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2021 | VOL. 33

HealthCare

QUARTERLY

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THEIR PEERS
AND READERS

WHAT IT WILL
TAKE TO KEEP
STUDENT DOCTORS
IN LAS VEGAS

Dr. Atousa Ghaneian,
pediatrician with Healthy
Kids Care at Sunrise
and recipient of the
Reader's Choice Patient
Experience award.

TOP DOCTORS

*A list of exceptional
physicians in the Valley*

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Congratulations



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*Geriatrics at Touro Health Center
Assistant Professor, Specialty Medicine Department
Touro University Nevada - College of Osteopathic Medicine*

Dr. Kenneth Grant

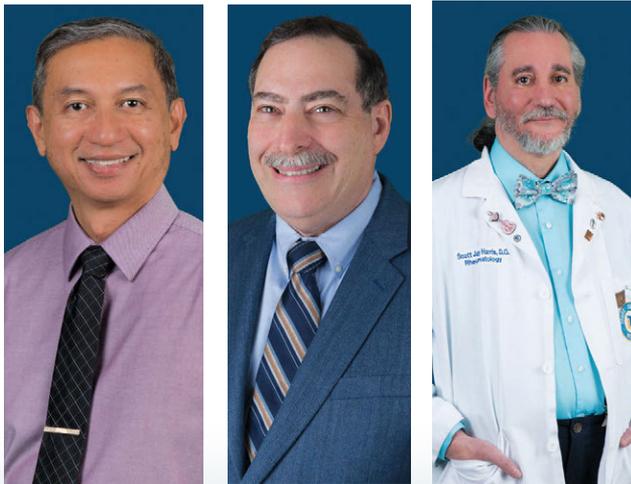
*Rheumatology at Touro Health Center
Professor, Specialty Medicine Department
Touro University Nevada - College of Osteopathic Medicine*

Dr. Scott Harris

*Rheumatology at Touro Health Center
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For being recognized among Southern Nevada's

2021 Top Doctors



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Publisher MARK DE POOTER (mark.depooter@gmgvegas.com)
Associate Publisher KATIE DIXON (katie.dixon@gmgvegas.com)

EDITORIAL + ART

Special Publications Manager & Editor JENNIFER INABA
Managing Editor/News DAVE MONDT
Copy Editor WADE MCAFERTY
Staff Writers HILLARY DAVIS, CASEY HARRISON, BRYAN HORWATH, ARLEIGH RODGERS, RICARDO TORRES-CORTEZ
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Staff Photographers CHRISTOPHER DEVARGAS, STEVE MARCUS, WADE VANDERVORT

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VEGAS INC

2275 CORPORATE CIRCLE, SUITE 300
HENDERSON, NEVADA 89074 | 702.990.2550

From the editor

Welcome to our 11th annual Top Doctors issue! Each year, we survey Clark County doctors on who they would recommend in several medical specialties. As a trusted source when we need a referral to another physician or specialty, they offer an insider view of those doctors leading the way in medicine. These are the doctors who doctors go to.

We also invited the public to nominate doctors in our special Reader's Choice category, including a new award for Patient Experience. On the cover, you see one of our Patient Experience honorees, Dr. Atousa Ghaneian, of Healthy Kids Care at Sunrise, who has some of the pickiest patients of all—kids. As a mother, I can attest to the value of finding a great pediatrician that makes your child(ren) comfortable. Congratulations to Dr. Ghaneian and all of our 2021 Top Doctors honorees!

Thank you to our sponsors, Comprehensive Cancer Centers and Roseman University of Health Sciences, for supporting this special Top Doctors publication and helping us recognize the wealth of medical talent in Southern Nevada.

Not only will this issue introduce you to nearly 200 of the Valley's top doctors, you'll also find captivating content from several local health experts.

Dr. John Brosious, a plastic surgeon and professor at the Kirk Kerkorian School of Medicine at UNLV, and founder and director of the Gender Surgery Program, shares the critical need to break down barriers to gender-affirming care. His experience and work with members of the gender expansive community reinforce how imperative it is for the health care industry to provide equal and accessible care to all.

Eye health is often neglected, but we can learn a lot about our overall health condition through our eyes. Meadows Eye Physicians & Surgeons discusses the connection between diabetes and our eyes.

We also hear from the Cleveland Clinic Lou Ruvo

Center for Brain Health on its efforts to diversify participation in brain disease clinical research. And Dr. Gabriela Gregory with the Nevada Neurosciences Institute reveals a new drug that was recently approved for Alzheimer's treatment.

Touro University explains the importance of advancing medical education in Southern Nevada. With approximately 70% of physicians practicing where they complete their graduate medical educations, it's an apt reminder that we need to train—and retain—top talent for our community.

Our look into education continues with UNLV School of Nursing with a discussion on psychopharmacology—the study of using medications to treat mental disorders. It's a focal point of the nursing school's new Psychiatric Mental Health Nurse Practitioner program, which focuses on evidence-based and holistic approaches to psychiatric mental health assessment and treatment.

Finally, fresh off the Tokyo Summer Olympic Games, Special Olympics Nevada tells us about creating inclusive opportunities for people with intellectual disabilities through the transformative power of sport. The organization also calls attention to inequities in our health care system and shares how, through its Healthy Athletes initiative, it is improving the quality of life for its athletes and underserved communities in Nevada.

I hope you enjoy reading the many stories of our local health care community and meeting the Valley's Top Doctors. This is an issue you'll want to hang on to!



Jennifer Inaba

Special Publications Manager & Editor
jennifer.inaba@gmgvegas.com



From the sponsor

Health care professionals continue to be in the spotlight as our communities tirelessly navigate the COVID-19 pandemic.

For more than a year, they have demonstrated an unwavering commitment to providing compassionate care during challenging times.

We applaud the thousands of doctors and other health care professionals serving in our community and recognize those who stand out for their long-standing dedication, innovation or selflessness to improve the quality of life of Nevadans, especially during these challenging times.

Each year Greenspun Media Group's *Health Care Quarterly* honors and celebrates the Top Doctors who have gone above and beyond to promote a healthy Nevada.

