

# #THE SPECIALIST

## EDITION HIGHLIGHTS

**6** **NUTRITION AWARENESS**  
June was fresh fruit & vegetables month

**14** **UNBREAKABLE BOND**  
The twin bond is a unique and powerful relationship unlike any other.

**23** **5 COMMON SKIN CANCER MYTHS & FACTS**  
Find out what matters most when it comes to skin cancer.

# A MESSAGE FROM THE CEO

## My Friends,

I hope everyone is enjoying their summer.

Temperatures rising means spending more time grilling and soaking up the sun. From gatherings with family and friends, backyard cookouts, beach days, and spectacular firework displays for America's birthday, it is a time to feel proud and reflect on the values for which it stands. So much of our Nation's values reflect our values at New York Cancer & Blood Specialists.

**Freedom**—We are committed to providing patient-centered care, ensuring our patients have a voice in their care.  
**Liberty**—Our physicians, nurses, and support staff work around the clock to deliver the best care possible without any barriers or bureaucracy.  
**Justice**—Our patients are our friends, families, and neighbors who we know personally, treating them with compassion and dedication.

These three words remind us of our patients' strength and resilience, like MaryAnn, and twin sisters Maribel and Marisol. The stories you will read about these brave women are truly inspiring.

And since the nicer weather means in-season fruits and vegetables, our registered dietitians encourage us all to indulge in the perks of seasonal eating. A diet built around antioxidant-rich fruit and non-starchy vegetables boosts your immune system and helps protect against cancer cells.

We can all eat to that!

Warm regards,

**Dr. V**



6



18



14



20



23

<b>Sarcoma Cancer Infographic</b>	<b>04</b>
A detailed chart showcasing numerous cancer facts	
<b>Nutrition Awareness</b>	<b>06</b>
June was fresh fruit & vegetables month	
<b>Top 18 Tips With Benefits List</b>	<b>08</b>
A bunch of tips to boost your health through nutrition	
<b>The Role of The Registered Dietitian Nutritionist</b>	<b>10</b>
During Cancer Survivorship	
<b>The Perks of Eating Seasonal</b>	<b>13</b>
By Michelle Slowey, MA, RDN, CDCES	
<b>Unbreakable Bond</b>	<b>14</b>
The twin bond is a unique and powerful relationship unlike any other	
<b>Irrompible Lazo</b>	<b>16</b>
El vínculo entre gemelos es una relación única y poderosa como ninguna otra	

<b>Men's Health Month</b>	<b>18</b>
Several Cancers that men need to be aware of as the age	
<b>A Survivor's Story of Hope &amp; Conquest</b>	<b>20</b>
MaryAnn Sorge stopped by to share her experiences with cancer	
<b>5 Common Skin Cancer Myths &amp; Facts</b>	<b>23</b>
Find out what matters most when it comes to skin cancer	
<b>Conquering Cancer in The Upper East Side</b>	<b>24</b>
Another NYCBS cancer-conquering location opens	
<b>The Bulletin</b>	<b>30</b>
A quick look at what is going on	
<b>New Hires</b>	<b>32</b>
See who joined the team Conquering Cancer	
<b>Open Positions</b>	<b>34</b>
Know anyone who wants to join a winning team?	



# SARCOMA

Sarcoma is a rare cancer of the connective tissues that hold the body together, including the muscles, tendons, blood vessels, fat, nerves, deep skin tissue, bones and cartilage. It is generally divided into two types, Osteosarcoma and Soft tissue sarcoma.

## OSTEOSARCOMA



Osteosarcoma, or bone sarcoma, is a malignant tumor of the bone. Unlike cancer that starts elsewhere and spreads to the bones, osteosarcoma generally starts in the cells that grow into new bone tissue, most often in the ends of the long bones of the body, such as the arms and legs.

## RISK FACTORS FOR OSTEOSARCOMA



RADIATION EXPOSURE

PAST CANCER TREATMENTS



HAVING THE RETINOBLASTOMA GENE

## SOFT TISSUE SARCOMA



Soft tissue sarcoma is a rare cancer that occurs in the muscles, fat, blood vessels, tendons, fibrous tissues and synovial tissues (tissues around joints).

## RISK FACTORS FOR SOFT TISSUE SARCOMA



RADIATION EXPOSURE

FAMILY HISTORY



EXPOSURE TO CERTAIN CHEMICALS

## THE NUMBERS

SOFT TISSUE SARCOMA HAS MORE THAN DIFFERENT CANCER SUBTYPES

# 50

## TREATMENT



BIOLOGICAL THERAPY



SURGERY



CHEMOTHERAPY



RADIATION THERAPY

## PREVENTION TIPS



AVOID HARMFUL CHEMICALS



LIMIT YOUR RADIATION EXPOSURE



GET TESTED FOR GENES

# Nutrition

## *June was Fresh Fruit & Vegetable Month*

Eating fruits and non-starchy vegetables are strongly linked to reduced risks of cancers of the mouth, pharynx, larynx, and esophagus. Additionally, fruits are strongly linked to a lowered risk of developing lung cancer. Unfortunately, statistics show that only 24% of Americans eat the recommended amounts of fruit, and even fewer, a mere 13%, eat the recommended amounts of vegetables.

Our Registered Dietitian Nutritionists put together some ideas to inspire you to eat and enjoy fruits and vegetables this month (and every month). Their "Top 18 Tips With Benefits List" can be found on the next few pages!

By Wendy Kaplan, MS, RDN, CSO, CDN

# Top 18 Tips With Benefits List

1

**Tip:** Plan a homemade pizza night with tons of veggies to add as toppings so family members can pick and choose their favorites.

**Benefits:** The lycopene in tomatoes is a carotenoid with protective properties against certain cancers, including prostate cancer.

2

**Tip:** Make your pasta dish with ½ zucchini noodles.

**Benefit:** 1 Cup of cooked zucchini contains 3g fiber which is about 10% of the daily fiber goal. Consuming adequate fiber can help prevent colorectal cancer.

3

**Tip:** Add chopped vegetables into foods such as tacos.

**Benefit:** Bell peppers are high in vitamin C, which is an antioxidant. Antioxidants help prevent free radical and cellular damage that can lead to cancer.

