

#SPECIALIST



Hey ~~Cancer~~! ❤️
I'm taking my wife
back today!... And
I'm not Asking!

Love
You! ❤️

You are
than you
and
LOVE
more th

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It's her last round of chemo, and her husband is taking her home.

A MESSAGE FROM THE CEO

Dear Friends,

March is National Colorectal Cancer Awareness Month!

This time last year, our worlds were interrupted as COVID-19 gripped the country and caused preventative colorectal cancer screening measures to decline. So we're celebrating by getting back on track because screening has the power to save lives.

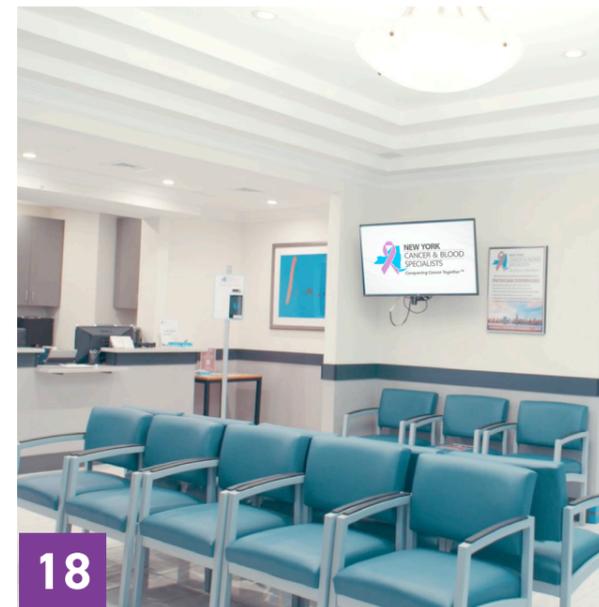
It's also National Nutrition Month; our Registered Dietitian Nutritionists team helps us satisfy our hunger by collecting ideas and recipes to eat healthily without sacrificing flavor.

Lastly, join us in empowering our indomitable women as it's National Women's History Month. We're recognizing the extraordinary achievements of the powerful women of yesterday and today, spotlighting Chief of Pathology and Laboratory Services, Dr. Riem Badr, and our newest addition to the NYCBS family, Chief Research Officer Ruth M. Morgan.

Spring is finally here, and like a sunny day, facing your biggest fears can motivate and bring joy to your life. It certainly has for our patients Christina Piel and Marty Greenstein, whose stories will captivate and inspire you to begin transforming winter's dreams into summer's magic.

Warm regards,

Dr. V



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MARCH IS NATIONAL

COLORECTAL

CANCER AWARENESS MONTH

Colorectal cancer — also known as colon cancer — is the third most common cause of cancer-related death in both men and women in the United States. According to the Centers for Disease Control (CDC), about 140,000 people across the country are diagnosed with colorectal cancer every year.

The colon and rectum are parts of the body's digestive system. The digestive system removes and processes nutrients from foods and helps pass waste material out of the body. The digestive system comprises the mouth, throat, esophagus, stomach, and small and large intestines. The colon (large bowel) is the first part of the large intestine and is about 3-5 feet long. Together, the rectum and anal canal make up the last part of the large intestine and are 6-8 inches long. The anal canal ends at the anus (the large intestine's opening to the outside of the body).

More than one-half of all cases and deaths are potentially preventable and may attribute to modifiable risk factors, such as smoking, an unhealthy diet, high alcohol consumption, physical inactivity, or excess body weight.

Though colorectal cancer can affect anyone, more than **90 percent of people who develop the disease are at least 50 years old. Many people experience no symptoms in the early stages.**

Signs can include a persistent change in bowel habits, blood in the stool, constant bloating, unexplained weight loss, and incomplete emptying of the bowels. Contact your physician to see if you should have a screening if you experience any of these symptoms.

Screening for colon cancer

Colorectal cancer screening tests look for cancer in people without symptoms. Screening should begin at 45-50 years old and continue to 75 years of age. People with a strong family history of colorectal cancer should start screening as early as age 40. Screening can help find and remove precancerous growths or early-stage cancers. Your physician will make personalized recommendations on when you should get colorectal cancer screenings based on factors:

- family history of colorectal cancer
- personal medical history
- prior screening history
- personal preferences
- life expectancy

Why get screened?

Colorectal cancer is a silent disease early on. Extensive studies concluded that a **routine colonoscopy with the removal of polyps might reduce the incidence of colorectal cancer by about 75%.**

In addition to finding and removing polyps, screening can detect asymptomatic cancers resulting in higher cure rates. **Up to 90% of cancers caught early are curable.** Estimates suggest that over 50% of this reduction is due to increased screening efforts. Getting screening may eliminate the need for any treatment, and colonoscopies can help mitigate the risks of developing colorectal cancer.

There are treatments available to help control colon cancer, such as surgery, drug treatment, or radiation therapy but early detection leads to better cure rates and results.

Screening for colorectal cancer includes a standard colonoscopy, stool DNA testing, and a virtual colonoscopy.

The standard colonoscopy — According to The National Cancer Institute, colonoscopies can remove abnormal growths, reducing the death risk from colorectal cancer by 60 to 70 percent. Before the day of screening, patients must complete a colon cleanse. While in the office, patients receive light sedation for a quick and comfortable experience. The doctor uses a colonoscope to examine the entire colon and rectum.