As an institution whose mission is to advance the health and wellness of the communities we serve by educating current and future generations of health professionals, conducting research and providing patient care, Roseman University of Health Sciences is proud to

sponsor such an amazing program.

Through the creation of our College of Medicine, Roseman University aims to change the future of health care by looking beyond hospitals and office visits and creating a medi-

cal curriculum that delivers wellness at the street level, in neighborhoods, and most importantly, in individual households. As Roseman University continues to build the College of Medicine, we aim to contribute to improving the health care infrastructure in Nevada and look forward to contributing to our future physicians.

We extend our congratulations to all the 2021 honorees for their extraordinary achievements.



A handwritten signature in black ink that reads "Renee E. Coffman".

Dr. Renee Coffman
President & Co-Founder
Roseman University of Health Sciences

ROSEMAN UNIVERSITY
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“We applaud the thousands of doctors and other health care professionals serving in our community and recognize those who stand out for their long-standing dedication, innovation or selflessness to improve the quality of life of Nevadans, especially during these challenging times.”



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From the sponsor

Comprehensive Cancer Centers would like to congratulate the 2021 Top Doctors honorees, including nine providers from our practice.

We are proud to support the health care community and recognize outstanding medical professionals by sponsoring this program for nine years strong.

For more than 40 years, the physicians at Comprehensive have been dedicated to providing the best and most compassionate care possible through medical oncology, hematology, radiation oncology, breast surgery, pulmonary services, cancer genetic counseling and clinical research.

Over the years, we have grown with the community and we take pride in being able to offer our patients the latest in cancer treatment and clinical research. Through our extensive research program, we participate in more than 170 clinical research studies each year and have played a role in developing more than 100 FDA-approved cancer therapies. We partner with prestigious institutions such as UCLA TRIO-US, The US Oncology Network, USC, Memorial Sloan Kettering Cancer Center and leading pharmaceutical companies to bring groundbreaking treatments close to home, some of which are not available anywhere else in the world.

In the last year alone, Comprehensive was the

first location in the world to open six new groundbreaking clinical trials, enrolling the first patients in the world on novel treatments.

We are always looking for new ways to enhance the patient experience and provide them with the best possible outcomes. We do so by recruiting the best providers, investing in the latest technologies and offering the best in cancer treatments and research, so there is no reason to leave the state for care. We are excited to see the strength of our medical community through the recognition of these Top Doctors, who also share in our same mission of putting the patient first.

To all the Top Doctors, congratulations on your remarkable contributions.



Sincerely,

A handwritten signature in blue ink that reads "Jon Bilstein". The signature is fluid and cursive.

Jon Bilstein
Chief Executive Officer
Comprehensive Cancer Centers



“We are excited to see the strength of our medical community through the recognition of these Top Doctors, who also share in our same mission of putting the patient first.”



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Medical News

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Dr. Arthur Oliver Romero, UNLV Medicine at UMC interventional pulmonologist, demonstrates the Ion robotic lung biopsy system at UMC.



UMC, UNLV Medicine introduce revolutionary robotic lung biopsy system

UMC, in partnership with UNLV Medicine, has become the first and only hospital in the state to introduce the groundbreaking Ion system, a robotic-assisted platform for minimally invasive lung biopsy procedures.

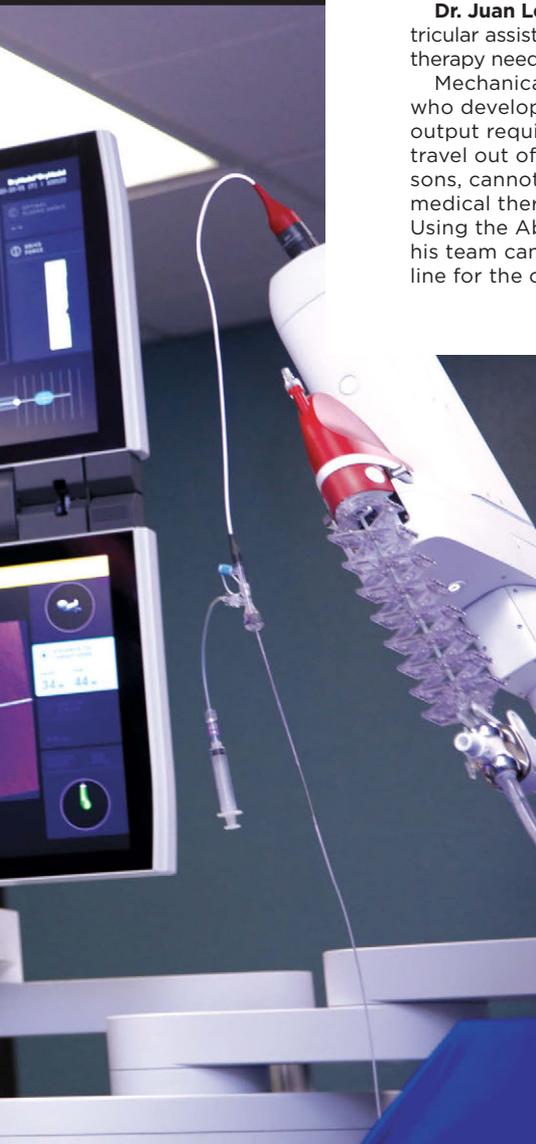
Providing new levels of precision, reach and stability when compared to manual biopsy techniques, the Ion system helps address a challenging aspect of lung biopsies by allowing physicians to obtain tissue samples from deep within the lung to help detect cancer. While it can be difficult to diagnose early-stage lung cancer, the Ion system may help physicians obtain tissue samples to facilitate an early diagnosis.

For more information about the Ion platform and UMC's Lung Cancer Screening Program, community members can call UMC's Oncology team at 702-667-7687.

CONGENITAL HEART SURGEON STARTS FIRST VENTRICULAR ASSIST DEVICE PROGRAM IN NEVADA

Dr. Juan Lehoux of Children's Heart Center Nevada has started the first left ventricular assist device (LVAD) program in the state to meet the advanced heart failure therapy needs of the community at Sunrise Hospital and Medical Center.