4

**Tip:** Replace regular rice with cauliflower rice in Mexican-inspired dishes like burrito bowls.

**Benefit:** Cauliflower is a cruciferous vegetable that contains sulforaphane, a phytochemical which can reduce inflammation, protect DNA, and possibly slow tumor growth.

5

**Tip:** Include kale (or other greens) in breakfast smoothies.

**Benefit:** Kale is an excellent source of alpha-linolenic acid. Alpha-linolenic acid is a potent antioxidant that can prevent free radical cell damage.

6

**Tips:** Freeze fruit (e.g., grapes) and enjoy it as a crunchy snack. A 1/2 cup of frozen grapes counts as a serving.

**Benefit:** Grapes contain resveratrol, a phytochemical which protects against heart disease and the development of certain cancers.

7

**Tip:** Put together a charcuterie board with emphasis on colorful fruits and veggies and lighter on the meats and cheeses.

**Benefit:** Eating plenty of fruit and vegetables helps lower the risk for many cancers.

8

**Tip:** Slice whole oranges (including rind), place on a baking sheet, sprinkle with a bit of cinnamon and sugar, and roast at 400° for ~30 minutes (time may vary).

**Benefit:** Oranges are loaded with vitamin C and phytochemicals that may work synergistically to protect against cancer.

9

**Tip:** Heat up and mash-up fresh or frozen blueberries and use them as a sauce for pancakes, waffles, yogurt, oatmeal, fruit salad, or ice cream.

**Benefit:** Blueberries contain phytochemicals that may help prevent DNA damage.

10

**Tip:** Add corn kernels and diced mango to salsa and use it as a dip with whole-grain chips or a sauce for meat, fish, or poultry.

**Benefit:** Mangoes have a whole host of phytochemicals, including ellagic acid, gallotannin, and mangiferin (exclusive to the mango), that have cancer-protective properties.

11

**Tip:** Purée asparagus and use it as a base for a creamy soup.

**Benefit:** Besides potentially having anti-cancer properties, asparagus contains fiber inulin which helps support gut health.

12

**Tip:** Make kabobs using several fruits and vegetables such as red bell pepper, onion, zucchini, pineapple, and mango.

**Benefit:** Besides being pretty and tasty, grilling fruits and vegetables will not produce the carcinogens that grilling meat does.

13

**Tip:** Add spinach and to your omelet.

**Benefit:** Spinach has many iron and tomato tons of Vitamin C, which helps you absorb the iron.

14

**Tip:** Choose a fruit or vegetable appetizer instead of a fried one when dining out.

**Benefits:** This will help keep the calories to a minimum, promote satiety and help you meet fiber recommendations.

15

**Tip:** Make a fruit platter or a watermelon bowl filled with fruit for dessert when having guests over.

**Benefits:** This is a great low-calorie and nutritious sweet snack without fat and refined sugar in "traditional" desserts.

16

**Tip:** Sprinkle a little cinnamon on pineapple (or peaches) and grill. Add some goat cheese, and this can be served as a side dish with the main meal.

**Benefits:** Pineapples have a product called bromelain, which helps decrease inflammation in the body.

17

**Tip:** Try something different. Add more exotic fruits to your diet, like dragon fruit, figs, gooseberries, or blood oranges.

**Benefit:** Gooseberries are high in fiber, vitamin C, and antioxidant procatechuic acid. Dragon fruit (pitaya) contains several antioxidants (betalains, hydroxycinnamates, and flavonoids) that protect your cells from damage.

18

**Tip:** Make a spinach salad with strawberries and blueberries and top with almonds, poppy seeds, and an infused balsamic vinegar.

**Benefit:** All of the above contain high amounts of disease-fighting antioxidants.

# The Role of the Registered Dietitian Nutritionist in Cancer Survivorship

By Wendy Kaplan, MS, RDN, CSO, CDN

Did you know that by the year 2030, 22 million Americans will be living with a history of cancer? This is good news! Cancer patients are living many years after completing treatment.

A common thought for many cancer survivors is, "what should I focus on now?" Many want to take charge of their health and are determined to do what they can to prevent cancer recurrence and are specifically interested in what kind of diet they should follow.

Just as medical nutrition therapy was an essential intervention during cancer treatment, it is an equally crucial intervention post-treatment. Nutrition complications patients face post-treatment vary from patient to patient but may include fatigue, impaired bone health, cardiovascular complications, bowel symptoms, metabolic syndrome, endocrine issues, dry mouth, and taste changes. Working with an RDN helps patients with post-treatment symptom management.

Hopefully, many patients will soon begin to feel better and be ready to make positive health changes. Dietary and lifestyle interventions play a crucial role in risk reduction for cancer recurrence and new cancer development.

All the symptoms and metabolic manifestations guide us to make appropriate nutritional therapy recommendations which, of course, are tailored to the individual. Many survivors present with excess body weight and a higher percentage of body fat. Hence, we promote regular exercise, aerobic, weight-bearing, and resistance training and promote a healthful diet.

How you eat matters. It does affect your risk of disease in the future for cancer and cancer recurrence, and other chronic diseases. For example, increased weight increases visceral adiposity, associated with an increased risk of many cancers.

All these physical manifestations from anti-cancer treatments pave the way and subsequently bring on additional emotional symptoms such as anxiety and depression. As a result, some may feel like they are at a standstill and not know how to begin to take steps towards better health, while others believe they should be doing more than they are doing.

Many times survivors take to social media to obtain information and are bombarded with messages and advice for cancer prevention. Unfortunately, what sounds like good advice and recommendations can be harmful, as much of that information is not evidence-based. Many cancer survivors also take dietary supplements to promote health. It is our role to share the evidence (& lack of evidence) with our patients. We can also guide them to who and what sources provide accurate information.

Our central role is to help survivors regain a sense of empowerment they may have felt was taken away from them upon diagnosis and throughout their treatment phase. We will collaborate with their team and be proactive with all potential health and psychosocial concerns to live their best lives.



# The Perks of Eating Seasonal

By Michelle Slowey, MA, RDN, CDCES

In-season fruits and vegetables are fresher, healthier, and less costly. They are grown and harvested during optimal growing seasons (when the weather and soil cooperate) and contain the highest amounts of nutrients and flavor. They produce the way nature intended and have the opportunity to ripen naturally and not have to be picked before their peak. Buying the off-season puts demands on food that needs to be outsourced. Produce is picked before it can fully ripen.