Virtual Colonoscopy (CT colonography) — Uses X-ray equipment and computer technology to create a detailed image. Colon cleansing is required. If there are any findings, then a colonoscopy will be necessary.

Stool DNA test — The stool DNA test looks for precancerous polyps and colorectal cancer. Certain polyps and cancers are not detected, and 13% of the time leads to false positives. Discuss with your doctor if this may be an option for you.

Ultimately, a colonoscopy is the most accurate test for colorectal cancer, proven to detect the disease early and remove precancerous polyps at the same sitting. It's essential to get a colonoscopy to catch precancerous lesions or prevent colon cancer and the need to undergo treatment.

Dr. Sandip Parikh is a board-certified general and colorectal surgeon with extensive experience treating gallbladder disease, hernias, benign and malignant diseases of the colon, rectum, and anus. He performs routine screenings, therapeutic colonoscopies and offers both nonoperative and surgical treatments for hemorrhoids and many other anorectal disorders.

Dr. Parikh has locations in North Massapequa, Bayside, New Hyde Park, Woodhaven, and Jamaica, Queens. To schedule your life-saving screening, please call (718) 732-4033.



COLORECTAL CANCER

Colorectal cancer starts in the colon or the rectum. These cancers can also be called colon cancer or rectal cancer, depending on where they start. Colon cancer and rectal cancer are often grouped together because they have many features in common.

RISK FACTORS

- RACE**
- AGE**
- FAMILY HISTORY**
- LOW-FIBER HIGH FAT DIET**
- SMOKING**
- SEX**
- DIABETES**
- OBESITY**
- ALCOHOL**
- INTESTINAL CONDITIONS**
- SEDENTARY LIFESTYLE**

PREVENTION TIPS

- NO SMOKING**
- BE PHYSICALLY ACTIVE**
- EAT HEALTHY**
- GET SCREENED**

COLORECTAL CANCER IS THE **3RD** LEADING CAUSE OF **CANCER-RELATED DEATHS** IN MEN AND IN WOMEN

THE NUMBERS

147,950

ESTIMATED NEW CASES WILL
BE DIAGNOSED BY 2020

THE LIFETIME RISK OF DEVELOPING **COLORECTAL CANCER** IS ABOUT **1 IN 23** (4.3%) FOR **MEN** **1 IN 25** (4.0%) FOR **WOMEN**

TREATMENT

- TARGETED DRUG THERAPY**
- SURGERY**
- CHEMOTHERAPY**
- IMMUNOTHERAPY**
- RADIATION THERAPY**

PROSTATE

CANCER AND THE IMPORTANCE OF AVOIDING UNDERTREATMENT

In truth, prostate cancer is an umbrella term ascribed to heterogeneous disease states with varying expected prognoses. Over the years, there has been a growing justified recognition and impetus to avoid overtreatment, particularly for those who present with early-stage low grade (i.e., nonaggressive) disease. The goal is the treatment's side effects should not be worse than the disease's expected morbidity. On the other side of the pendulum, more recent research clearly illustrates that undertreatment of prostate cancer can negatively impact survival in many circumstances.

New York Cancer & Blood Specialists' medical oncologist/hematologist, Dr. Jahan Aghalar, discusses the importance of early evaluation with a medical oncologist to conquer the disease. "We can help personalize effective and optimal therapies initially to combat prostate cancer, leading to improvements in long-term outcomes," Dr. Aghalar said.

"In particular for those with metastatic cancer that is still sensitive to traditional hormone therapy (castrate-sensitive prostate cancer), recent research clearly illustrates the life-prolonging benefit of utilizing chemotherapy in addition to hormonal therapy early on. There are also three different novel hormonal agents that have been FDA approved and have been shown to improve survival compared to traditional primary hormonal therapy. Your physician can help you go over these options."

Patients should also inquire about genetic sequencing at the time of their diagnosis. "Approximately 15% of patients with advanced-stage prostate cancer have an important genetic component to their disease affecting the DNA repair mechanisms," Dr. Aghalar continued. "This has significant therapeutic implications as patients who are found to have such defects have an increased chance of significantly benefiting from a class of oral medications named PARP inhibitors."

In addition, more extensive analysis using whole-genome sequencing (WGS)-based classification of tumors may be useful to improve the selection of patients for different targeted therapies via ongoing promising clinical trials at NYCBS. Lastly, genetic sequencing can also uncover crucial hereditary information which would affect future cancer risk to close relatives who may be harboring the same genetic defect."

NUTRITION MONTH

National

By Wendy Kaplan, MS, RDN, CSO, CDN

Every year the Academy of Nutrition & Dietetics puts forth a theme to celebrate the month. This year's theme, "Personalize Your Plate," has special meaning to us. There is no one size fits all approach regarding nutritional needs, especially when it comes to cancer. Our patients are unique with different goals, dietary needs, backgrounds, and taste preferences. Working as oncology dietitians, we see cancer patients strive to do their best every day, and we do our best to help them be their best.

We may suggest adding protein to meet the increased demands better than the body requires while undergoing treatment. It's an important recommendation. We can help you do this!

