Ranked Among the Best of the Best—Again

U.S. News & World Report ranks St. Francis among Top 10 in the country for Cardiology and Heart Surgery and nationally ranks the Hospital in 7 other specialties: Ear, Nose and Throat; Gastroenterology and GI Surgery; Geriatrics; Neurology and Neurosurgery; Orthopedics; Pulmonology; and Urology
A New Year, a Renewed Commitment to Quality

Last year was a period of great change in healthcare, and even as we spent time and resources managing that change, some things remained the same: for example, the remarkable commitment of our physicians and staff to high quality patient care. The extraordinary number of honors and awards we earned last year underscore this fact:

- For the first time, U.S. News & World Report ranked St. Francis Hospital among the top 10 hospitals in the nation for cardiology & heart surgery. It is the seventh consecutive year that U.S. News has named St. Francis one of the Best Hospitals in America.
- U.S. News also rated St. Francis among the best in the country in seven other adult specialties: ear, nose & throat; gastroenterology & GI surgery; geriatrics; neurology & neurosurgery; orthopedics; pulmonology; and urology – more than any other hospital on Long Island.
- The Hospital was also regionally recognized by U.S. News as high performing in three specialties: cancer; diabetes & endocrinology; and nephrology.
- St. Francis was the top-ranked hospital on Long Island and one of the two best in the New York region for patient satisfaction, according to an objective survey reported on Hospital Compare, a website sponsored by the U.S. Centers for Medicare and Medicaid Services.
- For the fourth consecutive time, The Leapfrog Group rated us one of the top hospitals in the country for patient safety.
- The nurses in our CTICU, MICU 2, and SICU earned the Gold-Level Beacon Award for Excellence from the American Association of Critical-Care Nurses.
- The American Nurses Association honored us with the NDNQI Award for Outstanding Nursing Quality; we were one out of only six hospitals in the U.S. that received the award.
- The DeMatteis Center for Research and Education once again earned the Press Ganey Summit Award for Patient Satisfaction.
- Once again, we received the American Heart Association’s Stroke Gold Plus Award for outstanding stroke care.

We are extremely proud of our physicians and staff for all of these outstanding accomplishments. As we begin a new year, we look forward to serving you with an expanded array of programs and services that includes our new Cancer Institute, our expanded Orthopedics program, our new Bariatric Surgery program, and the St. Francis Open Heart Surgery Program at Good Samaritan Hospital. These new services will exemplify the same high quality and compassionate care you have come to expect at St. Francis.

Thank you for your steadfast support of St. Francis Hospital and for making us your partner for better health.

Best wishes,

Ruth Hennessey
Executive Vice President and Chief Administrative Officer

New studies indicate that getting a flu vaccination can be more advantageous to heart health than previously known.

Receiving a flu vaccination is associated with a lower risk of major adverse cardiovascular events such as heart failure or hospitalization for heart attack, according to Richard A. Shlofmitz, M.D., Chairman of Cardiology at St. Francis Hospital.

“Physicians have long recommended flu vaccines for the obvious merits of avoiding the flu and its accompanying symptoms, yet now we see indications that there are additional, heart health benefits from getting inoculated,” says Dr. Shlofmitz.

Among cardiovascular risk factors, there is a potential association between respiratory tract infections, (of which flu and flu-like illnesses are common causes), and subsequent cardiovascular events. Recent studies have suggested a strong inverse relationship between flu vaccination and the risk of fatal and nonfatal cardiovascular events. In a study of patients with high cardiovascular risk, influenza vaccination was associated with a lower risk of major adverse cardiovascular events within one year. Influenza vaccination was particularly associated with cardiovascular prevention in patients with recent ACS (Acute Coronary Syndrome, a term for situations where the blood supplied to the heart muscle is suddenly blocked, and includes heart attack).

Infectious diseases specialists at St. Francis say the findings should motivate people to get their flu shots before the season goes into full swing. “Previously, avoiding flu symptoms such as body aches, fever, headaches, and fatigue was motivation enough to send segments of the population to get vaccinated,” says Alan Bulbin, M.D., Director of Infectious Diseases. With news of the additional heart health benefits, Dr. Bulbin is anticipating and encouraging those with cardiovascular issues to make their flu vaccination a top priority this flu season.
Heartbeat Moment: Sean Levchuck, M.D., Chairman of Pediatric Cardiology at St. Francis Hospital, receives token of thanks from two Russian girls who received life-saving cardiac procedure.

Two Russian Girls Get the Gift of Life after Their Hearts Are Mended at St. Francis Hospital

Young Patients Are the Beneficiaries of a New, Minimally-Invasive Cardiac Procedure, a First at St. Francis

Katya Lebedeva was born with a hole in her heart from a condition called ventricular septal defect or VSD. Despite undergoing two procedures in Russia, including open heart surgery, doctors in her country were unable to cure her. But after undergoing a new, minimally-invasive procedure being performed at St. Francis Hospital, the third time proved to be the charm. Now, the 15-year-old aspiring ballerina and 10-year-old Anastasia Bakhtiarova, who was born with the same condition, have a new lease on life.

“This technology is a miracle for children who generations ago would have to undergo major surgery,” says Scan Levchuck, M.D., Chairman of Pediatric Cardiology, who recently performed the first two procedures at St. Francis.

“After recuperating at the hospital overnight, they can begin playing outdoors the very next day.”

The condition, which is caused by a hole between the two lower chambers of the heart, is the most common form of congenital heart disease, accounting for 25 percent of all cases. It causes a pressure difference between the right and left chambers, forcing the heart to work harder. If left uncorrected, it can shorten and reduce the quality of life and may eventually lead to heart failure.

Using a catheter-based device, Dr. Levchuck is able to navigate through the arteries and veins and deliver a plug to the space. However, getting to the area of the VSD is more difficult than reaching other holes of the heart, which are typically located in the upper chambers.

The state-of-the-art procedure has been a dream come true for the two girls, who were brought here through Russian Gift of Life USA. The humanitarian organization has sponsored more than 400 children, bringing them to the U.S. and enabling them to receive life-saving cardiac procedures from physicians such as Dr. Levchuck, who, along with St. Francis Hospital, donates all medical services.

The procedure has also been a true blessing for the girls’ mothers, who accompanied them on the trip. Their daughters were not permitted to play sports in their country because of the condition. But things would be a lot different for both girls back at home. Anastasia said she looked forward to finally being able to ski and play volleyball. As for Katya, she couldn’t wait to dance her heart out in ballet class.

U.S. News & World Report Ranks St. Francis One of the Top 10 Hospitals in the Nation for Cardiac Care

St. Francis is also top ranked nationally in seven other adult specialties — more than any other hospital on Long Island

For the seventh year in a row, St. Francis Hospital, The Heart Center® has been recognized by U.S. News & World Report as one of the best hospitals in the nation. St. Francis ranked among the top 10 hospitals in the country for cardiology & heart surgery, ranking #8 nationwide – one of only two hospitals in the NY Metro area to make the top 10 in that specialty. It also rated among the best in the U.S. in seven other specialties: ear, nose & throat, gastroenterology & GI surgery, geriatrics, neurology & neurosurgery, and for the first time orthopedics, pulmonology, and urology.