When the colder weather is upon us, heartier vegetables like squashes and root vegetables are seasonal specialties used in stews and soups.

When the weather is warmer in the spring and summer months, more hydrating fruits like melons and citrus are at their peak. Spring is a great time to start a backyard garden. Summer produces an abundance of vegetables and fruits. Nothing can beat the sweetness of a June strawberry.

Besides taste and nutritional benefits, when you eat foods in season, you are helping local farmers, the environment, and the local economy. Less fuel, pesticides, water, and refrigeration are needed. Many restaurants have adopted a farm-to-table dining experience that allows recipes to be lower in sodium, calories, sugar, and fat. A good chef can elicit the authentic flavors of the foods. Cooking at home can be more simple. Light sauteing, steaming, grilling, and using marinades are good ways to enjoy the nutrition of the season.

Here is a list of foods that begin their Spring on Long Island: asparagus, broccoli, beets, cabbage, carrots, greens (arugula, chard, collards, kale, and mustard), radishes, rhubarb, strawberries.

Enjoy the sweet tastes of summer!

# Unbreakable BOND

The twin bond is a unique and powerful relationship unlike any other. Commonly, twins seem to share similar experiences throughout their lives and have an inherent understanding of their sibling's emotional state. However, a consecutive breast cancer diagnosis for twin sisters Maribel and Marisol tested their faith and made their relationship stronger than ever.

Maribel, a Florida resident, was not one to go to the doctor often. So when she decided to have a mammogram for the first time at 42-years-old; she was shocked to learn the screening results, and later a biopsy came back positive for breast cancer.

Her physician referred her to an oncologist in Florida who suggested she have a mastectomy immediately. Unwilling to undergo a mastectomy, Maribel was ready to let life run its course until her twin sister stepped in. Marisol encouraged Maribel to come to New York for treatment. They had a family friend undergoing cancer treatment at New York Cancer & Blood Specialists with Dr. Zuniga as their oncologist. They recommended him, and Maribel had an individualized care plan with a healthcare team she trusted in less than a month.

Maribel learned of her diagnosis in 2018. By July 2019, she had surgery to remove the cancerous cells and began two months of radiation treatment. As a result, Maribel did not need to have a mastectomy after all. She did, however, have a hysterectomy since genetic testing identified her as a carrier of the BRCA genetic mutation, which increases the risk of developing ovarian cancer. A week after the hysterectomy, Maribel received the miraculous news; she was cancer-free.

Three months later, their faith tested them a second time. Marisol had noticed her breasts felt inflamed, and a lump would come and go with her period. So she made an appointment with her gynecologist, who ordered her to go for a mammogram. But, unfortunately, she also had a sonogram on her breasts which showed a tumor, forcing her to have multiple biopsies.

Marisol's treatment began at another institution, but it wasn't right; she felt sick. So one day, while Maribel was in the office with Dr. Zuniga for her appointment, she Facetimed Marisol.



Dr. Zuniga visited Marisol where she was going for treatment, and that day, Marisol decided to start her treatment plan over at NYCBS.

When the COVID-19 pandemic hit, it caused an upheaval in their world, causing them to be distant from one another. Maribel would visit Marisol at her house and wave to her through the window outside. So naturally, they were determined to conquer the disease together, even if it meant being apart.

Marisol's cancer treatment consisted of 12 rounds of chemotherapy and six rounds of radiation. Then, in May 2020, she underwent a double mastectomy. One year later, Marisol finished her last chemotherapy surrounded by flowers and balloons gifted by the wonderful nurses at NYCBS.

Reflecting on the year, Marisol is proud to say she learned quite a few new things about herself, including her talent for baking. Marisol helped pass the dreary days by learning to make specialty cakes—the kind you see at fancy parties. Because the pandemic disrupted birthday plans for her daughter, she made a promise that the year ahead would be better. This year, Marisol threw her daughter a birthday party complete with a unicorn birthday cake crafted with her skills.

"I am eternally grateful for the care at NYCBS and Dr. Zuniga's helping hand," she says. "They treat you like family, and that is beyond care."

Maribel would undoubtedly agree. Her perspective has changed since that very first day at the doctor. She said, "I am very happy and blessed to have my family and NYCBS' support and care. I want to live a long life and see my daughters successful."

It was tough for Maribel to go through breast cancer simultaneously as her sister, but faith united them.

"She always took care of me; it was my turn to take care of her," she said.

Maribel and her niece (Marisol's daughter) chopped off their hair and donated it to St. Jude Children's Research Hospital.

Courage is one of the greatest manifestations of faith. Maribel and Marisol believe, "God gives His hardest battles to his strongest soldiers, but He also gives them an angel, and for us, that was Dr. Zuniga and NYCBS."



# Irrompible LAZO

El vínculo entre gemelos es una relación única y poderosa como ninguna otra. Por lo general, los gemelos parecen tener experiencias similares a lo largo de sus vidas y tienen una comprensión innata del estado emocional de sus cogemelos. Para las hermanas gemelas Maribel y Marisol, un diagnóstico en secuencia de cáncer de mama puso a prueba su fe y fortaleció su relación más que nunca.

Maribel, habitante de Florida, no era de las que iban al médico con frecuencia. Entonces, cuando decidió hacerse una mastografía por primera vez a los 42 años; se sorprendió al ver los resultados del examen, y luego la biopsia dio positiva a cáncer de mama.

Su médico la remitió a un oncólogo en Florida, quien le sugirió que se sometiera a una mastectomía de inmediato. No estaba dispuesta a renunciar a sus pechos, Maribel estaba lista a dejar que la vida siguiera su curso, hasta que su hermana gemela intervino. Marisol animó a Maribel a que fuera a Nueva York para recibir tratamiento. Tenían un amigo de la familia que estaba en tratamiento contra el cáncer con el Dr. Zuniga como oncólogo en New York Cancer & Blood Specialists (NYCBS). Lo recomendaron, y en menos de un mes, Maribel repitió todas las pruebas necesarias y tuvo un plan de cuidados personalizado.

Maribel se enteró de su diagnóstico en el 2018. En julio del 2019, se sometió a una cirugía para extirpar las células cancerígenas y comenzó dos meses de tratamiento con radiación. Después de todo, Maribel no necesitaba una mastectomía. Sin embargo, sí se sometió a una histerectomía ya que las pruebas genéticas la identificaron como portadora de la mutación genética BRCA, lo que aumenta el riesgo de desarrollar cáncer de ovario. Una semana después de la histerectomía, Maribel recibió la milagrosa noticia; ella ya no tenía cáncer.