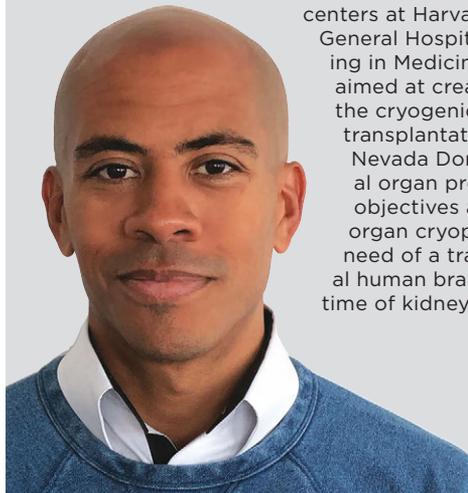
Mechanical circulatory support has become the standard of care for patients who develop advanced heart failure in which the heart can no longer meet its output requirement. Until recently, patients that required LVAD therapy had to travel out of state. Many patients, for a variety of economic and social reasons, cannot relocate for treatment, relegating them to continued, ineffective medical therapy that results in lower quality of life and a shortened lifespan. Using the Abbott Heartmate 3 left ventricular assist device, Lehoux and his team can now treat these patients, providing a much-needed lifeline for the community.



LOCAL INNOVATOR CO-LEADING CHARGE ON HUMAN ORGAN BANKING

Sebastian Giwa, Ph.D., has partnered with Jedd Lewis and the Organ Preservation Alliance to launch the Biostasis Research Institute. The institute will fund two new research centers at Harvard-affiliated Massachusetts

General Hospital and the Institute of Engineering in Medicine at the University of Minnesota, aimed at creating human organ banks through the cryogenic storage of organs donated for transplantation. Funding for BRI comes from Nevada Donor Network and four additional organ procurement organizations. BRI's objectives are to accomplish the first human organ cryopreservation to save children in need of a transplant; create the first functional human brain banks; and extend the storage time of kidney transplants from days to weeks.



ORTHOPEDIC SURGEON INTRODUCES NEW PRODUCT FOR PAIN FREE TOTAL KNEE REPLACEMENTS

Orthopedic surgeon **Dr. Ronald Hillock**, of Nevada Orthopedic & Spine Center, now offers Iovera treatments for patients undergoing total knee replacement. Iovera is a preoperative treatment that can reduce post-operative pain, or even eliminate pain all together. "By freezing the branches of the saphenous nerve of the operative leg, we can now dramatically reduce the pain following knee replacement. Improved outcomes are my goal," said Hillock. One of the biggest issues in total knee replacements is pain control after surgery — this new product can allow pain to be blocked for up to 90 days.





Understanding the evolution of silicone breast implant safety

BY JOSHUA J. GOLDMAN, MD



Dr. Joshua J. Goldman is a plastic and reconstructive microsurgeon and an assistant professor of surgery at the Kirk Kerkorian School of Medicine at UNLV in the department of plastic surgery.

In 1992, the FDA issued a moratorium on the use of silicone implants in cosmetic surgery. That ban was lifted 14 years later, after several studies, some of the largest ever undertaken in humans, failed to show a correlation between silicone implants and the health conditions of concern. We know that implants are not lifetime devices and they have mechanical issues (the possibility of rupturing, or now with highly cohesive gels fracturing) and cause deforming and sometimes painful scarring, termed capsular contracture.

Textured implants are also related to a rare cancer, Breast Implant Associated-Anaplastic Large Cell Lymphoma (BIA-ALCL), but, despite shock-and-awe headlines, the risk, in the highest category of textured implants, is around 1 in 3,000, the same as your lifetime risk of being struck by lightning. That risk (BIA-ALCL, not lightning) can be totally mitigated by using smooth, rather than textured, implants.

Another concern is the existence of Breast Implant Illness (BII) or Syndrome (BIS), a constellation of connective tissue disorders, reproductive concerns, rheumatologic disease and general symptoms lumped together in a broad category. Though hotly contested in the literature, mounting anecdotal evidence coupled with the sensical physiologic possibility that a subclinical, chronic immune response significant enough to cause lymphoma might cause a different chronic immune state, makes BII a risk that clearly warrants continued study and, in my opinion and practice, inclusion in informed consent to patients seeking implant-based surgery.

The FDA recently recognized these worries with a carefully worded black box warning: “Symptoms such as fatigue, memory loss, rash, “brain fog” and joint pain may be associated

with breast implants. Some patients may use the term “breast implant illness” to describe these symptoms. Researchers are investigating these symptoms to better understand their origins. These symptoms and what causes them are poorly understood. In some cases, removal of the breast implants without replacement is reported to reverse symptoms of Breast Implant Illness.

There are few, if any, devices that have been as scrutinized as silicone implants in overall safety, risk of causing or obscuring cancer detection, and systemic illness correlations. My focus is on evidence-based medicine but no study is flawless, and there are many moving parts (confounding factors) when it comes to implant data analysis, especially with regard to Breast Implant Illness.

So, are silicone breast implants safe? “Safe” is a relative term. But yes, overwhelmingly, the data confirms silicone implants are generally safe. Still, are there risks related to implants in addition to the general risks of surgery? Absolutely, as with most things, and we need to better understand them in order to provide optimal care and informed decision-making to our patients.

It is difficult to apply a blanket classification of “safe” to a broad class of prostheses that come with rare and still generally poorly understood risks. Silicone implants are a powerful tool for achieving both reconstructive and aesthetic surgery goals, but under no circumstances should patient concerns regarding their implants be ignored. If you have questions about implants, implant and capsule removal, and options for cosmetic reconstruction after removal, visit a board-certified plastic and reconstructive surgeon to discuss. Specific to breast restoration after mastectomy for breast cancer, if you are interested in options for reconstruction without implants, visit a fellowship-trained reconstructive microsurgeon who offers those specialized services.

Nevada's housing crisis is a health crisis

BY JEFFREY A. MURAWSKY, MD, FACP

After this past year, it is estimated that most Americans spent about 90% of their time indoors, and an estimated two-thirds of that time was spent in their home. According to a 2021 Home Attainability study by the Urban Land Institute, the Las Vegas and Reno metropolitan areas are in the top 25 of the least affordable places to live in the country, making it difficult for individuals and families to obtain safe, healthy homes.