Once again, St. Francis was the top-ranked hospital on Long Island and the only LI hospital to be nationally ranked by U.S. News in any of the 12 data-driven adult specialties. The Hospital ranked fourth in New York State and fifth in the NY Metro area.

“Congratulations to the physicians, nurses, and staff at St. Francis Hospital for this outstanding achievement,” says Alan D. Guerci, M.D., President & CEO of Catholic Health Services of Long Island (CHS). “To be ranked among the top 10 hospitals in the country for cardiology and heart surgery and to be nationally ranked in seven other specialties is a reaffirmation of our mission of providing excellence in patient care.”

St. Francis was also recognized by U.S. News as high performing regionally in three specialties: cancer, diabetes & endocrinology, and nephrology. Two other CHS hospitals received regional honors as well: Good Samaritan Hospital in West Islip ranked among the top 10 for Long Island and was recognized in cancer, gastroenterology & GI surgery, orthopedics, pulmonology, and urology, and St. Charles Hospital in Port Jefferson ranked high performing in orthopedics. Our Lady of Consolation, West Islip, and St. Catherine of Siena Nursing Home in Smithtown were awarded a place among the Best Nursing Homes in the U.S. in recognition of the five stars both received from the Centers for Medicare & Medicaid Services for overall performance.

According to U.S. News, “only about 15 percent of hospitals are recognized for their high performance as among their region’s best. Just 3 percent of all hospitals earn a national ranking in any specialty.” To see the complete list of top rated hospitals and find out more about how they were chosen, log on to: www.usnews.com/besthospitals.
Catholic Health Services (CHS) has named Alan D. Guerci, M.D., president and chief executive officer (CEO). Dr. Guerci was formerly the executive vice president for CHS and president and CEO of CHS’s St. Francis Hospital, Mercy Medical Center, and St. Joseph Hospital. He succeeds Richard J.J. Sullivan, Jr., who had been serving as the system’s CEO on a voluntary basis, in addition to his ongoing duties as chairman of CHS’s Board of Directors.

“Dr. Guerci brings more than 20 years of service to CHS and has established himself in the Long Island community as a highly respected physician and accomplished health care leader,” said Sullivan. “He is well versed in hospital administration and is focused on Christ’s healing mission and achieving the highest levels of quality with a commitment to excellence and financial stewardship.”

Prior to assuming executive leadership for St. Francis Hospital, The Heart Center®, in 1999 (and Mercy and St. Joseph more recently), Dr. Guerci—a nationally renowned cardiologist—was St. Francis’s executive vice president for medical affairs and director of research. Previously, he served as director of the Coronary Care Unit at The Johns Hopkins Hospital, as well as chairman of the Clinical Trials Review Committee of the Heart, Lung and Blood Institute of the National Institutes of Health.

At St. Francis, Dr. Guerci oversaw the largest expansion project in the hospital’s history, the first phase of which was completed in 2008 with the opening of the 158,000-square-foot Nancy and Frederick DeMatteis Pavilion. In October of 2012, St. Francis’s newly renovated Emergency Department (ED) was unveiled—the region’s first “green” ED, featuring electrically operated privacy glass, high-efficiency light fixtures and other innovations to minimize the facility’s “footprint.”

After graduating from Harvard College, Dr. Guerci earned his medical degree from Cornell University Medical College and a master’s degree in health care management from the Harvard School of Public Health. He completed postgraduate training as an intern, resident and chief resident at the University of California, San Francisco Medical Center, followed by a fellowship in cardiology at The Johns Hopkins Hospital, where he advanced to the rank of associate professor of medicine before joining St. Francis. In addition, he is an associate professor of clinical medicine at the College of Physicians and Surgeons of Columbia University.

Richard Shlofmitz, M.D., Chairman of Cardiology at St. Francis Hospital, was the featured expert in a Daily News column about what could have caused Sopranos star James Gandolfini’s heart to stop. The nationally renowned cardiologist said age and weight were risk factors, but that it was unlikely that the popular actor had a heart attack without previous symptoms.

Dr. Shlofmitz, who was also interviewed by radio sports host Mike Francesa on WFAN, told listeners to be aware of the symptoms such as chest pain on exertion or shortness of breath, and to seek medical attention immediately.

“Here’s the terrible thing,” said Shlofmitz. “Most people who die of a heart attack don’t need to,”
St. Francis is now the only hospital in New York State to hold three gold-level Beacon Awards from the American Association of Critical-Care Nurses (AACN). Its three Critical Care Units (CTICU, MICU2, and SICU) recently received the coveted national award.

The award, which marks a significant milestone on the path to exceptional patient care and a healthy work environment, recognizes unit caregivers who successfully improve patient outcomes and align practices with AACN’s six standards for a healthy work environment. Units that achieve the top-tier, three-year designation meet national criteria consistent with Magnet Recognition, the Malcolm Baldrige National Quality Award, and the National Quality Healthcare Award.

“St. Francis is now the proud recipient of three of the five gold-level Beacon Awards that have been conferred to hospitals in New York State,” says Ann Cella, Senior VP of Patient Care Services and CNO at St. Francis Hospital. “This latest recognition is a testament to the continued excellence we provide in nursing care.”

AACN President Vicki Good, R.N., MSN, CENP, applauds the commitment of the caregivers at the Surgical Intensive Care Unit of St. Francis Hospital for working together to meet and exceed the high standards set forth by the Beacon Award for Excellence.

These dedicated healthcare professionals join other members of the exceptional community of nurses who set the standard for optimal patient care.

“The Beacon Award for Excellence recognizes caregivers in stellar units whose consistent and systematic approach to evidence-based care optimizes patient outcomes. Units that receive this national recognition serve as a role model to others on their journey to excellent patient and family care,” she explained.

St. Francis Rated One of the Safest Hospitals in the Nation

St. Francis Hospital, The Heart Center® was one of seven Long Island Hospitals deemed among “America’s safest” by a consumer watchdog group. The ratings were released by the Niagara Health Quality Coalition in its 10th annual report card.

The nonprofit group used 27 measures of death rates or patient safety—such as deaths from stroke or pneumonia or post operative infections.

It also looked at five measures of patient satisfaction using data from 2011.

In addition to St. Francis, another member of Catholic Health Services of Long Island- St. Catherine of Siena Medical Center- also made the Niagara Health Quality Coalition’s safety list.

To see the complete list log on to: http://www.myhealthfinder.com/newyork13/index.php
For the fourth time, St. Francis Hospital has received an ‘A’ on a national safety score that rates hospitals on the quality of their care. The letter-based rating system was devised by The Leapfrog Group, a nonprofit organization that ranks hospitals nationwide. St. Francis was one of only four hospitals on Long Island to “ace” the test and was joined by one other CHS hospital, St. Catherine of Siena, which also received a grade ‘A’ score.

“Patient safety is always a number one priority for us here at St. Francis and we believe consumers should have easy access to quality information so they can make educated choices about picking the best hospital for their care,” says Jack Soterakis, M.D., SVP of Medical Affairs & Medical Director.