Tres meses después, su fe las puso a prueba por segunda vez. Marisol había notado que sus senos estaban inflamados y un bulto aparecía y desaparecía con su periodo. Así que hizo una cita con su ginecólogo, quien le pidió que se hiciera una mastografía. Le hicieron una ecografía en los senos que mostró un tumor, lo que la obligó a someterse a múltiples biopsias.

El tratamiento de Marisol comenzó en Good Samaritan. Pero no estaba bien; ella se sentía enferma. Así que un día, mientras Maribel estaba en la oficina con el Dr. Zuniga para su cita, ella habló con Marisol por Facetime.

El Dr. Zuniga visitó a Marisol en Good Samaritan. Ese día, Marisol decidió comenzar su plan de tratamiento en NYCBS.

Cuando llegó la pandemia de la COVID-19, causó una conmoción en su mundo, lo que hizo que ellas estuvieran distantes. Maribel visitaba a Marisol en su casa y la saludaba por la ventana de afuera. Naturalmente, estaban decididas a vencer la enfermedad juntas, incluso si eso significaba estar separadas.

El tratamiento contra el cáncer de Marisol consistió en 12 rondas de quimioterapia y seis rondas de radiación. En mayo de 2020, se sometió a una doble mastectomía. Un año después, Marisol terminó su última quimioterapia rodeada de flores y globos por parte de las maravillosas enfermeras de NYCBS.

Reflexionando sobre el año, Marisol se enorgullece de decir que aprendió bastantes cosas nuevas sobre sí misma, incluido su talento para hornear. Marisol ayudó a pasar los días tristes aprendiendo a hacer pasteles especiales, de los que se ven en las fiestas elegantes. Debido a que la pandemia interrumpió los planes de cumpleaños de su hija, hizo la promesa de que el próximo año sería mejor. Este año, Marisol le hizo a su hija una fiesta de cumpleaños completa con un pastel de unicornio hecho con sus habilidades.

“Estoy eternamente agradecida por la atención en NYCBS y la ayuda del Dr. Zuniga”, comentó. “Te tratan como a una familia, y eso está más allá de la atención”.

Sin duda, Maribel estaría de acuerdo. Su perspectiva ha cambiado desde ese primer día en el médico. Declaró: “Estoy muy feliz y me siento bendecida de tener el apoyo y la atención de mi familia y de NYCBS. Quiero vivir una vida larga y ver que mis hijas tengan éxito”.

Fue difícil para Maribel pasar por un cáncer de mama al mismo tiempo que su hermana, pero lo que las unió fue la fe.

“Ella siempre me cuidó; ahora era mi turno de cuidar de ella”, comentó.

Maribel y su sobrina (la hija de Marisol) se cortaron el cabello y lo donaron al St. Jude Children's Research Hospital.

El coraje es una de las mayores manifestaciones de fe. Maribel y Marisol creen que, “Dios les da sus peores batallas a sus mejores guerreros, pero también les da un ángel, y para nosotros, ese fue el Dr. Zuniga y NYCBS”.



# MEN'S HEALTH MONTH

## Prostate Cancer

Besides skin cancer, the most common cause of male cancers is prostate cancer. As you age, your risk factors increase, and for men over 65, this is something that they need to keep an eye on. Those who have close relatives with prostate cancer are at higher risk. A routine visit with your healthcare provider lets you know if you are at risk for prostate cancer and if or when you should get screened for it, and often this starts around age 40.

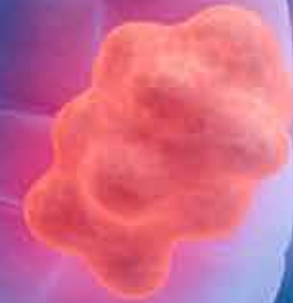
Symptoms usually appear in late stages for prostate cancer and may include trouble urinating, erectile dysfunction, or blood in the urine. Treatment will vary and often may not be necessary; you may be prescribed surgery or radiation, chemotherapy, or drug therapy in other cases.

## Colorectal Cancer

Cancer that starts in the colon or rectum is known as colorectal cancer. Their risk factors increase for those overweight, obese, out of shape, smoke, or have a personal or family history of colorectal cancer or polyps. Routine screenings are crucial to catching skin cancer early. Stool-based tests and visual exams such as colonoscopies or CT scans may occur from age 45 and over. Routine screenings are crucial for early diagnosis.

## Lung Cancer

Though many forms of lung cancer are preventable and due to environmental or lifestyle factors, not all types are; however, several things lower your chances of lung cancer. Your doctor might suggest regular screenings for those at higher risk of lung cancer to catch it early on. Avoid smoking and being near and breathing in secondhand smoke, as these can all increase your chances. It's never too late to quit smoking and talk to your healthcare provider about ways and resources that could help you stop the nicotine habit.



# Conquering Cancer Three Times

MaryAnn Sorge was 59-years-old when she had her first encounter with cancer. Since then, the 74-year-old has conquered cancer three times with the care and support of New York Cancer & Blood Specialists (NYCBS) by her side.

Fifteen years ago, MaryAnn was growing more and more frustrated with the hoarseness in her voice. After a biopsy proved a cancerous tumor on her vocal cord, she was soon diagnosed with laryngeal cancer by an ear, nose, and throat specialist. She sought guidance at NYCBS with Radiation Oncologist Dr. Joseph Cirrone, who recommended radiation treatment.

Her radiation treatment was challenging. She felt as if she had terrible sunburn in her throat. Everyone at the office and home tried to make her as comfortable as possible. But since it was difficult for her to eat or drink, she would often receive IVs for hydration and consume soft foods like mashed potatoes every day.

MaryAnn could not speak for eight months. She could whisper, but it would hurt too much to talk. So, her kids surprised her with a giant chalkboard to write on. Then one morning, her husband asked if she wanted a cup of tea, and she said she would like coffee. At that moment, she realized she had spoken and sounded like herself again.