Housing and Health

Affordable housing is generally defined as housing that costs no more than 30% of a person's gross income. In Nevada, there is a severe shortage of housing available to low-income renters. This lack of affordable housing is strongly connected with overall wellness.

When individuals and families struggle to afford housing expenses, it forces them to make difficult choices between food and basic needs. The need to choose contributes to many health-related issues, such as chronic physical illness, emotional stress and other mental health conditions that can be devastating for any family.

Research shows that people with difficulty paying their bills were less likely to see a primary care physician, more likely to postpone treatments, and to use the emergency room for care, which can contribute to increased debt.

Partnerships

The Healthy Living Consolidated Project (HLCP) in Clark County is a program that started in October 2020 through the U.S. De-

partment of Housing and Urban Development. HLCP is funded in partnership with Clark County Social Services, HELP of Southern Nevada and Nevada's managed care organizations, which includes SilverSummit Healthplan. This project provides housing and intensive case management services to individuals and families experiencing homelessness, and those who are considered highly vulnerable due to their extensive medical needs and ineligibility for shelter stays due to medical fragility.

In light of evidence about the many ways housing can affect health, nonprofits, for-profits and governmental agencies have been working to create sustainable strategies to improve the availability of transitional and affordable housing to get people off the streets and into a location they can call home.

SilverSummit Healthplan is the first organization in Nevada to invest in Washoe County's Affordable Housing Trust Fund, which is a collaborative effort between Washoe County and the cities of Reno and Sparks. This commitment supports the development of needed affordable housing projects in Washoe County. By strategically investing in affordable housing, SilverSummit is also investing in the health of the community.

As we recover from this pandemic, it is critically important that we continue to work with local governments and other organizations to help the underserved population find affordable housing. By providing people with adequate, attainable housing, in return we will see a healthier and more productive population in our state.

**WHEN INDIVIDUALS
AND FAMILIES
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HOUSING EXPENSES, IT
FORCES THEM TO MAKE
DIFFICULT CHOICES
BETWEEN FOOD AND
BASIC NEEDS.**



Dr. Jeffrey A. Murawsky is the chief medical director for SilverSummit Healthplan, a managed care plan that delivers quality health insurance to the people of Nevada. For more information, visit silver-summithealthplan.com.



6 recent health care bills that all Nevadans should know about

BY CHRISTINA M. MADISON, PHARM.D., FCCP, AAHIVP

The disruption in routine health care services due to the pandemic allowed for the expansion of telehealth and telemedicine, but access to these services has not been equal. During the 81st session of the Nevada Legislature, six bills that affect women's health, LGBTQ+ Nevadans, public health and an expanded scope of practice for pharmacists were passed and signed into law.

LGBTQ+ Laws

■ **Senate Bill 109 — SOGIE (Sexual Orientation and Gender Identity or Expression) Data Collection** — requires local governments to collect demographic information related to race, ethnicity, gender identity and gender expression. This allows governmental agencies to continue to take steps to ensure representation that better reflects our community.

■ **Senate Bill 275 — HIV Modernization** — modernizes Nevada's HIV criminal laws (decriminalizing HIV infection) and re-establishes the Advisory Task Force on HIV Exposure Modernization for 2021-22 Legislative Interim. Criminalizing people living with HIV does not stop the spread of infection and hurts public health efforts to end this epidemic.

Pharmacist Scope of Practice

■ **Senate Bill 190 — Hormonal Contraceptive** — requires the Nevada State Board of Pharmacy (NV-BOP) to establish protocols allowing pharmacists to dispense self-administered hormonal contraceptives (including pills, patch, ring and injectable contraception) to eligible patients without a prescription. This legislation also requires health plans to cover hormonal contraceptives when dispensed by a

pharmacist under NV-BOP protocol.

■ **Senate Bill 229 — Expanded Collaborative Practice** — removes barriers for pharmacists establishing collaborative practice agreements (CPAs) and expands the scope of eligible pharmacist-provided clinical care services. This bill formally designates pharmacists as health care providers, which paves the way for insurance plans to reimburse pharmacists for CPA-authorized services, expanding access to care for preventable and chronic medical conditions such as diabetes, hypertension and dyslipidemia.

■ **Senate Bill 325 — Pre-Exposure Prophylaxis and Post-Exposure Prophylaxis** — allows pharmacists to increase access to HIV infection prevention services for patients without requiring a prescription from another health care provider. This bill also requires all state-regulated health plans, including Medicaid and state employee plans, to provide coverage and reimbursement for medication and related pharmacist clinical services at a rate equal to other practitioners.

Public Health

■ **Senate Bill 211 — Sexually Transmitted Infection (STI) Testing in Emergency Departments and Primary Care Providers** — requires that those who provide emergency medical services in a hospital or primary care setting to a patient at least 15 years old conduct the following: 1) consult with the patient to ascertain if they wish to be tested for STIs and determine which test is medically necessary and 2) to the extent practical and medically indicated, provide the patient with a test for STIs. The National Institutes of Health declared STIs to be a major public health crisis in 2019. The ability to diagnose asymptomatic patients will enable health care providers to initiate treatment sooner and curb the risk of transmission faster.



Dr. Christina M. Madison is the founder and CEO of The Public Health Pharmacist, PLLC. Learn more at ThePublicHealthPharmacist.com.

Men and cancer: Staying one step ahead of a diagnosis

BY OSCAR B. GOODMAN JR., MD, PHD

When it comes to cancer and men's health, there are certain types that most often affect men, including prostate, colorectal, lung and skin cancers.

Prostate and skin cancer are the most prominent among American men, according to the American Cancer Society. An estimated 2,090 Nevadans will be diagnosed with prostate cancer this year and most new cases will be in African American men over age 65. Testicular cancer is also a unique concern for typically younger men—the average age of diagnosis is 33, and 120 Nevadans are projected to be diagnosed with it this year.

There are ways for men to stay one step ahead of a prospective cancer diagnosis. Prevention for all cancers includes maintaining a healthy diet, avoiding tobacco, being physically active and working with your doctor to determine a cancer screening schedule.