The rankings, which come out every six months, rely on data from Leapfrog’s own ratings as well as outside sources including the Centers for Medicare and Medicaid Services and the Joint Commission. Grades range from “A” to “F” based on 28 safety indicators. More than 2,600 hospitals were surveyed on how well they prevented errors, infections, injuries, and drug mix-ups and once again St. Francis was among the top.

According to Leapfrog, over 400 people die every day from preventable hospital errors. The ratings service says its scores empower patients to make informed decisions about the safety of their hospital care.

To read more about the scores and see how hospitals were rated, you can log on to: http://www.hospitalsafetyscore.org/

St. Francis Earns Gold in Stroke Care Again

St. Francis Hospital has once again earned the American Heart Association/American Stroke Association’s Get With The Guidelines®-Stroke Gold Plus Quality Achievement Award. The award recognizes the hospital’s commitment and success in providing a higher standard of care by ensuring that stroke patients receive treatment according to nationally accepted guidelines. It marks the third year in a row that St. Francis has been recognized with this prestigious, quality achievement award.

To receive the award, St. Francis staff developed and implemented preventive procedures to improve patient care and outcomes. These measures include aggressive use of medications, cholesterol reducing drugs, and smoking cessation, all aimed at reducing death and disability and improving the lives of stroke patients.

According to the American Heart Association/American Stroke Association, stroke is one of the leading causes of death and serious, long-term disability in the United States. On average, someone suffers a stroke every 40 seconds; someone dies of a stroke every four minutes; and 795,000 people suffer a new or recurrent stroke each year.

1st Annual Mid-Level Practitioner Award Ceremony

On October 16th, 2013 the 1st Annual Mid-Level Practitioner (MLP) Award Ceremony was held at the DeMatteis Center. 31 peer nominations were reviewed and categories included Rising Star, Outstanding Preceptor, Special Achievement, Humanitarian, Outstanding Leader, and Outstanding Clinician.

Back row, left to right:
Lawrence Eisenstein, M.D., Nassau County Commissioner of Health
Anthony Celifarco, M.D., President, Medical Staff
Thomas Pappas, M.D., Director, Cardiac Cath Lab
Jack Soterakis, M.D., SVP, Medical Affairs & Medical Director
Evan Sorett, M.D., Director, Critical Care Medicine
Marvin Tenenbaum, M.D., Chairman, Department of Medicine
Newell Robinson, M.D., Chairman, Cardiothoracic & Vascular Surgery
Roy Constantine, Assistant Director, Mid-Level Practitioners

Front row, left to right:
David Berg, PA (awardee)
Novelet Davis, NP (awardee)
Abe Lenderman, PA (awardee)
Sheri Lee, NP (awardee)
Ann Cella, R.N., SVP, Patient Care Services/CNO
Katie Staphos, PA (awardee)
Debra Chalmers, NP (awardee)
Ruth Hennessey, EVP, Chief Administrative Officer
Inset: Cary Stanton, PA, with Newell Robinson, M.D.
A New Generation of Cancer Care at St. Francis

As St. Francis Hospital’s Cancer Institute marks its first anniversary, Bhoomi Mehrotra, M.D., reflects on the previous year and looks ahead to the future.

In the winter of 2012, St. Francis Hospital strengthened and expanded its clinical services by launching the Cancer Institute, with the mission of putting our “heart” into cancer care. Led by distinguished oncologist, Bhoomi Mehrotra, M.D., Director of Oncology and Director of the Institute, along with Dilip Patel, M.D., Director of Malignant Hematology, the Cancer Institute comprises three basic features: an outpatient Infusion Center, an inpatient unit, and a clinical practice area with office and exam space. Bringing together the essential elements for an integrated approach to treating cancer with the Hospital’s signature commitment to excellence and compassionate care, the Institute is already experiencing a significant demand for its services and is eyeing an expansion in the near future.

Heartbeat: What has the last year been like for the Cancer Institute?
Dr. Mehrotra: It’s been an amazing experience for our patients and the entire staff who have come from different backgrounds and have melded together to form the core community of the Cancer Institute at St. Francis. Patients, without exception, have enjoyed personalized, compassionate care, which is the primary intent of our institute, and they have been very vocal about this experience. Many of these individuals have followed Dr. Patel and myself from other institutions. Many have transferred their care from other local or regional institutions and it has been a very gratifying to hear the positive experience they have had here. From the security guard who greets them at the front entrance to the person who greets them at the front desk inside the Institute – these gestures assist in helping our patients put their life back together.

Heartbeat: So it’s a concerted effort by the entire Institute that makes the patient’s experience as comfortable as possible.
Dr. Mehrotra: Yes, whether it’s the nurse navigator, the psychiatrist, the social worker, the interaction with the oncology nurses, the physician assistants, or the nurse practitioners, they all blend their efforts as seamlessly as possible, to make the journey as comfortable as possible. That same sense has been felt in our inpatient service where most of patients are on 2 West. Our nursing staff on that unit has stepped up their oncology knowledge and experience, and it has been a positive experience for these very sick patients. The compassion and care that our nurses are providing is exemplary, and the ability to have immediate backup of critical care services when needed has been a tremendous support. We are small, but we are growing. And there have been some growing pains, but so far, so good.

Heartbeat: What are your goals for the Institute?
Dr. Mehrotra: Our goals are primarily to provide individualized compassionate and state-of-the-art multidisciplinary care for every individual. Along with that, our focus to educate ourselves, our community, and our colleagues, not just regarding the treatment of cancers, but also the screening, the diagnosis, and the follow up surveillance and survivorship issues related to cancer. As our successes in cancer treatments grow, our survivors increase in number and we have to ensure that they are not forgotten and they continue to find support. That way, they can reenter society and be part of an as-close-to-normal lifestyle as they were before a bolt of lightening like cancer struck them.
Institute of the Future

Heartbeat: What type of research is the Cancer Institute currently working on?

Dr. Mehrotra: I’m happy to report that we have just recruited our research coordinator who will be facilitating collaborative clinical trials initiation at our Cancer Institute and we are very optimistic that our team will have cutting edge clinical trials available for our patients right here at our Cancer Institute. Over the next year we are hoping to open several studies across various tumor types that will offer our patients access to high priority national studies with leading-edge new treatment algorithms. In addition, we will be focusing on researching the cardiac effects of oncologic treatment particularly in individuals who have compromised heart functions. Clinical care, education, and research are the three major goals of the Institute.

Heartbeat: How does St. Francis Hospital’s Cancer Institute stand out from other cancer programs?

Dr. Mehrotra: It’s important to highlight the warmth that our patients feel here. It is hard to quantify, but many patients tell us that when they come here, they feel welcome, they feel less anxious, and they feel comfortable. That is not something that one individual or even a physical location alone can provide. It is a feeling they walk away with after multiple interactions with many different caregivers here at the Cancer Institute.

Heartbeat: What does the future look like for the Cancer Institute?

Dr. Mehrotra: We have a growing multidisciplinary program embraced by our hospital-based and community-based colleagues. We hope to eventually incorporate radiation oncology along with our other services under one roof. We are excited about launching our genetic counseling program and hope to have clinical trials access for our patients in the near future. The future is bright!