Sometimes it is necessary to change or tweak flavor profiles or change up key ingredients to accommodate cultural preferences, taste changes from treatment, nutritional needs, etc.

Whether you're looking to include low energy-dense foods in your meal to help you feel full on fewer calories or whether you're looking to up the calories and protein, there's a personalized plate for everyone.

Our team of Registered Dietitian Nutritionists celebrates the month and the beginning of the Spring season with a collection of ideas and recipes to help you to personalize your plate!

A FEW GENERAL TIPS:

Already chopped up/bagged produce eliminates the need for re-washing (triple washed), trimming, chopping, slicing, dicing, and peeling. It also guarantees pieces are the same size and shape. Frozen foods defrost and cook fast, and since you can stock up on them, it decreases trips to the supermarket.



SURVIVAL

TIPS FOR A LONG WORK SHIFT

10-hour shifts can be challenging and can increase physical and mental fatigue. The good news is making some simple changes or tiny tweaks on how you fuel up can go a long way.

Healthy Eating & Snacking Is KEY

Skipping meals and needed snacks will deplete your energy. Making healthy choices will provide you with sustainable energy to work and make it to your next meal or snack.

1 General Snack Tips

- Include a carbohydrate. Your brain needs glucose! It's also good to pair the carbohydrate with protein and healthy fat for more sustainable energy.
- Choose a beneficial carbohydrate. In the tip above, I was not thinking donuts and cookies or a sugary coffee drink as the carb!
- Bring snacks to work. Plan for your shift; keep non-perishables in your locker or drawer or leave a few items in the fridge.
- Aim for somewhere in the range of 200-300 calories for a snack. There are no hard-core rules here but think average ~250 calories.
- Schedule set times for snacks (if possible). I know schedules can vary from day to day, but eating consistently is helpful.
- Don't wait until you're too hungry to eat! It may cause you to gravitate towards unhealthy food and overeat.
- Be aware of what is in your snack. Some foods sound healthy but may be loaded with hidden sugar (ask the RDN at your facility if you're not sure)!

2 Snack Suggestions

- Apple slices, banana, carrots, or celery with peanut or other nut butter. Tear-away single-serve portable pouches are great.
- Greek yogurt or cottage with fruit or nuts.
- Hummus or avocado with veggies or whole wheat chips. Portable snack packs are available and a convenient option.
- Cheese stick with whole-grain Triscuit (or other) crackers.
- Trail mix. Combine nuts, dried fruit, and dry whole-grain cereal.
- Instant oatmeal in individual containers. Keep in mind that some brands/kinds are healthier than others.
- Granola bar (not the candy bar type)!
- 1/2 Sandwich such as turkey & cheese on whole-grain bread, peanut butter & banana on a whole wheat wrap, or tuna fish & guacamole on English muffin. Use the other half for another snack, or have a whole sandwich for lunch!

*Avoid simple sugars, i.e., Skittles, sour candy, etc.

3 What else is important?

HYDRATION! Drink throughout the day! Drink plenty of water or other non-sugar sweetened beverages. FYI - adding a teaspoon of sugar to something such as tea or coffee is fine.

Other: If you don't have a snack, ask the RDN for a protein shake!

Wendy Kaplan, MS, RDN, CSO, CDN

Tofu Tips



Try making baked tofu! You can add tofu to just about anything, soup, salad, grain bowls, or use it as the protein to your meal. It's so versatile and takes on the taste of the flavor's seasoning.

The trick to baked tofu is to drain out as much water as possible! Take the block of tofu out of the package, put it on a cutting board, put a few paper towels on top, and put a plate on top. Check in about 10 minutes, and then repeat this process two more times. Then season to your liking and bake.

Preheat the oven to 375°. Season (*see ideas below) the tofu and let sit for about 10 minutes when using dry spices and 20 minutes with any liquid marinade.

Spray a baking sheet with non-stick cooking spray (or use parchment paper). Put the tofu pieces on it. Cook for ~20 minutes, flip tofu over to make even on both sides, then bake for another 7-10 minutes. Since time can vary depending on the size of the tofu pieces, monitor and adjust for doneness. t

Now that your tofu is ready, you can either cut it into rectangular pieces or square chunks. Here are a few spice combos to try on the tofu before baking. You can tweak any recipe to accommodate ethnic and cultural preferences to eat more healthfully.

Seasoning Suggestions:

Chinese Cuisine

Bean Paste, Chile Oil, Ginger, Green Onions, Hot Red Peppers, Sesame Oil, Sesame Seeds, Soy Sauce

Mexican Cuisine

Bell Peppers, Chiles, Cilantro, Cinnamon, Cocoa, Coriander Seeds, Cumin Seeds, Garlic, Lime, Onions, Oregano, Vanilla

Spanish Cuisine

Almonds, Bell Peppers, Cumin Seeds, Garlic, Olives, Onions, Paprika, Parsley, Saffron

Italian Cuisine

Anchovies, Basil, Bay Leaves, Fennel Seeds, Garlic, Onions, Oregano, Parsley, Pine Nuts, Red Pepper, Rosemary

Indian Cuisine

Black pepper, Cardamom, Chiles, Cumin Seeds, Curry, Fenugreek, Garlic, Mace, Mint, Nutmeg, Red Pepper, Saffron, Turmeric

Greek Cuisine

Cinnamon, Dill, Garlic, Lemon, Mint, Nutmeg, Olives, Oregano

Caribbean Cuisine

Cinnamon, Coriander, Curry, Garlic, Ginger, Lime, Nutmeg, Onions, Oregano, Red Pepper

North African Cuisine

Cilantro, Cinnamon, Coriander, Cumin, Garlic, Ginger, Mint, Red Pepper, Saffron, Turmeric

FUN FACT
Water makes
up 78 to 91%
of tofu's mass.