But sometimes, spanning genetic mutations, environmental factors and more, a cancer diagnosis is in the cards. For those diagnosed with cancer in Nevada, there is incredible hope like never before thanks to a steady flow of clinical trials and research.

Comprehensive Cancer Centers participates in more than 170 Phase I, Phase II and Phase III clinical research studies each year, and has played a role in developing more than 100 FDA-approved cancer therapies. Since 2019, Comprehensive was the first location in the world to open six new groundbreaking clinical trials, enrolling the first patients in the world on novel treatments.

Within the practice's most recent and current clinical trials, there are several spanning prostate and bladder cancers. In fact, as of press time for *Health Care Quarterly*, the practice had more than 20 related trials available, with other research studies pertaining to breast, lymphoma, lung, renal and other cancer types available as well.

Highlights within these trials include the Phase III study of the drug apalutamide in men with non-metastatic, castrate-resistant prostate cancer. Comprehensive's Dr. Nicholas Vogelzang was a co-author of the global trial's findings, which were published in the *New England Journal of Medicine*. The drug was approved and is now commonly used in the clinic and well beyond, and is helping delay the spread of prostate cancer by almost two years.

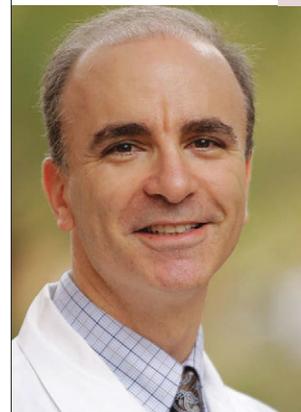
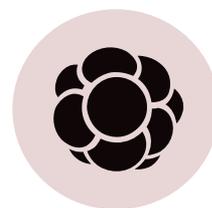
Another recent research example, for patients with mCRPC (a form of advanced prostate cancer) who have already progressed through many therapies, the practice is participating in the first-in-

human dose escalation study of a protein degrader that targets the androgen receptor. The responses have been promising and well-tolerated among a number of local patients. Within these examples and well beyond, the trend is this: We are seeing a more personalized approach to treating cancer in men based on specific cancer mutations.

In prostate cancer, as an example, the landscape has been transformed just within the past 20 years. Where there once were no drugs or treatments that extended survival, there are now several.

As with every advancement in cancer treatment and certainly in the future, each starts with clinical research.

**PROSTATE AND
SKIN CANCER
ARE THE MOST
PROMINENT AMONG
AMERICAN MEN,
ACCORDING TO THE
AMERICAN CANCER
SOCIETY.**



Dr. Oscar B. Goodman Jr. is a physician-scientist. He is a hematologist, medical oncologist and clinical researcher at Comprehensive Cancer Centers of Nevada. He participates in various basic, translational and clinical research studies at the practice. His translational research work in collaboration with Roseman University's prostate cancer research group center around understanding mechanisms that govern prostate cancer's resistance to hormonal and other therapies.



Vaccines a safe key to herd immunity, even for children

BY CHELSEA L. SANDUSKY, MPAS, PA-C



Chelsea L. Sandusky is a physician assistant with Southwest Medical, part of OptumCare.

Vaccine. The word tends to spur lively discussions and opinions. Vaccines have been around for over 200 years with proven success, yet there are still some people who view them with suspicion.

Vaccination approval follows a very thorough process and, in this country, is regulated by several groups and government agencies, including the U.S. Food and Drug Administration, the Center for Biologic Evaluation and Research, the Centers for Disease Control and Prevention and the Advisory Committee on Immunization Practices. Vaccination safety is continually monitored by three different groups: the Vaccine Adverse Event Reporting System, the Vaccine Safety Datalink and the Clinical Immunization Safety Assessment Project (Whyte, John, MD, MPH. Child, Adolescent and Adult Immunization Schedules: Course #91742. Sacramento, CA: NetCE; 2019).

The first standardized childhood vaccination schedule was published in 1995, approved by the ACIP, the American Academy of Pediatrics and the American Academy of Family Physicians. The CDC publishes the vaccination schedule, which begins at birth, recommending protection against 16 potentially serious diseases.

The ongoing COVID-19 pandemic has refocused the spotlight on vaccinations, emphasizing the importance they have on herd immunity, which occurs when a large percentage of the population is either immunized or has natural immunity from contracting the disease, making continued spread difficult. A great example of this is measles, which used to be a common childhood viral infection. The original measles vaccination developed in 1963 resulted in a more than 99% reduction in the incidence of measles.

Newborns and young infants have vulnerable immune systems, making it the most important time to be up to date on vaccinations, which provide critical antibodies to protect this at-risk group of patients. First-time parents should be glad to know that immunizing newborns and young infants may also protect against sudden infant death syndrome (SIDS). Because of their weak and developing immune system, many vaccinations (DTaP, Hib, Prevnar, Rotavirus) for infants require multiple booster shots in the first six months of life to continue to increase the body's antibody response to those diseases.

It's also vital to ensure teenage patients are up to date on their booster vaccinations, as antibody responses from vaccinations done years before may weaken. The teen years often bring the increasing chance of possible exposure to transmissible diseases from group activities or events, such as scout camping trips, summer camps, contact sports, classes, cafeterias and even living in the dorms at college.

Some vaccinations are required for school attendance, but there are also optional but highly recommended vaccinations like the yearly influenza vaccination starting at 6 months of age, HPV vaccination starting at 9 years of age, and now Pfizer's COVID vaccination, approved for ages of 12 and over.

Approved by the FDA in 2006, the recommended HPV vaccine (Gardasil), a pioneer vaccination in cancer prevention, now protects against nine strains of the virus that can cause oral, vulvar, vaginal, cervical, penile and anal cancers or genital warts. More common than you think, HPV is responsible for 79 million cases of infections in the U.S.

Vaccinations play a fundamental role in preventive care for infants, children and adolescents. Omitting vaccinations or delaying your child's immunizations can expose your child to serious and potentially deadly diseases with possible long-term effects.

Our response began before the crisis did.