Celebrating the First Annual Survivor’s Day

Last June, The Cancer Institute at St. Francis Hospital held its first annual Survivors Day event at the DeMatteis Center for Cardiac Research and Education. With a turnout of nearly 100 people and five speakers, topics included breast and prostate cancer and the future of cancer treatment. The occasion brought together patients, caregivers, and professionals to celebrate survivorship. “Survivor’s Day events are held nationwide and we felt it was important to celebrate our survivors,” says Bhoomi Mehrotra, M.D., Director of the Cancer Institute, who was one of the speakers. “It was such a welcoming event and the patients really felt part of the St. Francis community.”

Dilip Patel, M.D., Appointed Director of Malignant Hematology

Dilip Patel, M.D., has been named Director of Malignant Hematology at the Cancer Institute at St. Francis. From 1991 until March 2013, Dr. Patel served as the Medical Director at Long Island Jewish Medical Center Intensive Home Care in Lake Success, New York. He also served as the director of the fellowship program for the Division of Hematology/Oncology at LIJ from 1992 to 2010 and as the chief of the Division of Hematology in the department of pathology at LIJ from 1997 to 2004. Dr. Patel served as an attending hematologist/oncologist at Queens Hospital Center in Jamaica, New York, and also in the Division of Hematology/Oncology department at Long Island Jewish Medical Center (LIJ) in New Hyde Park, New York. He received his medical degree at the Faculty of Science, M.S. University in Baroda, India. He completed residencies in internal medicine at S.S.G. Hospital in Baroda, and at Lincoln Hospital-New York Medical College in New York City before completing his fellowship in hematology/oncology at the University of Connecticut Health Center.
Best of the Best

For the seventh year in a row, St. Francis Hospital, The Heart Center® has been recognized by *U.S. News & World Report* as one of the best hospitals in the nation. This year, the Hospital also rated among the best in eight specialties. We asked the physician leaders from those departments how it feels to be at the head of the class.

**Ranking#**

**Richard Shlofmitz, M.D.**
Chairman of Cardiology

This is the first time any hospital on Long Island has ranked in the top 10 in the United States in any specialty. We didn’t accomplish this with TV and radio ads or large billboards. We did it the old fashioned way, with the best hard working staff in the industry. My thanks to all of them.

**Ranking#**

**Newell Robinson, M.D.**
Chairman, Cardiothoracic and Vascular Surgery

The U.S. News honors and the many other distinctions St. Francis has earned are a testament to the continued excellence we provide in surgical and nursing care. It all begins with the team approach. I am proud to say that our team at St. Francis Hospital is truly exceptional and meets the highest standards in terms of dedication, professionalism, and compassion in caring for our patients on a daily basis.

**Ranking#**

**Gary R. Gecelter, M.D.**
Chairman of Surgery

The ranking in Gastroenterology and GI Surgery is extraordinary recognition for programs that have been built over many years and are only now beginning to demonstrate their excellence in this public way. It is a tribute to the remarkable teamwork among the medical and surgical specialists and especially the nursing staff at St. Francis. I am proud of, and deeply grateful to, the entire staff at the Hospital for their commitment to high quality patient care.

**Ranking#**

**Anthony Celifarco, M.D.**
Director of Gastroenterology

The U.S. News ranking demonstrates how powerful and strong the GI department really is at St. Francis Hospital. We’ve been at the forefront of all the recent technologies including bringing endoscopic ultrasound to the Hospital to support our oncological program. Being ranked 15th in the country makes us number one on Long Island and that speaks for the outstanding knowledge and skills of our gastroenterologists, and of course the outstanding support that we have at the Hospital from the ancillary services, nursing services, and our administration, which is always there to back us.
Ranking#
Richard Perlman, M.D.
Director of Otolaryngology

The otolaryngologists at St. Francis Hospital are highly qualified physicians who are committed to always providing their patients with quality care. It’s nice to once again be nationally recognized by U.S. News in our specialty. We will continue to offer our patients the most efficient and excellent ENT care using the state-of-the-art resources available at St. Francis.

Ranking#
Alan J. Schecter, M.D.
Director, Division of Pulmonary Medicine

The Division of Pulmonary Medicine is very proud of St. Francis Hospital’s national rankings and we take great effort in maintaining the highest quality of service in our department. We have a full-time board certified pulmonologist on the premises 24 hours a day and we utilize a team approach where our certified respiratory therapists and our mid-level practitioners actively participate in the care of all our patients with pulmonary disease.

Ranking#
Felix Badillo, M.D.
Director of Urology

St. Francis Hospital’s Division of Urology always strives to deliver the best urological care to patients. It is an honor to be recognized by U.S. News & World Report as one of the top 50 hospitals nationwide in urology. We are committed to providing our patients with the latest minimally invasive technology and treatments for all urological diseases.

Ranking#
Richard D’Agostino, M.D.
Director of Orthopedic Surgery Division

The St. Francis Hospital Orthopedic Surgery Division is top-ranked in the region with the Hospital for Special Surgery and Hospital for Joint Diseases and this ranking is the result of years of hard work and persistence. A national ranking is a distinction which very few hospitals will ever have. This reflects our commitment to quality, excellent patient care and credentialing only quality physicians. It also demonstrates the continued quality work of our nurses and mid-level practitioners.

Ranking#
Anthony Cohen, M.D.
Director of Neurology

We are elated that the hard work and dedication of not just the physicians but all the staff at St. Francis is being recognized in creating a top ranked program in neurology and neurosurgery. This recognition validates our approach of comprehensive evidence based medicine with the caring human touch that we believe distinguishes St. Francis.

Ranking#
Richard Johnson, M.D.,
Director of Neurosurgery

To achieve this national recognition in neurology and neurosurgery for three consecutive years at St. Francis is due to the exceptional work ethic of the Hospital, its nursing staff, OR team, and surgeons. We’re very proud of this prestigious rating and for once again being ranked by U.S. News as the top hospital in Nassau County and on Long Island in our specialty.

Ranking#
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New Advances in Cardiac Research

St. Francis Plays Pivotal Role in FDA Approval of Innovative Aortic Stenosis Treatment

As the first hospital on Long Island to test a minimally invasive, catheter-based heart device called Medtronic CoreValve, St. Francis helped to generate new findings that led to FDA approval of the device in January for those patients who are considered inoperable or extreme risk for traditional surgical aortic valve replacement. The Hospital has already performed nearly 150 of these procedures on patients with aortic valve stenosis who were too old or ill for open heart surgery. Of that number, 22 cases were part of the extreme risk group that was the focus of the recently released results. The highly anticipated findings of the Medtronic CoreValve U.S. Pivotal Trial showed the life-saving technology was effective. This means that the FDA did not require an external panel for approving the device for extreme risk patients.

“The results indicate what we suspected all along – that this revolutionary device would be a true life-saver for patients who had no choice but to by-pass open heart surgery,” says Newell Robinson, M.D., Chairman of Cardiothoracic and Vascular Surgery. He helped pioneer the procedure at St. Francis with Co-Principal Investigator George Petrossian, M.D., Director of Interventional Cardiovascular Procedures. Dr. Robinson attended the 2013 Transcatheter Cardiovascular Therapeutics (TCT) Conference in San Francisco, where the results where released.