Michelle Slowey, MA, RDN, CDCES

SWEET & SPICY

SHRIMP



Ingredients:

- 1 cucumber, sliced
- 2 avocados, scoop out and slice
- 1 jicama, julienned
- ½ cup roasted corn
- 1 medium red bell pepper, chopped
- ½ small red onion, chopped
- ¼ cup finely chopped fresh cilantro
- 1½ pound large or jumbo shrimp, grilled
(brush with a light coating of the dressing below)
- 2 Limes

Dressing:

- Juice from 2 limes
- 1 tablespoon honey
- 1 teaspoon lime peel, grated
- 1 clove garlic, minced
- ¼ teaspoon red pepper flakes
- Himalayan salt and cracked black pepper to taste
- ¼ cup avocado oil

FUN FACT
There are over
2,000 species
of shrimps.

Directions:

- 1) Combine the first seven ingredients in a bowl; gently mix. Add the shrimp
- 2) To make the dressing, combine the lime juice, peel, honey, garlic, red pepper flakes, salt, and pepper in a small bowl; mix.
- 3) Add the oil; whisk well to blend the ingredients.
- 4) Pour the dressing over the shrimp vegetable mixture; toss gently to coat the ingredients.
- 5) Cover. Refrigerate for 1 hour to marinate and blend the flavors.

Lauren McGarty, RD, CDN, BS

20 minute

ASIAN SALMON PASTA SALAD



Ingredients:

- 1 bag Sesame Asian Dole chopped salad kit
- 3 cups whole wheat pasta cooked (1.5 cups dry)
- 3 6 oz. salmon filets
- ½ cup brown sugar
- ½ cup low sodium soy sauce
- ¼ cup rice vinegar
- 2 garlic cloves minced
- ¼ tsp pepper
- ½ tsp salt
- ½ tsp sesame oil
- 1 tbsp. cornstarch
- 1 tbsp. water
- Sesame seeds for garnish

Directions:

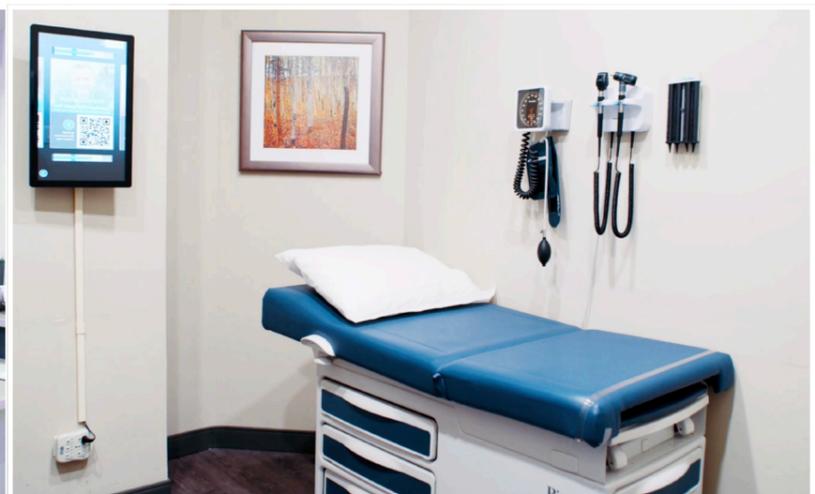
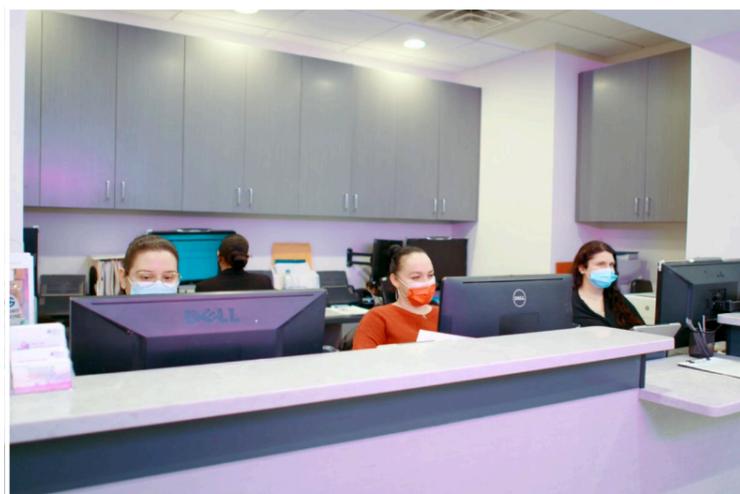
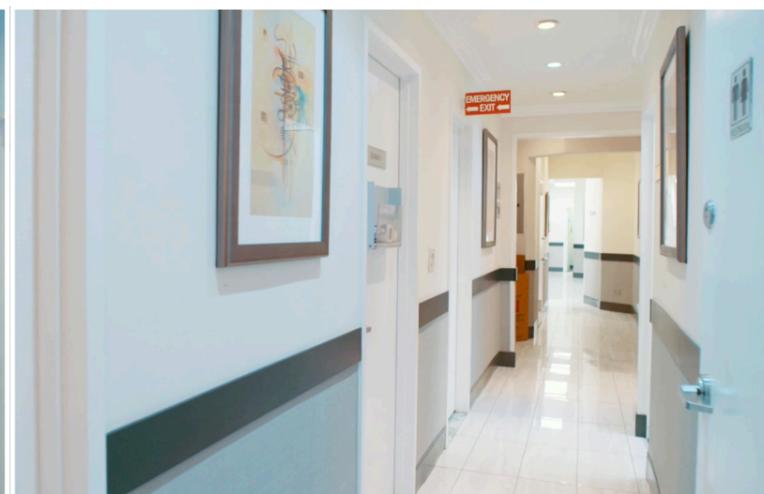
- 1) Fill a large bowl with a chopped salad kit and toppings
- 2) Preheat the oven to 400 degrees. Spray 9x13 inch pan with non-stick cooking spray and set aside
- 3) In a small saucepan, whisk together brown sugar, soy sauce, rice vinegar, garlic, salt, pepper, and sesame oil in a bowl. In a separate bowl, whisk cornstarch and water together. Slowly add cornstarch mixture into a saucepan
- 4) Bring to a boil (about 1-2 minutes) until the mixture thickens. Remove from heat and reserve ¼ cup of the sauce for later
- 5) Place salmon in the pan and pour sauce on top. Cover with aluminum foil and bake for about 15-17 minutes until salmon is opaque.
- 6) While salmon is baking, boil 1.5 cups of whole wheat pasta until al dente. Drain and place in the fridge to cool.
- 7) Once salmon is finished cooking, remove from the oven and brush ¼ cup reserved sauce on top of salmon.
- 8) Combine salmon and pasta with the chopped salad. Top with prepared Asian dressing from the kit and garnish with sesame seeds.



