Matthew Berman (Lab MA)

Marjorie Diaz (LPN)

Michaela Pereira (Lab MA)

Michele Rodney (CCM MA)

Migdalia Gomez
(Call Center)

Nailah O'Neil
(Lab MA)

Nancy Fox (MA)

Nicholes Ramon Coronado
(MA-Care Coordination)

Nicole Rock
(Senior Lab Tech)

Phoebe Jung
(Receptionist)

Robert Barbero
(Lab Technologist)

Shamicka Moore (Lab MA)

Stephany La Gala (Lab MA))

Tiffany Rossi
(Receptionist)

Victoria Lucido
(Clerical)

Victoria Rodriguez
(Receptionist)

New COVID-19 POLICY



In accordance with NYS guidelines and NYCBS' policy, face coverings are required. In addition, please keep your nose and mouth covered.



Patients can now bring a companion with them during a doctor or treatment visit as long as they can prove COVID vaccination, such as a COVID vaccination card or Excelsior Pass.



All patients, staff, and companions must still wear a face covering while inside any NYCBS facility, and we will continue to check patient and visitor temperatures at the door and ask about any COVID-related symptoms.



Staff should monitor their temperature before each shift and report any COVID-19 symptoms immediately to their supervisor.

OPEN POSITIONS

MEDICAL ASSISTANTS

Contact: Robert Nicoletti
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CAT SCAN (CT) TECHNOLOGIST

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LICENSED PRACTICAL NURSES (LPN)

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MEDICAL FRONT DESK RECEPTIONIST

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REGISTERED NURSES (BSN/RN's)

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MEDICAL LABORATORY TECHNOLOGIST (PM Shift)

Patchogue Medical Oncology
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PET/CT SCANNER (Full Time/Part Time/Per Diem)

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FLOW TECHNICIAN

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STAFF HEMATOLOGIST/MEDICAL ONCOLOGIST

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HEMATOLOGIST/ONCOLOGISTS

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HEMATOLOGIST/ONCOLOGISTS (Greek Speaking)

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NURSE PRACTITIONER

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HEAD NURSE, RN/BSN

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DIRECTOR OF PATIENT EXPERIENCE

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OUR PATIENTS & THEIR FAMILIES

Our patients and their families tell the story of conquering cancer like no other. They help us connect, inspire, and empower. If you know a patient or have a family member who would like to make an impact and share their experience with us, please have them contact marketing@nycancer.com.