The data showed that patients experienced a significantly lower rate of stroke than expected – one of the complications most concerning physicians because it increases mortality and affects quality of life – after receiving the CoreValve. The risks of death after implantation of CoreValve in the extreme risk group was 25.5% within a year, much lower than expected. The major stroke rate was 2.4 percent at one month, and it remained low over time with a one-year rate of 4.1 percent. The findings also showed that heart failure symptoms improved in most of the patients and major vascular complications were low.

“The fact that nearly three quarters of patients were alive and free of strokes at one year is remarkable, given the complex medical conditions and extreme frailty of the population,” said one investigator at the major medical symposium. “In the recent past, these patients had no good treatment option and a 50 percent chance of death at one year,” according to another researcher.

Known as Transcatheter Aortic Valve Implantation or TAVI, CoreValve takes this leading edge, minimally invasive approach for aortic valve replacement. The procedure channels a catheter containing a prosthetic valve through the femoral artery to reach the heart. Using self-expandable technology, the new valve is deployed inside the diseased aortic valve without open heart surgery or surgical removal of the original valve.

St. Francis continues to participate in the SURTAVI Trial, which is evaluating surgical aortic valve replacements compared to Medtronic CoreValve in patients who are considered to be at intermediate risk for surgery. The study has opened this new treatment modality to a wider range of patients.

In addition, St. Francis is now offering the FDA-approved and commercially available Edwards Sapien TAVI procedure as well. It relies on a device made of steel and cow tissue, instead of the porcine tissue used in CoreValve.

“The technology is amazing,” says Dr. Petrossian. “It is revolutionary and, going forward, will change the treatment of patients.”

For more information on the devices or participating in a study, call (516) 562-6790.
Q. What do the new guidelines recommend?
A. The guidelines give new recommendations as to which patients should be treated with cholesterol medications, specifically statins, and to what intensity they should be treated. They continue to emphasize the importance of lifestyle modification as the key component of health promotion and atherosclerotic cardiovascular risk reduction for all.

Q. How do they differ from previous recommendations?
A. The new guidelines redefine, somewhat, the groups of patients who should be treated and they have eliminated a “goal” LDL (bad cholesterol) in assessing medication effectiveness. They define intensity of treatment in terms of drug doses (statins only) and percent decrease in LDL from baseline levels. The recommendations rely on a risk calculator to determine future risk and this is then used to determine treatment intensity strategies. The risk period is a shorter time frame than the previously used lifetime risk period. Also, patients with other atherosclerotic diseases are now included.

Q. Who do these new guidelines affect the most?
A. The patients who will probably be most affected fall into the 4th category that the guidelines define. We may see more patients qualifying for statins in this group than would have been true before. Also patients over 75 years-old may not be considered candidates for therapy in some cases. The new guidelines also exclude dialysis and some heart failure patients. Lastly, patients may actually see their statin dose increased or decreased with the new guidelines.

Q. What are the new criteria for determining who should get a cholesterol-lowering drug?
A. There are four groups who qualify for treatment:
1. Patients with clinical atherosclerotic cardiovascular disease including blocked heart arteries, angina, stents, heart attack, bypass surgery, stroke, TIA, or peripheral vascular disease, including carotid and lower extremity disease.
2. Patients with an LDL greater than 190.
3. Patients with diabetes age 40 to 70 with LDL 70 to 189 without atherosclerotic disease.
4. Patients without clinical atherosclerotic disease, without diabetes, but with LDL 70 to 189 and a 10 year risk of developing atherosclerotic disease that is greater than 7.5% based on risk calculations.

Q. If I am currently taking a statin, is it possible I might not need one?
A. It is possible, but not likely. The standards of care we have been using for the past 15 to 20 years are in line with the new guidelines, so if you are already on statins, chances are you will still need to be on them with the new criteria. Patients over the age of 75, however, may find themselves in a discussion with their providers over whether to continue on statins based on the new guidelines. Diabetics may see their medication doses changed as well.

Q. Without a specific target level, how do I know if my cholesterol is drifting up?
A. Patients will still have their lipid blood tests checked to guide therapy and safety, but the difference will be that we are looking at the percent decrease from baseline that they have achieved on medicines. This may prove tricky in patients who are already on meds where the “baseline” may not be known.

Q. What do you advise people who have any further questions or concerns?
A. Talk to your health care provider. Every patient’s situation is unique and the decision to take any medication or to continue on medication requires careful assessment and decision making. Guidelines are not meant to be “one size fits all.”
Meet LuEsther T. Mertz

A Lesson for Life

Invest in good people doing good things. For LuEsther T. Mertz, this philosophy guided a lifetime of generous support for causes including human and civil rights, culture, environmental protection and health. And through careful planning, she was able to ensure that this legacy would continue with the LuEsther T. Mertz Charitable Trust, established through her Last Will & Testament.

Just recently, two grants through the Trust provided the opportunity for the good people at St. Francis Hospital to do more “good things.”

Patients and staff at the hospital’s new Cancer Institute are benefiting from a $450,000 grant to expand that program. Named in her honor, The LuEsther T. Mertz Infusion Center offers a private and comfortable setting where patients receiving treatments can depend upon compassionate and high quality care. Also focused on excellence in patient care is the LuEsther T. Mertz Charitable Trust’s grant of $200,000 to fund the Crew Resource Management initiative facilitated through LifeWings Partners LLC at St. Francis Hospital.

This patient safety program is based on lessons learned from the aviation industry. The team training helps to create a culture where administration and staff put safety above all else and expect team members at every level to speak up about safety concerns without fear of retribution. It has been successfully implemented in the operating rooms at St. Francis and will now launch across all clinical departments with the support of this grant.

Why St. Francis?

For LuEsther Mertz, St. Francis Hospital was always an important resource in the community. As an executive at one of the area’s largest employers, she depended upon the hospital not only for her family but for her employees’ well-being.

It was around the same time that her young family had moved to Port Washington in the early 1950s that St. Francis was making headlines with its pioneering approaches to heart surgery and cardiac catheterization.

The Mertz family had decided to establish a small side business to complement her husband’s magazine publishing career. Out of the basement of their home, they developed a direct mail service to magazine publishers. Not long after its launch, Publishers Clearing House began enjoying great success. As the new business flourished, the family was inspired to create a charitable foundation that would allow them to express their generosity in meaningful ways.

The family’s imprint on the community remains, with the company still operating in Port Washington, and LuEsther Mertz’s support making a difference where it matters most.

Meet the Apollos

St. Francis Honors Generous New Donors

Sometimes you don’t have to look far and wide to find a special place or a cause to support. For Anna and Michael Apollo, it only took one tour of St. Francis Hospital for them to recognize that the renowned hospital is truly a local treasure. It also only took one phone call from the Apollos for the Development team at St. Francis to realize just how special Anna and Michael Apollo truly are.

The Apollos, long-time Nassau County residents, were well aware of St. Francis and its reputation as the preeminent local heart center. They also remembered the Hospital where Anna had received excellent and compassionate care nine years earlier. For these reasons, along with their strong commitment to their faith, the Apollos chose to call St. Francis in December 2012 to discuss ideas on what to do with their maturing insurance annuity.