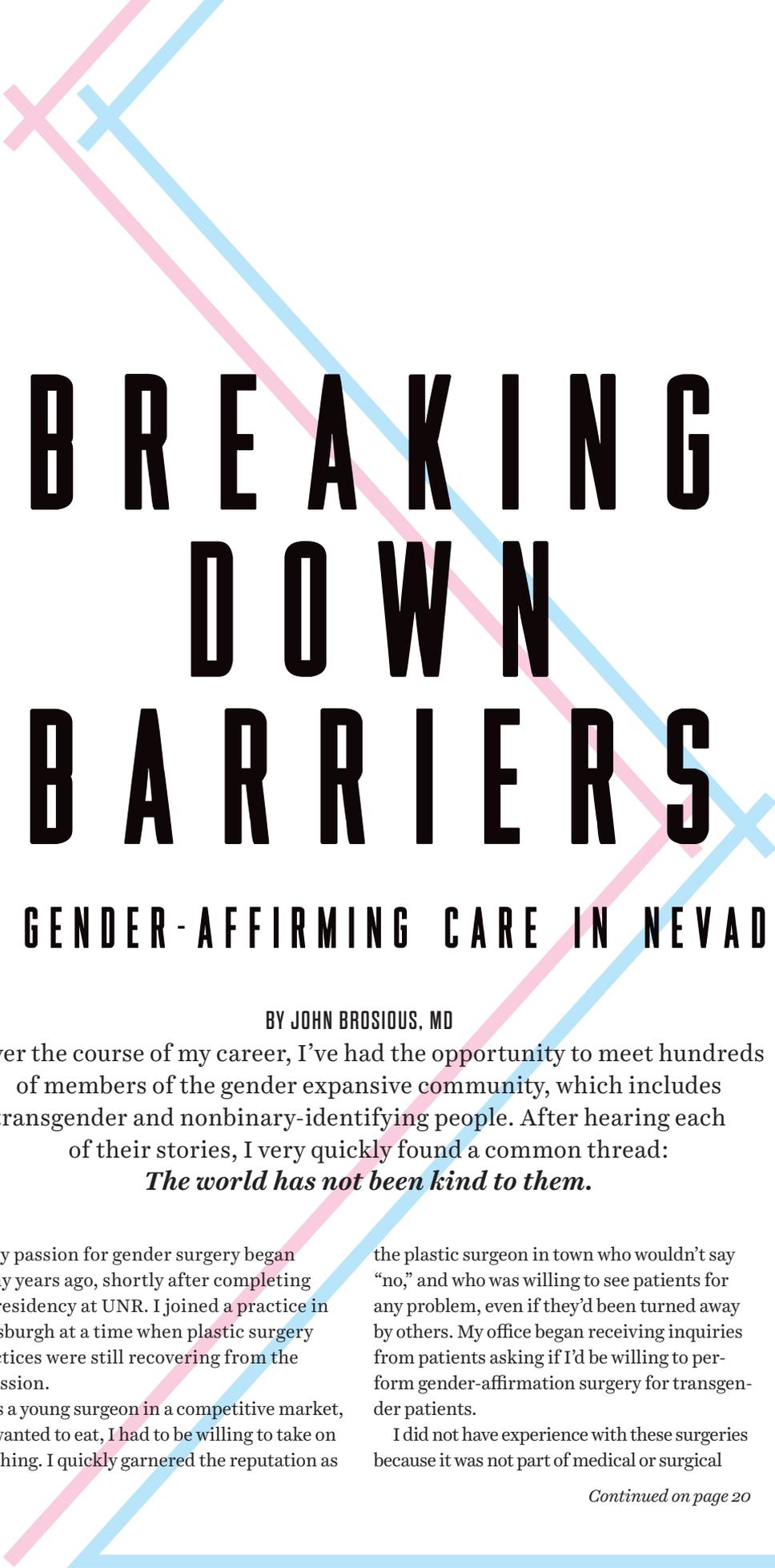


COVID-19 changed everything. But UMC was ready. Our team of infectious disease doctors had prepared for this moment their entire careers. We'd practiced pandemic drills over and over. Our stockpile of critical equipment was ample and robust. And we blazed new trails in large-scale testing, including every patient we admit, making us the safest hospital in the state. When Nevada needed us, we were there. Just as we've always been. Just as we always will.

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BREAKING DOWN BARRIERS

TO GENDER-AFFIRMING CARE IN NEVADA

BY JOHN BROSIOWS, MD

Over the course of my career, I've had the opportunity to meet hundreds of members of the gender expansive community, which includes transgender and nonbinary-identifying people. After hearing each of their stories, I very quickly found a common thread:

The world has not been kind to them.