Almost a decade later, a routine CAT scan discovered MaryAnn had small cell lung cancer. In her case, the doctor performed a biopsy, but the tumor was very close to her aorta. So again, she underwent radiation with four rounds of chemotherapy. MaryAnn continued to see Dr. Cirrone for radiation and credits NYCBS hematologist-oncologists Dr. William LiPera, Dr. David Chu, and Advanced Certified Hospice and Palliative Nurse Practitioner MaryAnn Fragola with her successful outcomes.

"My doctors were so wonderful," MaryAnn said. "There was not one day that I felt nauseous with chemotherapy. They prescribed me preventative medicine, and palliative care provided me with 100% relief."

Two months later, MaryAnn underwent brain radiation as a preventative measure since chemotherapy does not go to the brain. Losing her hair for a second time, she wore wigs and put her makeup on every day despite how she felt.

MaryAnn was overwhelmed with all the different tests she had to take and everything she was unfamiliar with, but her family at home and NYCBS helped her get through it. "I had a lot of support from my family," she said. "My husband was a wonderful man. He took me every single day for my radiation."

After her husband's passing, MaryAnn sold the home she raised her family in. Eager for a new beginning, she bought a house close to her daughter and applied for a part-time position as a lunch lady at her grandson's local high school.

Her PET scans showed she was cancer-free until about two months ago. Then, the scan showed two cancerous lesions, one in each lung. That's when MaryAnn and her care team decided to do eight CyberKnife treatments, which allowed her to continue working with no downtime.

"Dr. Cirrone is such a wonderful man, who has been with me since the beginning," she says. "He called me the next day and said, 'Let's get rid of this thing now. You've been through enough. And that's when I started my treatment.'"

"We caught it early," she explains. "That's the key." In addition, NYCBS Nurse Practitioner Joanne Palladino often made remote calls to MaryAnn, providing an extra layer of care to her treatment and a friendly reminder that she was never alone. Now that CyberKnife treatment is over, her care team continues to monitor her closely.

"NYCBS is a wonderful place. The nurses and everyone are so sweet and so accommodating. They care. I can't say enough about them," MaryAnn gushes. "They were just absolutely fantastic and made you feel so comfortable. I love them all. They're all sweethearts."



 **SURVIVOR**  
MaryAnn Sorge

# 5 Common Skin Cancer Myths & The Facts

## 1 Your Skin Tone Matters.

There is a big misconception that those who tan easily, have dark skin tones, or don't burn have no risk for skin cancer. When it comes to tanning, activated melanin that gives you a tan is your body's attempt at protecting your skin from further damage and increases your chances of developing sun-related ailments.

As far as skin tone goes, though lighter skin does increase your chance of skin cancer, darker skin tones are not immune to this disease. Darker-skinned men and women may still develop and suffer from all forms of UV damage and often don't spot skin cancer until the later, more dangerous stages.

## 2 Skin Cancer Isn't Dangerous.

Skin cancer is treatable when found early, and the most common ones, such as basal cell carcinoma and squamous cell carcinoma, are usually curable. Still, some skin cancers may lead to other issues like extensive tissue damage, disfigurement, and metastasizing to other areas of the body.

## 3 Sunscreen is Only For Summer.

Sunscreen should be part of your daily routine, and even though clouds or cold winter days might have you skipping your sunscreen, the rays are still strong enough to cause damage to your skin or eyes and increase your chance of skin cancer.

## 4 You Don't Have to Worry About Skin Cancer Until You're Older.

Though your risk for most cancers will be more significant as you age, skin cancer risks for young adults are rising and are among the most common forms of cancer for those aged 15 through 29. Skin checks should occur monthly, and sunscreen should be part of your daily routine.

## 5 All SPF's are The Same.

Though UVB rays cause most sunburns, UVA rays, which also reach the earth's surface and penetrate more deeply into the skin, contribute to skin cancer. To get the best and most proper protection, you'll want to choose an SPF sunscreen that has broad-spectrum coverage protecting against both UVA and UVB rays. Always remember to reapply every two hours.



COMPREHENSIVE WITHOUT COMPROMISE

## New York Cancer & Blood Specialists Opens in Upper East Side

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.**

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**"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,"**

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- Jeff Vacirca, MD, CEO of NYCBS.

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### About New York Cancer & Blood Specialists:

New York Cancer & Blood Specialists is committed to our patients. We are dedicated to providing each patient with a unique path to treatment and unmatched support. We strive to make quality, comprehensive cancer care available to each and every patient throughout New York.

## Recognizing Risk Management Week

Healthcare risk management is a diverse profession in the dynamic and evolving healthcare industry. Healthcare risk managers hold a wide variety of titles and work in a cross-section of organizations and operate in a wide range of settings.



**Jessica M. Marrone, MBA**  
Director of Utilization Review & Compliance Risk Management

### What kind of backgrounds do healthcare risk managers have?

Healthcare risk managers come from various professional and educational backgrounds. They are interested in positively influencing the healthcare industry and delivering safe and trusted healthcare.

### What do healthcare risk managers do?

Risk managers identify and evaluate risks as a means to reduce injury to patients, staff, and visitors. They work proactively and reactively to prevent an incident or minimize the damages following an event.

- Event and incident management
- Clinical Aspects
- Financial Aspects
- Legal Aspects
- General Business Aspects
- Psychological and Human Factors of Healthcare
- Statistical Analysis
- Insurance
- Risk Financing
- Claims Management

### How can Risk Managers help clinicians?

Clinical risk management focuses on mitigating risks and harm to patients and staff. Clinicians need to be aware of error prevention and recurring trends in treatment and patient care. Contact your risk manager when:

1. There is confusion about a living will or advanced directive
2. When there are recurring trends in patient incidents
3. When there is an equipment malfunction or failure while delivering patient care
4. If there is any adverse event or poor outcomes during patient treatment

Your risk manager can help by proper compliance with the protocol, implementing new strategies to mitigate organizational exposure, and execute containment plans when such events transpire.

### Risk Management Support

Risk Management supports the organization and employees by assessing, developing, implementing & minimizing adverse event exposure. We are all a team, and by working together, we can achieve company goals and objectives to continue delivering excellent patient care.

# Why are referrals to Palliative Care Delayed?



By MaryAnn Fragola, DNP, ANPc, ACHPN

With a newly implemented outpatient palliative care program in my current oncology practice, patients often hesitate to see me due to fear, misconceptions, and stigma. One of the most common comments I receive from families is, “my loved one isn’t ready for palliative care; they are not dying.” Few patients understand the meaning of palliative care, and much of my time is spent explaining my role.