Central Park Hematology & Oncology Renovation

As **NYCBS** continues to grow, so does our efforts to bring not only our equipment into the future, but also the spaces in which we conquer cancer.

From new seating areas adorned with marble flooring, to the ornate architectural details painted in the latest color palette. Not a stone was left unturned, even our exam rooms feature state-of-the-art-equipment and modern art.





The Importance of Collaboration:

By Isaac Hardoon, DO

Our team is now up and running! In just two weeks, we almost doubled the number of patients seen in January. We continue to look forward to growing our team while helping improve our patients' quality of life. We are working very closely with our oncologists to collaborate in real-time to provide symptom relief. Our patients benefit because we help them improve their quality of life. Collaboration in real-time helps reassure the patient that the oncologist, who they trust implicitly, agrees with the plan allowing our team to improve symptoms faster and help patients focus on their journey and treatments. This collaboration also provides same-day add-on services if there is a patient in discomfort that requires immediate attention.

Medical Marijuana Consults Appropriate for Palliative Care

By MaryAnn Fragola, DNP

When we think of sending a patient for Medical Marijuana, it usually is for controlling or managing symptoms. Whether it be appetite stimulation, nausea, insomnia, or pain, it is a bothersome symptom that a patient is experiencing. When we look at the core of palliative care, its focus is on symptom management and supportive care measures that improve a patient's overall quality of life. In approaching this patient, no matter the indication, the palliative care provider does a whole patient assessment.

There are many qualifying indications for the use and certification of Medical Marijuana; cancer is one of them, HIV/AIDS, anorexia, cachexia, arthritis, chronic pain, epilepsy, and PTSD, just to mention some. Its use has also had benefits in insomnia, depression, and anxiety. Marijuana is classified as illegal on a federal level. There are no actual set of rules that determine the exact healthcare conditions under which a patient is eligible for treatment with medical marijuana. Each state has its specific list of qualifying conditions.

Cannabis is an effective and safe option in helping patients cope with malignancy-related symptoms, such as nausea, vomiting, sleep disorders, pain, anxiety, and depression. In a scenario where a provider often prescribes one medication for each symptom, medical marijuana may become a desirable therapeutic option as a comprehensive treatment.

Although utilized in many settings, we attempt to deliver a more personalized approach that looks at the person instead of the disorder. When approaching the subject of a referral to palliative care, patients and families are often hesitant initially. For this indication, palliative care referrals for the consideration of medical marijuana open the gateway to assess side effects and symptoms further. It is an excellent way to bridge that introduction for more expansion on supportive care. With overtime and subsequent visits, we can build on symptom management and improve the overall quality of life.

All of our palliative care team members are certified and available to assist any patient you think can benefit.



Ruth M. Morgan, DC

New York Cancer & Blood Specialists

Announces Ruth M. Morgan, DC as Chief Research Officer



New York Cancer & Blood Specialists (NYCBS), one of the Nation's leading oncology practices, announces Ruth M. Morgan, DC, as Chief Research Officer. In this position, Ruth will oversee all research operations, providing leadership to ensure excellence in research performance and integrity. She will maintain working relationships with both pharmaceutical and biotech companies with a singular goal of advancing cancer care.