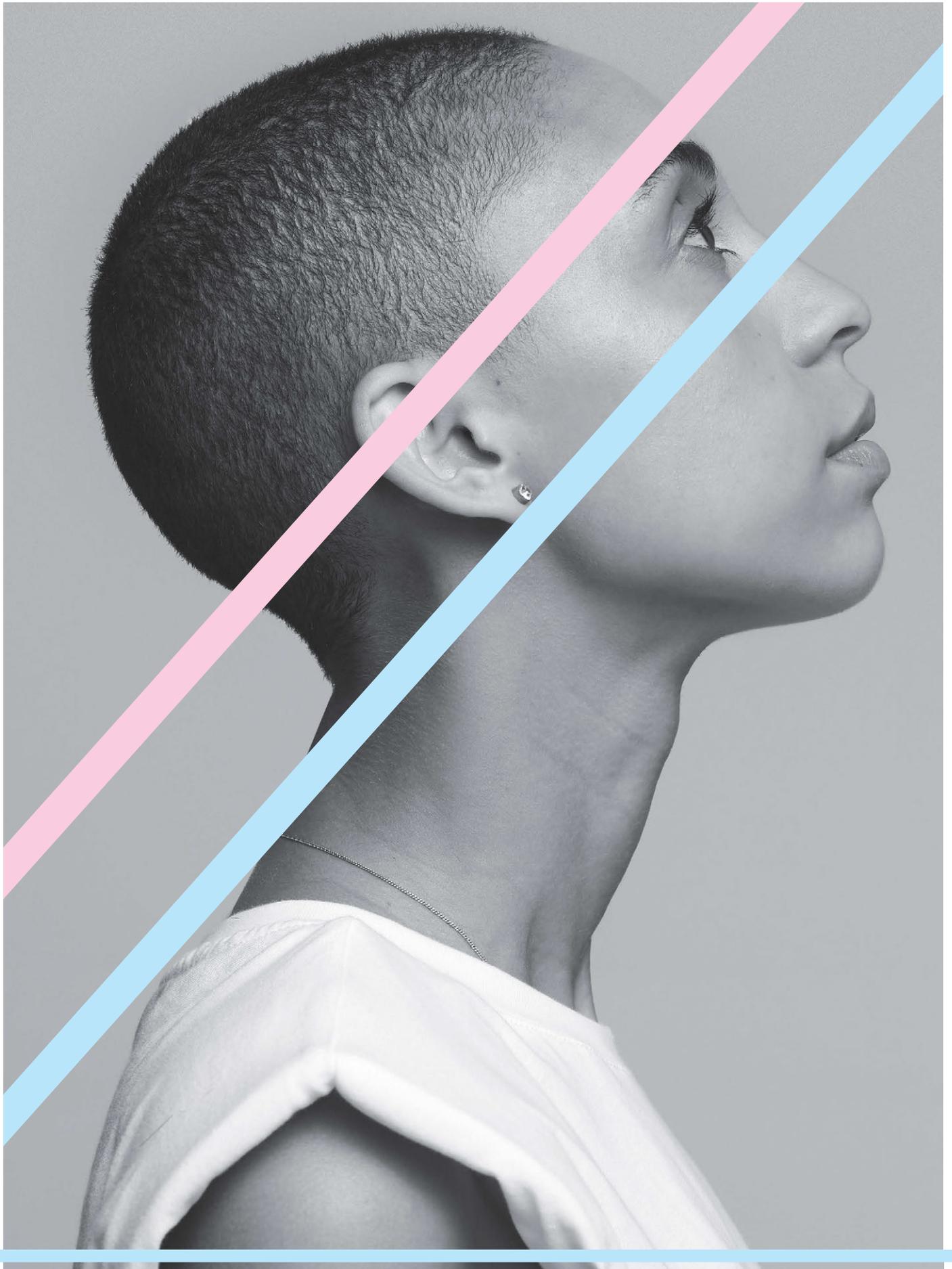
My passion for gender surgery began many years ago, shortly after completing my residency at UNR. I joined a practice in Pittsburgh at a time when plastic surgery practices were still recovering from the recession.

As a young surgeon in a competitive market, if I wanted to eat, I had to be willing to take on anything. I quickly garnered the reputation as

the plastic surgeon in town who wouldn't say "no," and who was willing to see patients for any problem, even if they'd been turned away by others. My office began receiving inquiries from patients asking if I'd be willing to perform gender-affirmation surgery for transgender patients.

I did not have experience with these surgeries because it was not part of medical or surgical

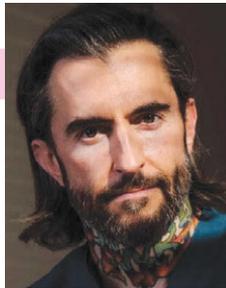
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Continued from page 18

education at that time. However, plastic surgeons are often called upon to use their experience and skills and apply them to new situations, so learning a new surgery or skill set was not something that intimidated me.

I'll never forget my first interaction with a transgender patient. She was a middle-aged transgender woman who was interested in breast surgery. I felt the consultation went well, however at the end, the patient began to cry. I apologized, thinking I accidentally misgendered her by calling her by the wrong name or pronoun. She reassured me that I did not upset her, but rather, her tears were tears of joy. She went on to tell me that I was the only physician in Pittsburgh who treated her as a human being. It was in that moment



Dr. John Brosious is an assistant professor of plastic surgery at the Kirk Kerkorian School of Medicine at UNLV and the founder and director of the Gender Surgery Program.

I realized that I, even as a single surgeon, could have a huge impact on an entire community that has been left behind by the health care system in the United States.

The gender diverse community faces discrimination in every aspect of their lives: their families, their education, their careers, their opportunities. And health care is no exception. Not only do transgender and gender-expansive patients struggle to access care specific to their gender nonconformity, such

as gender-affirming hormones and surgery, but they are often denied access to the basic health care needs that every human being requires. Despite laws that specifically prohibit denying care to patients based on their gender identity, nearly every patient I've encountered can tell me a negative experience where they were shamed, humiliated or outright denied care for being transgender.

The Affordable Care Act in 2010 included a "non-discrimination mandate," essentially banning discrimination by insurance companies based on gender. In 2016, the Department of Health and Human Services issued regulations known as the Health Care Rights Law, which further clarified the mandate, and expressly prohibited transgender exclusions in health insurance plans. However, coverage for gender-affirming procedures and medications remains a state-by-state legal battleground, and the mandate in the Affordable Care Act continues to be challenged at a

federal level. Fortunately for residents of Nevada, the state Legislature has put forth laws that prohibit health insurance discrimination based on gender identity.

But getting insurance coverage for medically necessary gender-affirming treatments and surgeries is only one of the many health care hurdles faced by the gender-diverse community. Arguably, the greatest barrier to their care is the paucity of knowledge by providers. Most practicing physicians have zero education or training in medical school or residency regarding gender-affirming care, such as hormones and surgery. This limits access to quality care for these patients. Couple this with the fact that Nevada already has a physician shortage, and that many of these physicians do not accept Medicaid (which covers a large percentage of transgender patients), you can quickly see how transgender patients are left stranded.

Adding to this hurdle is the sheer number of medical specialists required to provide multidisciplinary care for these patients: primary care physicians, endocrinologists, mental health professionals, plastic surgeons, urologists, gynecologists, otolaryngologists, craniofacial surgeons and more. No

single specialty can meet all of the needs of the transgender community.

Another potential roadblock is the willingness (or unwillingness) of hospitals and facilities to allow physicians to perform gender-affirming procedures. Before allowing procedures to be performed, facilities will often look to historical data to see if these procedures will be profitable for the facility. Since gender surgery is a relatively new specialty, hospitals and surgery centers become reluctant to allow such services to be performed because of the unknown reimbursements.