Michael and Anna’s phone call led to a generous donation and more importantly, a very special relationship between the Hospital and the whole Apollo family. That same phone call eventually led Anna and Michael, along with their daughter, Anne-Marie, to visit St. Francis where they were thanked and honored for their generosity.

During their visit to St. Francis, the Apollo family toured the Hospital and was pleased to learn that St. Francis is a leader in more than just cardiac care. Their tour included a visit to the Hospital’s newly established Cancer Institute and the family was particularly impressed with the unit. The Apollos were also delighted to know that patients would now be able to receive exceptional cancer treatment right in their own backyard. As Dr. Bhoomi Mehrotra, Director of Oncology and Director of the Cancer Institute told the Apollos, “Our mission is to put our heart into cancer care.”

Anna and Michael also had the opportunity to meet with Alan D. Guerci, M.D., then President and CEO of St. Francis Hospital, and now the President and CEO of Catholic Health Services of Long Island. Dr. Guerci thanked the Apollos for their recent gift to St. Francis and asked what the hospital had done to deserve their generosity. Anna and Michael explained that they understood how important St. Francis was to the community and that they were particularly eager to support such a prominent, local Catholic institution.

Everyone at the Hospital is grateful that the Apollos have chosen to expand their relationship with St. Francis. Since their initial visit, Anna and Michael have made two more significant donations to the Hospital and have chosen to apply these as one of the leadership gifts that will support the new Cancer Institute.

Most importantly, St. Francis Hospital is grateful that it didn’t have to look far and wide to find such special friends. Supporters like Anna and Michael truly are the heart of St. Francis and the Hospital is grateful for their generosity.

Anna and Michael Apollo pose with their daughter, Anne-Marie Apollo (far right), in front of one of the Hospital’s two major donor walls that bear their names.
Whenever Natasha Talukdar is at the piano, playing Chopin or Bach, time stands still and she loses herself in the stroke of the keys. For the 18-year-old, a similar feeling arises whenever she volunteers at St. Francis Hospital, and she gets a powerful sense of gratification. This is why Natasha, who just left for Binghamton University last September as a double major in biology and piano performance, vows to come back to St. Francis during her college breaks to donate her time.

“I don’t mind coming here during the summer,” says Natasha. “I’ve learned that it’s always better to give back. It’s something good to do.”

Natasha has been volunteering at St. Francis since she was 14 years-old, spending her holiday and summer vacations at the hospital, transporting patients, running errands for staff, helping out in the gift shop, and filing. It was her mother who recommended that she consider donating her time to the Hospital. “My mom had heard great things about the hospital and since she knew that I wanted to go into medicine in college, she thought it would be a good idea for me to volunteer here.”

The junior volunteer admits that she was a little nervous her first few days volunteering at the Hospital. She wasn’t familiar with the setting and did not know where anything was. But after only one week, Natasha knew where all the departments were and after a month or two, she knew the halls inside out. She also discovered the social side of the work.

“St. Francis is not a big hospital so everyone is like family here. I love that,” says Natasha. “I enjoy talking to some of the older volunteers and I’ve made some really good friends here. It’s such a caring place.”

Natasha even met another junior volunteer, Samantha Bangug, at the Hospital who was also Binghampton bound. The two girls decided to become roommates for their freshman year. “I absolutely cannot believe that I met my college roommate here,” Natasha marvels.

Even her 15-year-old brother, Prithviraj, is now a junior volunteer at the Hospital and Natasha is confident that her little sister, although only 7 years-old, will eventually become a St. Francis volunteer. “I’ve recommended St. Francis to a lot of people. High school students usually just want to volunteer somewhere just for the hours,” Natasha says. “Because I’ve come to love St. Francis, I tell my friends to come here to see that it’s not a boring job, or just some place to get hours. At St. Francis you actually do a lot of things that make you feel good about yourself.”

Of course studying and school work will take up a lot of her time, as will the piano (Natasha recently won a competition and played at Carnegie Hall – for many, the dream of a lifetime), but Natasha says she will always have time for St. Francis Hospital. Whether she becomes a doctor or a world-renowned pianist, she will continue to volunteer at the Hospital that has been so good to her. “I can see myself retiring and working full time at St. Francis as volunteer. It’s a long way off, but I can definitely see it.”

Novlet Davis knows the pain of losing a loved one. She suffered the same grief many times over. The St. Francis nurse practitioner lost four siblings who lived in the Clarendon region of Jamaica, West Indies because their conditions went undiagnosed due to a lack of medical care. But recently, Novlet made a trip to her hometown she will never forget. Accompanied by two physicians and a medical team, the majority of whom were from the hospital, she brought life-saving care to residents of Brandon Hill and beyond.

“On our first day of the medical mission we were greeted by patients sitting down patiently waiting for us to just touch them,” she says. “People came from miles away to be seen and were extremely grateful even for a thorough exam.”

Under the supervision of Thomas Pappas, M.D., Director of the Cardiac Catheterization Lab, and Neil Bercow, M.D., a cardiothoracic surgeon, the team which included nurse practitioners, registered nurses, nurses’ aides, a pharmacist, and support staff, screened and treated more than 600 patients. The team worked 12 hours a day to treat all of the patients that showed up to the clinic. They performed over 300 EKGs, and more than 80 echocardiograms and sonograms. Patients with dangerously high blood pressure were referred to a cardiologist in Kingston. Wheelchairs, walkers, and three months supply of medication were provided to patients in need.
This fall, surgeons at St. Francis Hospital began offering bariatric surgery, otherwise known as weight-loss surgery, as an important option for patients facing serious health challenges as a result of a chronic condition known as morbid obesity.

Obesity is a major cause of premature death and many other medical conditions, including diabetes, cardiovascular disease, hypertension, sleep apnea, and degenerative joint disease. For morbidly obese patients (defined as being 100 lbs. or more overweight), who typically have exhausted conventional methods of weight loss, bariatric surgery has proven to be an effective treatment and can be a crucial lifeline.

Shawn M. Garber, M.D., one of the most experienced bariatric surgeons in the region, was recently appointed Director of Bariatric Surgery at St. Francis and performed the first surgery at the Hospital. Other members of Dr. Garber’s group who will be performing surgery at St. Francis include Spencer A. Holover, M.D., Javier Andrade, M.D., John D. Angstadt, M.D., and Eric A. Sommer, M.D. All have extensive training and experience performing bariatric surgery.

“We are pleased to have Dr. Garber and his fellow surgeons join St. Francis Hospital’s top-ranked GI Surgery Program,” said Jack Soterakis, M.D. Senior Vice President of Medical Affairs and Medical Director. “Many of the candidates for bariatric surgery face cardiac, pulmonary, orthopedic and other medical complications and are already a part of our patient population. For appropriate patients, this surgical option gives them new hope for improved quality of life.”