Ruth entered the healthcare field over 25 years ago, driven by a passion for making a difference in the lives of people afflicted with life-changing disease processes, which has proven to be a rewarding and fulfilling career in an industry that can positively impact many lives.

"We have our sights set high on advancing a broad range of cutting-edge hematology and oncology studies. I am thrilled that Ruth is bringing her experience and expertise to NYCBS, where she will be an important part of our research advances," said Jeff Vacirca, MD, CEO of NYCBS.

In 1995, Ruth received a Bachelor of Arts in Comparative Literature at the University of British Columbia. She attended the University of Western States, where she obtained a Bachelor of Science in Human Biology and a Doctorate in Chiropractic.

"NYCBS's comprehensive patient-centered approach to treatment and care has made the organization one of the premier cancer treatment agencies in the country, and their research has a legacy of significant accomplishments," Ruth said.

Ruth will work closely with Richard Zuniga, MD, recently named Chief of Research, and collaborate with the network's providers, participants, and industry partners to collect high-quality data and enable innovative research.

New York Cancer & Blood Specialists

Announces Riem Badr, MD, FCAP as
Chief of Pathology and Laboratory Services



New York Cancer & Blood Specialists (NYCBS), one of the Nation's leading oncology practices, has named board-certified hematopathologist Riem Badr, MD, FCAP, the chief of Pathology and Laboratory Services.

Dr. Badr continues to lead the pathology department and Core Medical Laboratory, a division of NYCBS that is at the forefront of improved healthcare and an integral part of patient outcomes. She oversees the lab's administrative and overall operations with an infectious smile and unique perspective.

"My excitement to begin this new chapter is parallel to the level of commitment I have to every person that walks through my door and every patient that places their trust in the NYCBS family," said Dr. Badr.

Dr. Badr earned her M.S, MB, and Ch B Degrees from Alexandria University in Egypt. She completed two Residencies; one in pediatric surgery at Alexandria University Hospital and another in Anatomic and Clinical Pathology at Westchester Medical Center, New York Medical College. After completing her Residency, Dr. Badr set her sights on two more fellowships in Hematopathology and Surgical Pathology at Cedars-Sinai Medical Center, Los Angeles. Previously, Dr. Badr served as the Associate Director of Hematopathology at Inform Diagnostics and as the Director of Hematopathology and Senior Hematopathologist at Genoptix Medical Laboratory.

"Dr. Badr is a renowned hematopathologist who brings a wealth of knowledge and experience to NYCBS's Core Medical Laboratory," said Jeff Vacirca, MD, CEO of New York Cancer & Blood Specialists. "She is an excellent leader who will continue to enhance the quality and efficiency of laboratory services for our patients and physicians by applying the newest science and technologies."

Core Medical Laboratories specializes in providing a wide variety of medical laboratory tests from a single location by combining the latest technologies with the most knowledgeable medical professionals. The lab performs over 1000 different clinical tests, including Flow Cytometry, Molecular, Hematology, Coagulation, Chemistry, Histology, Cytology, Fertility, and Hormone Studies to save patients time and stress. The lab provides innovative, state-of-the-art testing using cutting-edge medical technologies to ensure the quality of the results and provide the most optimum care to patients.



Riem Badr, MD, FCAP

PATIENT STORY

CHRISTINA

By Sarah Gould

“Everybody’s story is different,” says Christina Piel, a 50-year-old Special Education teacher and a patient of New York Cancer & Blood Specialists (NYCBS).

Adapting to COVID-19 wasn’t the only challenge the Longwood School District educator and mother of three had to navigate. Christina was diagnosed with stage 1 breast cancer in September 2020 after a routine mammogram and needle biopsy came back malignant. Fortunately, her doctor caught the disease early, and her prognosis was good.

She describes the meeting with her surgeon at the Fortunato Breast Health Center. In Christina’s case, her surgeon removed the lump and sent her to an oncologist, Dr. Yelda Nouri, at NYCBS. Other people had their opinions on where she should receive treatment. Christina, however, “knew immediately upon meeting Dr. Nouri and the ancillary staff that she was in the right place.”

Christina underwent a lumpectomy and 12 weeks of chemotherapy. “Oddly enough,” she says. “It became my routine; a reason to get out of the house.” For Christina, treatment wasn’t always a breeze. “Mild fatigue, mild nausea, but severe anxiety,” she said of her experience with chemotherapy. “Everyone in the office was so friendly and helpful. The nurses sensed when I was anxious, and their calm demeanors helped me relax.”

She also found comfort in the well-coordinated care, making her treatment feel simple, as well as the numerous services offered to her. Christina was tested for an inherited genetic mutation since her mother had breast cancer years ago. Her results came back negative, putting her at ease.

Ultimately, the most significant reassurance came from her friends and family. Every Tuesday, while she was at treatment, her colleagues and students showed their support by wearing pink t-shirts to school. When she would get home, she’d find a “little something” left by her children. Her neighborhood even rallied together to provide her family with food and gifts, especially around the holidays. “I have an amazing support system,” Christina said.

Her greatest love and support came from her husband, who would always bring her to and from treatment. Today, five months later, thanks to early detection, Christina celebrates her last day of chemotherapy. Standing outside awaiting her exit, he holds a sign with an important message for the disease. “Sorry, Cancer. I’m taking my wife back!”