Many people also assume that palliative care is just for patients with cancer. However, patients with other chronic illnesses such as heart disease, lung disease, neurologic diseases, and dementia also benefit from palliative care. These chronic illnesses can cause symptoms that may negatively impact the quality of life (e.g., shortness of breath, pain, fatigue, depression, decreased appetite, anxiety, or nausea).

Therefore, the first consultation typically involves patient education on palliative care and how it differs from hospice care. Next, I explain that palliative and supportive care should be part of the treatment plan from diagnosis of an illness through the end of life, incorporating hospice care if and when the time presents.

## Benefits of Palliative Care for Chronic Illnesses

In a randomized study involving patients with metastatic non-small-cell lung cancer who received early palliative care plus standard oncologic care or standard oncologic care alone, patients given early palliative care had a significantly better quality of life and were less likely to report depressive symptoms at 12 weeks compared with patients given standard care group.<sup>1</sup> Additionally, patients in the early palliative care group lived nearly three months longer than the standard care group despite receiving less aggressive care at the end of life.

Symptom management and emotional support are major goals of palliative care. Early integration and development of a relationship with palliative advanced practice practitioners (APPs) help ensure that patients confide in and communicate their needs during the disease course as symptoms or side effects may develop or increase. Palliative APPs also may lessen some of the burden on physicians with time constraints and heavy patient loads.

In a retrospective cohort study, patients with advanced cancer given early referrals to palliative care (i.e., more than three months before death) had significantly fewer emergency room visits, hospital admissions, and hospital deaths in the last 30 days of life than those given late referrals.<sup>2</sup> Patients who received outpatient referrals to palliative care showed improved quality of end-of-life care than patients referred to palliative care in the inpatient setting.

It is time to accept supportive and palliative care as an essential element of early care and treatment of cancer and other chronic diseases. Let us allow palliative care to become an extra layer in the comprehensive team approach to care and not be driven by fear or misconception. Early integration of a palliative and supportive team focusing on symptom management, supportive care, and quality of life helps us meet the patient’s emotional, physical, and spiritual needs.

MaryAnn Fragola, DNP, ANPc, is clinical director of Palliative Care and an advanced certified hospice and palliative care nurse at New York Cancer & Blood Specialists.

## The Advanced Oncology Certified Nurse Practitioner Certification (AOCNP)

*The Advanced Oncology Certified Nurse Practitioner Certification (AOCNP) is the most widely recognized credential for nurse practitioners (NPs) in the oncology setting, ensuring they stay at the forefront of oncology nursing. Achieving the certification validates a nurse’s broad knowledge and experience in cancer care to confidently and effectively address the complex needs of patients. In addition, it reinforces their role as an integral part of the oncology care team.*

The three-hour, 165 multiple-choice question test includes subject matters in eleven different oncology subject areas. In addition to completing the test, NPs must also have either 500 or 1,000 practice hours in an oncology setting and have completed 30 hours of oncology-specific continuing education or have taken two credit hours in a graduate-level oncology course to be certified.

AOCNP is the gold standard and makes a difference to patients who want knowledgeable care providers. It helps patients feel confident in the care they receive by knowing that their nurse practitioner is certified to assess, diagnose, treat, and manage their care.

Certification offers personal and professional rewards to nurses, enhances professional credibility in the competitive oncology market, and contributes to professional recognition and feelings of personal accomplishment. In addition, it creates mentors, role models, and champions of advanced clinical practice as a nurse practitioner and is a distinct asset to oncology practices in the community and academic settings.

Eligible nurses should consider getting their certification. Getting certified elevates the patient experience at New York Cancer & Blood Specialists. It allows our nurses to continue to grow as professionals in the field of advanced practice nursing in oncology.

A very special congratulations to AOCNP certified Julie Plantamura, RN, MSN, FNPc, AOCNP, and Melanie Acierno, DNP, AOCNP, on their certification and commitment to providing the highest quality cancer care.

## Congratulations

**Julie Plantamura, RN, MSN, FNPc, AOCNP and Melanie Acierno, DNP, AOCNP**

*On Your Advanced Oncology Certified Nurse Practitioner Certification*

**“To be AOCNP certified specifically communicates the gold standard of Nurse Practitioners in the field of oncology. It is also a feeling of personal accomplishment. Our education as Advanced Practice Providers in oncology is ongoing. Certification provides us with the incentive of continuing education and continuing to renew certification.”** - Julie Plantamura, RN, MSN, FNPc, AOCNP.

**“Furthering your education brings value to you, the people you work with, and your patients.”** Melanie Acierno, DNP, AOCNP

**“I encourage eligible NP’s to get certified as a way to elevate the patient experience at NYCBS and to continue to grow as professionals in the field of advanced practice nursing in oncology.”** Chief Clinical Officer Diana Youngs, RN, MSN ANPc

# FOR ONE OF OUR OWN



## Patricia “Trish” D’Andraia

Trish has worked at NYCBS for many years. Unfortunately, on Wednesday, June 16, 2021, she 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, 10, 13 & 20, and also cares for her mother. Trish and her family are remarkable people, always offering to help others. Now it is 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, are seeking your help on her behalf to help rebuild what they have lost. Please consider donating to the GoFundMe by scanning the QR Code to help us remove some of their financial burdens; every dollar helps!

We know Trish and her family appreciate your outpouring of love.

If you would like to make a non-monetary donation, please contact **Patti Asselta**, NYCBS Billing, at **(631) 338-4875**



# EMPLOYEE OF THE MONTH



## Patricia Serluco

*Insurance Eligibility & Referral Specialist*

Patricia started working at NYCBS in April 2019. Her mother was a patient, and when she passed away from lung cancer, Patricia applied, determined to help other patients and their families.

Since Patricia was 19 years old, she has worked in healthcare and knew she could provide value to the practice and the patients. In return, NYCBS provided her with that much more.

Patricia assists patients and front staff with billing or insurance issues without hesitation. As a result, she receives compliments daily from her colleagues, driving her to work harder.

She is genuinely grateful for her recognition as Employee of the Month and her NYCBS family. She loves her billing team and appreciates the opportunity she has had to grow and learn with them.