Dr. Garber and his colleagues are highly skilled in performing the safest and most effective weight loss surgery procedures, such as virtually scarless single-incision gastric banding, laparoscopic gastric bypass, and virtually scarless single incision sleeve gastrectomy. They have one of the largest caseloads in the northeast and have been recognized for their accomplishments in the field. They augment their surgical skill with patient education and support.

“We are pleased to be able to offer this new service at St. Francis and to be associated with its reputation for excellence,” said Dr. Garber. “This program is a perfect fit for the Heart Center, because it is another important way for our patients to live longer, healthier lives.”

For more information about obesity and bariatric surgery as a treatment option, call 1-888-HEARTNY or go to www.stopobesityforlife.com.
Most hip replacements in the U.S. are performed using a posterior approach. But this year, Bruce Seideman, M.D., Director of Joint Replacement Surgery at St. Francis Hospital, began using another technique called anterior hip replacement surgery. The procedure, which was first pioneered in Europe, is performed from the front of the body instead of the back, providing quicker recovery times and higher long-term success rates. For patients like Glenda, a Long Island senior citizen who suffered from chronic pain caused by osteoarthritis in her hip, the alternative approach turned out to be a blessing.

According to Glenda, whose story was featured in a New York Times advertorial, by the time she met with Dr. Seideman, she couldn’t walk on one foot. “I couldn’t get out of bed,” she said. “It was very painful.” Since she was in otherwise good health, Dr. Seideman said she was a perfect candidate for hip surgery and decided to take the anterior approach.

Before the procedure is performed, the surgeon and patient choose from a variety of materials; metal on polyethylene, ceramic on polyethylene, or ceramic on ceramic. The most minimally invasive procedures require less of an incision. After the patient receives a spinal or general anesthetic, the procedure usually takes less than two hours - with discharge often depending on a patient’s age.

“Most people in their 50s and 60s go home on the second or third day,” Dr. Seideman says, “while patients in their 70s and 80s typically go to rehab.”

Glenda stayed at St. Francis for three days after receiving the procedure before being discharged to rehab. Just weeks after surgery, she said she already felt better and was down to therapy two days per week and only used a cane as a precaution when she went out. “The entire experience worked out beautifully,” she said.

Dr. Seideman shares her enthusiasm and says St. Francis is committed to turning orthopedics into a stellar service that will continue to grow. “Total hip replacement is one of the most valuable and successful procedures in the history of medicine,” he claims. “It has made a tremendous difference to humanity.”

When Craig Radnay, M.D., joined St. Francis Hospital, with some of his associates from the ISK Orthopedics & Sports Medicine Practice, he brought a vital procedure with him – total ankle replacement. The leading edge surgery offers patients with painful, severe ankle arthritis a new option for getting back on their feet again.

“As orthopedic surgeons, we are seeing an overall increase in activity of people young and old. This, coupled with the rise in aging yet active baby boomers, leaves many patients suffering from painful ankle arthritis,” says Dr. Radnay. “The ankle is a complex joint that takes more wear and tear than the knee or hip, but historical attempts to replace it have not been successful until now – thanks to this innovative technology.”

According to Dr. Radnay, total ankle replacement provides patients who are good candidates for the procedure, an additional option to traditional ankle fusion, which until recently has been the gold standard for the treatment of painful, end-stage ankle arthritis. Herbert Kahl, a 70-year-old retired physical education teacher and baseball coach, can attest to its benefits. “My ankle progressively got worse to the point where I had to walk with a brace,” he says. “But now I can walk five miles a day and go to the gym three times a week. I thought it was great – the best thing I ever had done.”

During the surgery, the surfaces of the ankle joint are replaced with metal, and a thick polyethylene spacer acts as a cushion in between. This allows for smooth, stable motion through the ankle joint. The surgery takes about two hours and patients go home after two days in the hospital. Patients resume unassisted walking after six weeks of surgery.

Dr. Radnay says new ankle replacement technologies enable him to develop prostheses for patients that provide motion and preserve bone, while limiting loosening, wear, and failure. The innovative designs can even allow for computer-generated images to develop patient specific custom implants.

“People who have their ankles replaced are some of my happiest patients,” says Dr. Radnay, who is available for consultations to discuss options and determine if patients are the right candidates for the procedure.
Vital Signs

St. Francis Hospital Extends Its World Class Open Heart Surgery Program to Good Samaritan Hospital

St. Francis Hospital is bringing its nationally renowned cardiothoracic surgery program to another member of the CHS system, Good Samaritan Hospital in West Islip. The medical leadership of the program was recently announced and the surgeons began seeing patients at Cardiothoracic Surgery Associates, located at 1111 Montauk Highway, West Islip on December 1.

Christopher La Mendola, M.D., has been appointed chairman of the Department of Cardiothoracic Surgery and director of the St. Francis Hospital Open Heart Surgery Program at Good Samaritan Hospital. In addition, Maksim Rovensky, D.O., joined the program as an attending cardiothoracic surgeon.

Dr. La Mendola earned his medical degree from Stony Brook University School of Medicine, where he was a member of the Alpha Omega Alpha Honor Medical Society. He completed his residency in general surgery and fellowship in thoracic surgery at New York University School of Medicine and in 1994 joined the Department of Cardiothoracic and Vascular Surgery at St. Francis Hospital, The Heart Center®. He is a fellow of the American College of Surgeons and the American College of Cardiology. La Mendola is also a member of the Society of Thoracic Surgeons, the New York Society for Thoracic Surgery and the Medical Society of the State of New York. He helped pioneer off-pump coronary bypass surgery and minimally invasive valve surgery and has been recognized by New York magazine as one of the Best Doctors, by the Consumers’ Research Council of America as one of the nation's Top Surgeons, by Newsday as one of Long Island's Top Doctors and by Castle Connolly as one of the New York Metro Area's Top Doctors. He resides in Lloyd Harbor.

Dr. Rovensky served as a clinical associate in the Department of Thoracic and Cardiovascular Surgery at the Cleveland Clinic Foundation. He earned his medical degree at the New York College of Osteopathic Medicine in Old Westbury. He completed his surgical residency at Maimonides Medical Center, Clinical Affiliate of Mount Sinai School of Medicine, in Brooklyn, where he served as a chief resident. He also completed a fellowship at Montefiore Medical Center, Albert Einstein College of Medicine, in the Bronx. He resides in Massapequa.

St. Francis Participates in Clinical Trial Eyeing Dissolving Coronary Stents

Richard Shlofmitz, M.D., Chairman of Cardiology at St. Francis Hospital®, appeared in a Newsday article about a new clinical trial to determine if a coronary stent that slowly dissolves into a coronary artery can effectively protect the heart and enhance the free flow of blood.

St. Francis is one of four hospitals on Long Island that will be participating in the major nationwide study of a new stent that completely dissolves within about two years after implantation.

Dr. Shlofmitz says he is cautiously optimistic about the future of biodegradable stents. “The concept is very innovative,” he said. where it matters most.
Staff News

Frank R. DiMaio, M.D., has joined the Department of Orthopedic Surgery at St. Francis Hospital. He’s been an active member of Long Island’s orthopedic surgical community since 1994. He comes to St. Francis Hospital, The Heart Center® after serving as Chief of Adult Joint Reconstruction at North Shore-Long Island Jewish Health System since 2008. His prior positions include Chairman of the Department of Orthopaedic Surgery and Chief of Adult Joint Reconstruction at Winthrop University Hospital, as well as site Residency Program Director and Associate Clinical Professor within the SUNY Stony Brook Orthopaedic Department. He currently holds an associate professor position at the Hofstra-NSLU School of Medicine. Dr. DiMaio’s office is in Garden City, NY.