“Everyone in the office was so friendly and helpful. The nurses sensed when I was anxious, and their calm demeanors helped me relax.”

 **SURVIVOR**
Christina Piel



PATIENT STORY

UNCLE MARTY

By Sarah Gould

Magic fills Marty Greenstein's life— literally. The 83-year-old has worn many hats in his lifetime: New York City taxi driver, restaurateur, events planner, published author, and magician.

Growing up, Marty knew what kind of man he wanted to be; His father set the bar real high, and Marty was determined to fill his shoes. He's led his life in love and laughter, making people happy and helping others have a good time.

In the '70s, Marty bought a taxi medallion and drove a cab in the city. He became the go-to guy for the television station WPIX when they covered stories on cab drivers. One day a guy who cast commercials hailed his cab, and the rest was history. "Every day was a party," Marty said.

"I love doing what I do. I have a fun existence"

His catering business started after opening a restaurant in Smithtown with his wife. He was quickly given the name "Uncle Marty" by a customer's child, and it has stuck ever since. When the restaurant business came to an end, the Greenstein's continued catering and special events under Uncle Marty's name. When their clientele grew more corporate, they renamed their business Event Pros Group, creating events around team-building and organizing parties for as many as 15,000 people.

Although Marty has many tricks up the sleeve, his 25 lb magic jacket isn't the only thing that has weighed him down. In the winter of 2020, Marty was diagnosed with spleen cancer. It wasn't his first encounter with the malicious disease; his family has been affected by various types before. "It's my family curse," he said, holding back tears.

His nephrologist directed him to New York Cancer & Blood Specialists (NYCBS) after a year of watching his blood work levels. "And the beautiful thing was," he said. "They share the same database." Marty finished six rounds of chemotherapy and credits his positive, winning experience to the friendly and caring staff who now call him Uncle Marty. "It's like going to see my family; they're more than just my friends," he said. "I credit them with 49% of my getting well because 51%, of course, goes to Dr. DaCosta." Everybody is so kind. It makes such a difference."

Being a magician, who does magic to bring happiness to others, knows just how much magic there is in a smile. "I'm 83 and a half years old," he laughs. "I've been to many hospitals, and I've seen many doctors, but nobody is like NYCBS." It was a wonderful experience on top of something so tragic."

Marty continues to perform as a strolling magician, especially when he visits the office. "I love doing what I do. I have a fun existence," he said.

Marty has participated in hundreds of events to raise money for cancer. He has sent thank you letters for all of the research and support that goes into the cancer battle to cancer specialists worldwide.

His powerful positivity trickles into his published book, *How to Sell the Brooklyn Bridge... And Other Stuff*. Marty has a lot more to accomplish in his life and believes that time is just an element. "NYCBS's are the real magicians," he said.

The secret to longevity, after all, might just be in the magic of a smile.



SURVIVOR

Marty Greenstein

The Bulletin Board

Virtual Wine Tasting

During the past two months, the New York Cancer Foundation has given out over \$40,000 in financial assistance grants to patients and their families. You can help provide financial relief to patients by supporting our upcoming virtual wine tasting event:

Join us on Friday, March 19th, from 7 pm - 8:30 pm for a virtual wine tasting revealing the "Secrets of the Sommelier" featuring Master Sommelier Sarah Tracey, wine expert Martha Stewart Living and one of the Top 20 Wine Influencers in the US.

This exciting evening will include tastings of 5 different varieties handpicked by Christophe Lhopitault, Wine Merchant at Lakeside Emotions Wine Boutique, and musical performances to benefit patients living with cancer, assisted by the New York Cancer Foundation.

Packages will include a set of five wines and surprise gifts! All reservations must be made under one individual in your party. Please note, packages will contain enough wine for your group size.

Review of The Month

"Dr. Torres is not only a class rated oncologist, he is an extremely caring and compassionate doctor. His patients all LOVE him!" -
Lynn-Marie N.

Upcoming Holiday Events

Good Friday - (April 2)

Easter Sunday - (April 4)

Health Information
Professionals Week - (April 17-24)

Administrative
Professionals Day - (April 21)

Earth Day - (April 22)

Patient Experience Week - (April 26-30)

National Medical Laboratory
Professionals Week - (April 25-30)

World Day for Safety and
Health at Work - (April 28)

Wendy Kaplan

Congrats to Wendy who passed her exam to become a Board Certified Specialists in Oncology Nutrition.

Erica Giuffre Patient Communications Lead

Meet Erica Giuffre. Join us as we congratulate Erica, on her newly appointed role, Patient Communications lead. Erica is both a wonderful person and asset to our growing company. Thank you Erica, for your continued dedication.

Quote of the Month

*The tiger and the lion may be more powerful,
but the **WOLF** doesn't perform in the circus.*

Years of Service with NYCBS

CALCANES, GEORGE N.

23 years

BADALAMENTI, JANET E.

20 years

CARDEN, GEORGI

12 years



Meet Sean Riley, Chief Information Officer

Join us as we congratulate Sean on his newly appointed role, Chief Information Officer. Sean goes above and beyond to drive NYCBS's information systems, solutions, and technology to deliver the best possible care to our patients.