# The Bulletin Board

## What's New in IT

- We welcome Kingson Chen, our new IT intern in the city.
- We opened a new position and hired a PACS administrator to provide imaging system management and support, Asad Adly.
- Please welcome Amadeus Lipinski, IT Technician (East Region).
- Last, we got ready to open our new Medical/Oncology office in Manhattan Upper East Side, 7/1.

## Support the New York Cancer Foundation

Join the New York Cancer Foundation for an all-star baseball experience on July 17th, 2021! Watch the New York Yankees vs. Boston Red Sox from the private seats in the Audi Club at Yankee Stadium!

## Social Work

- DME donation program started 6/1/21. Patients can now donate.
- DME to be given to other patients in need and will be stored in Patchogue
- Plans to add social work services into more of our NYHealth PCP offices in July.

## Review of The Month

"One of the best and caring doctors amongst the handful that I am currently seeing." *Review for Dr. Alfredo Torres*

- Frank S.

## Moving Up!

- **Ashleigh Layman** was promoted to Staffing Manager of the West
- **Corinne Peña** began working as a PA in our nephrology location
- **Jamey Kim** began working as an NP in our nephrology office
- **Laura Brady** was promoted from Clinical Research Coordinator to Regulatory Manager
- **Rozalia Borohov** became a PA in Lexington
- **Dr. Shoba Menon and Dr. Mahendra Shah** joined our Primary Care division
- **Stephen Pentheros** became a Nurse Practitioner

## Quote of The Month

"Yesterday, I dared to struggle. Today, I dare to win."

-Bernadette Devlin

## Upcoming Holidays & Events

### The month of July

National Sarcoma /Bone Marrow  
Cancer Awareness Month.