Salvatore Trazzera, M.D., FACC, has joined St. Francis Hospital’s Department of Cardiology and will also serve as Associate Director of Cardiology at St. Joseph’s Hospital. He is the medical director of Farmingdale Cardiovascular Services in Farmingdale, NY. Dr. Trazzera has previously held positions as the Director of the Echocardiography Laboratory and Associate Director of Huntington Hospital’s Women’s Heart Program in Huntington, NY. He is one of a handful of physicians in the New York Metropolitan area earning the distinct title “Fellow Society of Cardiovascular Computed Tomography.” Dr. Trazzera trained at the University of Pittsburgh’s Concussion Management Program and specializes in the management of sports related mild traumatic brain injury.

The Cardiothoracic Surgery Group, which includes Newell Robinson, M.D., Chairman, Cardiovascular Surgery Service at Catholic Health Services of Long Island and Chairman of Cardiothoracic and Vascular Surgery at St. Francis Hospital; Christopher L. La Mendola, M.D., Director, Thoracic Surgery, St. Francis Hospital; and Neil Berelowitz, M.D., welcomes Edward Lundy, M.D., (inset), and Maksim Rovensky, D.O., to their practice. Dr. Lundy is the former Chief of the Active International Cardiovascular Institute at Good Samaritan Hospital in Suffern, NY. He was also chief of the section of Cardiac Surgery and Director of the Cardiovascular Intensive Care Unit. During his seven years at Good Samaritan Hospital, he and his program were awarded 11 five star Health Grade Ratings and two Health Grade Awards for his surgical results. Dr. Rovensky is an attending cardiothoracic surgeon in the St. Francis Hospital Open Heart Surgery Program at Good Samaritan Hospital (see related item page 18).

We are proud to announce that Cardiology & Internal Medicine Associates has joined the St. Francis family. The physicians: Howard L. Sacher, D.O., Stuart W. Landau, M.D., Roger S. Kersten, D.O., Seth Eisen, M.D., Thomas Joseph, D.O., David Goldstein, D.O., Greg Blais, M.D., Paul Ricca, D.O., Hillary Diamond, M.D., Joseph Colucci, M.D., Pushpaben Parikh, M.D., Luis Alejo, M.D., and Mandy Sachar, D.O. They have been longtime outstanding providers of primary care and cardiac services in the Hicksville area.

Ari Ezraty, M.D., Edward Oruci, M.D., and Kaupin J. Brahmbhatt, M.D., are now part of St. Francis Cardiovascular Physicians’ P.C. Dr. Ezraty served as an associate physician in the cardiology at Brigham and Women’s Hospital in Boston before coming to St. Francis in 1994 as an attending cardiologist. Dr. Ezraty’s publications have appeared in Biochemistry, Blood, and Journal of Cardiovascular Pharmacology. Dr. Oruci has been an attending physician at St. Francis Hospital since 1992, and part of the hospital’s Interventional Cardiovascular Associates and Long Island Interventional Cardiology practices before joining St. Francis Cardiovascular Physicians’ P.C. Dr. Brahmbhatt served as a fellow in cardiovascular disease at Maimonides Medical Center in Brooklyn, NY, before joining St. Francis Hospital’s Interventional Cardiovascular Associates practice in 2005.

Rockville Centre Cardiovascular Associates physicians Qamar Zaman, M.D., and Thierry Duchatellier, M.D., Section Chief of Cardiology at Mercy Medical Center, have joined St. Francis Cardiovascular Physicians, P.C. Before joining St. Francis, Dr. Zaman was the Director of Medical Education at Mercy Medical Center in Rockville Centre, NY. Prior to that, he served as Chief, Section of Cardiology, Mercy Medical Center, and is currently an attending physician at Mercy and St. Francis Hospital. Dr. Duchatellier is currently part of Associated Cardiology Consultants P.C., in Richmond Hill, NY, and Cardiology Consultants of Long Island P.C., in Rockville Center. His hospital affiliations have included South Nassau Medical Center in Oceanside, NY; Franklin General Hospital in Valley Stream, N.Y.; and Jamaica Hospital, in Jamaica, NY.

To contact any of the physicians or surgeons mentioned in this publication, please call 1-888-HEARTNY (432-7869).

Andrew E. Lituchy, M.D., FACC, has joined St. Francis Cardiovascular Physician’s P.C., Consultative and Interventional Cardiology. Dr. Lituchy has been at St. Francis since 1996 as an assistant attending physician and as part of the Hospital’s New York Cardiology Group and the Interventional Cardiovascular Associates practices, before opening his private practice at the Hospital in 2002. Prior to joining St. Francis, he served as an attending cardiologist at South Nassau Communities Hospital in Oceanside, NY, and at NY Hospital Medical Center-Queens in Flushing, NY. Dr. Lituchy also served as an assistant clinical professor of medicine at New York Hospital: Cornell University College of Medicine.

Arun Gupta, M.D., and Neelam Gupta, M.D., of Gupta Medical Practice have recently joined the St. Francis community. They have had their private practice since 1991. Arun has previously held a hospital affiliation with Long Island Jewish Medical Center and South Nassau Communities Hospital. He also served as a cardiology consultant for HMO Queens Long Island Medical Group in Hicksville, NY. Neelam served as a consultant in gastrointestinal diseases for Queens Long Island Medical Group and also for Gurwin Jewish Nursing and Rehabilitation Center in Commack, NY. She has had hospital affiliations with Long Island Jewish Medical Center, South Nassau Communities Hospital, and Mt. Sinai Hospital in Manhattan.

Felix I. Oviasu, M.D., and Mohammed Muneeruddin, M.D., of Garden City Heart Center, have joined St. Francis Hospital’s cardiology department. Dr. Oviasu is a Diplomate of the American Board of Internal Medicine, Cardiovascular Diseases. He graduated with distinction from the College of Medicine at University of Lagos in 1978 and attended the College on a full academic scholarship. Following his graduation and a brief stint of practice and internship in Nigeria, Dr. Oviasu arrived in the U.S. in 1980 with the sole purpose of furthering his training in medicine with specialty in cardiovascular diseases, and went into private practice in 1988. Dr. Muneeruddin is a Diplomate of the American Board of Internal Medicine. Dr. Muneeruddin is also a member of the American College of Physicians and the American College of Cardiology. The practice has an office in Garden City and a secondary office in Lynbrook.

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Where there’s a Will, there’s a way!

Please consider including St. Francis Hospital in your will. It is:

**Simple.** Just a few sentences in your will or trust are all that is needed.

**Flexible.** You can change the gift at any time.

**Helpful.** You may be entitled to an estate tax deduction.

For further information please contact our Director of Planned Giving Meryl Cosentino at (516) 705-6652 or meryl.consentino@chsli.org