"I'm honored and privileged to work at NYCBS! I'm truly lucky to have leaders and coworkers that help me to achieve exponential growth. I look forward to where we are going and the challenges that come along with it. Thank you for your hard work, and congratulations!!

Employee of the Month



***Congratulations to Melissa Aldahondo
as our Employee of the Month!***

New Hires

February



Abby Wohl (RN)
Adriana Pinto
 (Call Center)
Antonella Lemon-Allison
 (LPN)
Arlene Munoz (Counselor)
Ashley Fleischman (Lab MA)
Bivian Alfaro (Call Center)
Coral Serrano Perez (LPN)
Damon Johnson (Reception)
Dynasia Simmons
 (Call Center)
Ericka Artola (Call Center)
Fatima Candelario (PRN)
Jackie Dilan (Call Center)
Jacqueline Figueroa (LPN)
Janice Eguizabal (LPN)
Jaspreet Kaur (LPN)
Jena Sonadregger (Lab MA)

Jennifer Bocchino
 (Call Center)
Jessica Ellis (Infusion LPN)
Jessica Stewart
 (PRN) CT Technologist
Jonathan Pickelny
 (Laboratory Liaison)
Julia- Marie Estey (Reception)
Katherine Delgado (Lab MA)
Katie O'Brien (LPN)
Katie Rosato
 (MRI Technologist)
Kenneth Washington
 (Call Center)
Kiara-Ann Torres (Lab MA)
Kingston Chen (IT Intern)
Krystal Cole (LPN)
Kyle Coleman (RN)
Lauren Coolbaugh (LPN)

Lindsay Fortunato
 (PET/CT Tech)
Marissa Freeman (Lab MA)
Mary Kate Teresky (Lab MA)
Megan Luchesi (Call Center)
Neida Maldonado (Reception)
Philip White (Call Center)
Rick Leitermann
 (PRN) (MRI Technologist)
Rafal Baczewski
 (Regional Director)
Samantha Maio (Call Center)
Regina Primm (Director)
Shannon Jimenez (Lab MA)
Sumaya Aftab (LPN Manager)
Samantha Boggs (LPN)
Valentina Cubillos (Lab MA)
Vahide Sefuloski
 (Medical Assistant)
Vanessa Rodriguez (Lab MA)

Open Positions



MEDICAL ASSISTANTS
 Contact: Robert Nicoletti
rnicoletti@nycancer.com

CAT SCAN (CT) TECHNOLOGIST
 Port Jefferson Station Medical Oncology
 Contact: Robert Nicoletti
rnicoletti@nycancer.com

LICENSED PRACTICAL NURSES (LPN)
 Contact: Robert Nicoletti
rnicoletti@nycancer.com

MEDICAL FRONT DESK RECEPTIONIST
 Contact: Robert Nicoletti
rnicoletti@nycancer.com

REGISTERED NURSES (BSN/RN's)
 Contact: Julia Harwood
jharwood@nycancer.com

Research Coordinator
 Contact: Robert Nicoletti
rnicoletti@nycancer.com

Medical Laboratory Technologist
 PM Shift
 Patchogue Medical Oncology
 Contact: Andrea Kinstler
akinstler@nycancer.com

PET/CT SCANNER (Full Time/Part Time/Per Diem)
 Contact: Robert Nicoletti
rnicoletti@nycancer.com

Flow Technician
 Port Jefferson Station Medical Oncology
 Contact: Robert Nicoletti
rnicoletti@nycancer.com

Staff Hematologist/Medical Oncologist
 Needed Brooklyn, NY at our Brooklyn Hospital Location
 Contact: Eric Jackson
eric.jackson@oneoncology.com

MEDICAL FRONT DESK RECEPTIONIST (NEW YORK HEALTH)
 Contact: Robert Nicoletti
rnicoletti@nycancer.com

MEDICAL ASSISTANTS (NEW YORK HEALTH)
 Contact: Robert Nicoletti
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LICENSED PRACTICAL NURSES (NEW YORK HEALTH)
 Contact: Robert Nicoletti
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Oncologist/Hematologists
 New Jersey, Manhattan, Brooklyn, Queens, Bronx, Far Rockaway, Long Island
 Contact: Robert Nicoletti
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Hematologist/Oncologist (Greek Speaking)
 Bayside Medical Oncology
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NURSE NAVIGATOR, LPN
 Port Jefferson Medical Oncology
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RESEARCH COORDINATOR, REGISTERED NURSE
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Benefits Analytics Manager
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Corporate Controller
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DEVELOPMENT AND TRAINING SPECIALIST EASTERN / WESTERN REGION
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Credentialing Specialist
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MEDICAL ASSISTANTS Research Department
 Eastchester Cancer Center
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NURSE PRACTITIONER (NP) / PHYSICIAN'S ASSISTANTS (PA)
 Manhasset
 Contact: Robert Nicoletti
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NURSE PRACTITIONER
 Contact: Diana Youngs
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Pathologist Assistant
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Ultrasound Technician
 Contact: Dakota Spataro
dspataro@nyimaging.com

Implementation Specialist
 Contact: Robert Nicoletti
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DEVELOPMENT AND TRAINING SPECIALIST (WESTERN REGION)
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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.