**July 4 - Independence Day**

**July 20 - State-of-Palliative Care Webinar**

## 10 Years of Service or More with NYCBS

**COLON, LISA** 23  
**KRAUSE, KRISTINE J.** 23  
**RUSSELLO, PHYLLIS M.** 21  
**VOLLMER, SUZANNE** 17

**CARUSO, NICOLE A.** 15  
**BECKLES, VINCENT** 14  
**CONCEPCION, JENNIFER** 10



# THE NEW HIRES

**Aleem Khan**  
(CT Technologist (PRN))

**Alexa Fitzgerald**  
(Research Coordinator - RN)

**Alexander Santiago** (MA)

**Alexa Fitzgerald**  
(Research Coordinator)

**Alexis Mascia**  
(Project Coordinator)

**Allison Aviles**  
(Leon) (Lab MA)

**Anna Oglesby**  
(NY Health Authorizations  
Coordinator)

**Amanda Bollbach** (Receptionist)

**Amanda Restaino** (Call Center)

**Amadeusz Lipinski** (IT Intern)

**Angelica Ortega** (Lead Lab MA)

**Anne Ortiz-Rios** (Call Center)

**Asad Adly**  
(Radiology IT Specialist)

**Ariana Schlick**  
(NY Health Authorization Specialist)

**Avion Nelson** (Lab MA)

**Brian Albert** (Call Center)

**Brianna Pidoto**  
(Ultrasound Technologist)

**Brenden Berkowitz** (Lab MA)

**Bridget Bizzell**  
(Lab Assistant)

**Brittney Ferrari** (Lab Assistant)

**Brittany Simonis** (LPN)

**Carol Markowitz** (NP)

**Carlee Hough** (LPN)

**Catherine Argueta** (Lab MA)

**Chandra Sukhoo** (Reception)

**Chase Wu**  
(Unit Coordinator)

**Christina Ramirez**  
(Radiation Therapist)

**Christina Kasimis** (RN)

**Christine Magioncalda Marren** (NP)

**Christina O'Connor** (LabTech)

**Christine Palazzolo** (NP)

**Cindy Cepeda** (Call Center)

**Corinne Craig Pena** (PA)

**Crystal Gomez** (CCM MA)

**Crystal Thompson** (RN)

**Dalila Diamond**  
(Physical Therapy Aide)

**Danielle Boutwell** (Lab MA)

**Danielle Rudnicki** (Call Center)

**Danielle Sneed** (Desk LPN)

**David Pabon**  
(CT Technologist (PRN))

**Dawn Doccola**  
(Coordination Manager)

**Deborah Mckee** (Call Center)

**Devon Brown**  
(CT Technologist)

**Devon Holmes**  
(Courier)

**Donnie Driggers**  
(CT Technologist PRN)

**Doreen Warnock** (MA)

**Ebony Reynoso**  
(MA-Care Coordination)

**Elizabeth Hand**  
(Call Center)

**Elizabeth Heyder**  
(Receptionist)

**Emely Carrillo**  
(Receptionist)

**Erica Vera**  
(Histology Assistant)

**Ericka Amaya**  
(Receptionist)

**Estrella Orellana**  
(Call Center)

**Francisca Allende**  
(Radiology Scheduler)

**Evette Trim** (MA)

**Gregory Goeller**  
(Receptionist)

**Gabriella Ragazzini**  
(CCM LPN)

**Guy Philippe Beauzile** (PA)

**Jamey Kim** (NP)

**Jamie Gordon**  
(Office Manager)

**Jenna Davi** (Call Center)

**Jennifer Schmidt**  
(CT Technologist)

**Jennifer Weiss** (LPN)

**Jessica Rivera** (Call Center)

**Joseph Opoku**  
(CT Technologist)

**Joyce McCallum** (RN)

**Julianna Blair**  
(Ultrasound Tech (PRN))

**Ibtisama Ninche** (Triage RN)

**Kamila Yusupov** (Pharmacist)

**Karissa Scott** (Call Center)

**Kayla Blakeley** (Call Center)

**Kaylin Thomas**  
(FISH Technologist)

**Kelley Dilan** (Call Center)

**Kerry Schott**  
(Scheduling Coordinator)

**Kwahmaine Cheatham**  
(Patient Communications Operator)

**Latoya Shaw** (Receptionist)

**Leny Viray** (RN)

**Lisa DeStefano**  
(PET/CT Technologist)

**Lisa Miskovsky**  
(Eligibility Referral Specialist)

**LuAnn Simmons** (Research RN)

**Madison Jessen** (Scanner)

**Madisyn Wegener**  
(Physical Therapy Aide)

**Mary Cole Eligibility** (MA)

**Matthew Machado**  
(Lab Assistant II)

**Megan Hearn**  
(Radiology Scheduler)

**Michelle Arendash**  
(MRI Technologist-PRN)

**Michelle Moore** (MA)

**Michelle Pinto** (MA)

**Munesu Chinhenzva** (LPN)

**Nashly Rivera** (Lab MA)

**Natacha Lake** (RN)

**Natasha Smith** (LPN)

**Nathaly Diaz** (Receptionist)

**Neil Scalesse**  
(CT Technologist)

**Nicole Dawson** (MA)

**Nicole Valdez** (LPN)

**Nissany Ogaldez** (LPN)

**Nyesha Frazier** (LPN)

**Nylajah Drew** (Receptionist)

**Pamela Mendoza-Tramm**  
(Collection Specialist)

**Patricia Miranda** (RN)

**Rachel Blanche** (MA)

**Rozalia Borohov** (PA)

**Ryan Barry**  
(Medical Technologist)

**Samantha Jordan** (MA)

**Samuel Soto** (Lab MA)

**Sarah Sikand** (MA)

**Sarina Martin**  
(Eligibility Referral Specialist)

**Sasha Summerson** (LPN)

**Sabrina Hanna-Boulding** (MA)

**Shadi Clark** (Lab MA)

**Sharahn Rosser** (RN)

**Stephanie DeCristofaro**  
(Ultrasound Technician-PRN)

**Stephanie Rayburn** (Lab MA)

**Stephanie Roman** (Triage RN)

**Sylwia D'Orazi**  
(Ultrasound Technician-PRN)

**Taiecha Harvey** (LPN)

**Tamika Whitson** (Reception)

**Tashi Yangzom** (LPN)

**Tara Reynolds**  
(Executive Assistant-Dr. Rohit)

**Theresa Judge-Martin** (RN)

**Tiffany Rima**  
(Lab Technologist)

**Vanessa Remy** (MA)

**Vianna McNeil** (Call Center)

**Wendy Landin** (Lab MA)

**Yusuf Perine**  
(Inventory Control Associate)

# OPEN POSITIONS

## MEDICAL ASSISTANTS

Contact: Robert Nicoletti  
[rnicoletti@nycancer.com](mailto:rnicoletti@nycancer.com)

## CAT SCAN (CT) TECHNOLOGIST

Port Jefferson Station Medical Oncology  
Contact: Robert Nicoletti  
[rnicoletti@nycancer.com](mailto:rnicoletti@nycancer.com)

## LICENSED PRACTICAL NURSES (LPN)

Contact: Robert Nicoletti  
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## MEDICAL FRONT DESK RECEPTIONIST

Contact: Robert Nicoletti  
[rnicoletti@nycancer.com](mailto:rnicoletti@nycancer.com)

## REGISTERED NURSES (BSN/RN's)

Contact: Julia Harwood  
[jharwood@nycancer.com](mailto:jharwood@nycancer.com)

## MEDICAL LABORATORY TECHNOLOGIST PM SHIFT

Contact: Andrea Kinstler  
[akinstler@nycancer.com](mailto:akinstler@nycancer.com)

## PET/CT SCANNER (Full Time/Part Time/Per Diem)

Contact: Robert Nicoletti  
[rnicoletti@nycancer.com](mailto:rnicoletti@nycancer.com)

## FLOW TECHNICIAN

Contact: Robert Nicoletti  
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## STAFF HEMATOLOGIST/ MEDICAL ONCOLOGIST NEEDED BROOKLYN, NY AT OUR BROOKLYN HOSPITAL LOCATION

Contact: Eric Jackson  
[eric.jackson@oneoncology.com](mailto:eric.jackson@oneoncology.com)

## MEDICAL FRONT DESK RECEPTIONIST (NEW YORK HEALTH)

Contact: Robert Nicoletti  
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## MEDICAL ASSISTANTS (NY HEALTH)

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## LICENSED PRACTICAL NURSES (NY HEALTH)

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## ONCOLOGIST/ HEMATOLOGISTS

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## HEMATOLOGIST/ONCOLOGIST (GREEK SPEAKING)

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## HEALTHCARE ADMINISTRATOR

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## INFUSION LPN

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## BENEFITS ANALYTICS MANAGER

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## CORPORATE CONTROLLER

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## CREDENTIALING SPECIALIST

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## NURSE PRACTITIONER (NP) / PHYSICIAN'S ASSISTANTS (PA)

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## NURSE PRACTITIONER

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## PATHOLOGIST ASSISTANT

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## ULTRASOUND TECHNICIAN

Contact: Dakota Spataro  
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## RADIOLOGY IT ADMINISTRATOR

Contact: Don Crawford  
[dcrawford@nycancer.com](mailto:dcrawford@nycancer.com)

## CLINICAL DEVELOPMENT AND TRAINING SPECIALIST (EASTERN REGION)

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## CLINICAL DEVELOPMENT AND TRAINING SPECIALIST (WESTERN REGION)

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## PATIENT FINANCIAL COUNSELOR

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## CLERICAL DEVELOPMENT AND TRAINING SPECIALIST (Western Region)

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## IMPLEMENTATION TRAINING SPECIALIST (Medical Assistant)

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## BREAST IMAGING RADIOLOGIST

New Hyde Park Medical Oncology  
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NURSE PRACTITIONERS (NP) /

## PHYSICIAN'S ASSISTANTS (PA)

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## LEAD MEDICAL ASSISTANT BABYLON MEDICAL ONCOLOGY

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## PATIENT SCHEDULER NY Imaging - Port Jefferson Station

Contact: Robert Nicoletti  
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## NURSE PRACTITIONERS (NP) / PHYSICIAN'S ASSISTANTS (PA)

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## EXECUTIVE ASSISTANT Port Jefferson Medical Oncology

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## NURSE PRACTITIONERS (NP) / PHYSICIAN'S ASSISTANTS (PA) Lake Grove

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## OFFICE MANAGER NY HEALTH LAWRENCE, NY HEALTH LEXINGTON

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## NURSE PRACTITIONERS (NP) / PHYSICIAN'S ASSISTANTS (PA) Brooklyn

Contact: Robert Nicoletti  
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## ADMINISTRATIVE ASSISTANT New York Cancer Foundation

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## CHIEF FINANCIAL OFFICER

Contact: Robert Nicoletti  
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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](mailto:marketing@nycancer.com).