Lastly, even though these services are legally required to be covered by insurance, that does not mean coverage and payments are a seamless process. This is also new for insurance companies, causing headaches abound for patients and doctors, before and after surgery, when dealing with the red tape bureaucracy of these giant corporations. Many patients find the hurdles overwhelming and are forced to travel abroad for their procedures. This can result in travel-related health complications such as blood clots, spotty follow-up care and no insurance coverage for complications of these procedures performed out of the country, which

often have very little regulatory oversight. Further, many patients turn to black market hormones, with all of the associated risks involved with the illicit drug market.

Despite these very significant hurdles, we have seen dramatic improvements in access and quality of care in Nevada.

The Nevada Gender Affirming Healthcare Program (NGAHP) is a network of specialists and advocates from both the UNLV School of Medicine as well as within the community, who have come together with the common goal of streamlining access and improving care for the gender-diverse community in our state.

In addition to performing both the chest and genital surgeries for transgender patients, I realize that I am uniquely situated as a plastic surgeon to be a leader for gender-affirming care advocacy and medical literacy.

As the director of the Plastic Surgery Residency program and as an assistant professor at UNLV School of Medicine, I have the opportunity to train young students and surgeons in gender-affirming techniques that they can take with them after graduation to provide affirming care here in Nevada and across the country.

I am able to participate in multidisciplinary

education, bringing together all of the required specialists and ensuring that we are providing the most up-to-date care in our respective fields.

We have initiated research projects to look at outcomes of gender-affirming surgeries and have completed literary reviews to assess what studies are needed in the future. As an academic plastic surgeon, I have a captive audience of students, residents, office/hospital staff and colleagues whom I can educate in not only how to provide medical and surgical care, but more importantly, how to interact with this population so that they can be treated with the respect and dignity they deserve.

Nevada has made major strides in past years in terms of providing important medical care to the gender-diverse community, but we have a long way to go.

Access and health care literacy continues to be a problem, and as our population continues to grow and individuals become comfortable identifying as members of the gender-expansive community, the demand for services will undoubtedly grow. We need to be poised to meet this demand, so that the transgender community does not continue to be left behind by our health care system.







BY HEALTH CARE QUARTERLY STAFF



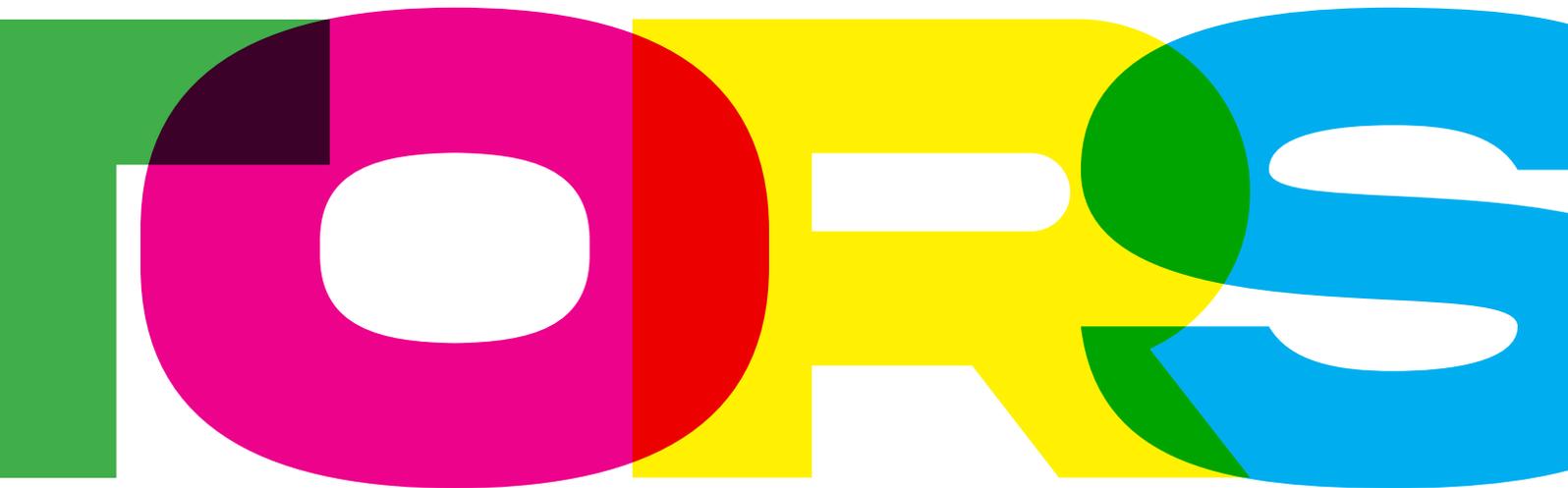
When you need a health care provider, you likely ask your doctors, friends, family and colleagues for referrals and carefully research your options. For our 11th annual Top Doctors, *Health Care Quarterly* has done the work for you.

We surveyed thousands of local physicians to get their recommendations of doctors by specialty, selecting only those who received multiple nominations. We also invited the public to nominate doctors who have made an impact

in their lives and our community in our Reader's Choice category—with submissions carefully reviewed and selected by a panel of medical professionals.

The result is a truly comprehensive listing of some of the top doctors you can find in the Valley—each one checked against records with state medical boards to ensure that they are in good standing.

This is the list you'll want to grab any time you need to find a provider. >>



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lasvegasallergy.com

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surgicalweightcontrolcenter.com

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amelihartcenter.com

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Neel Dhudshia, MD
Cardiovascular Surgery of
Southern Nevada
702-737-3808
cvsurgnv.com

Quynh Feikes, MD
Cardiovascular Surgery of
Southern Nevada
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cvsurgnv.com

DENTISTRY

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Michael P. Banks DDS
702-477-0844
mpbanksdds.com

Babak Ershaghi, DDS
Northwest Dental
702-656-3910

George Harouni, DDS
George Harouni DDS
702-434-9464
georgeharounidds.com

Thomas Kintonis, DDS
Kintonis Dental Care
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drkintonis.com

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Sandquist Dentistry
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Bradley Strong, DDS
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Las Vegas Dermatology
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Lionel Handler, MD
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Alison Tam, DO
Plastic Surgery Vegas
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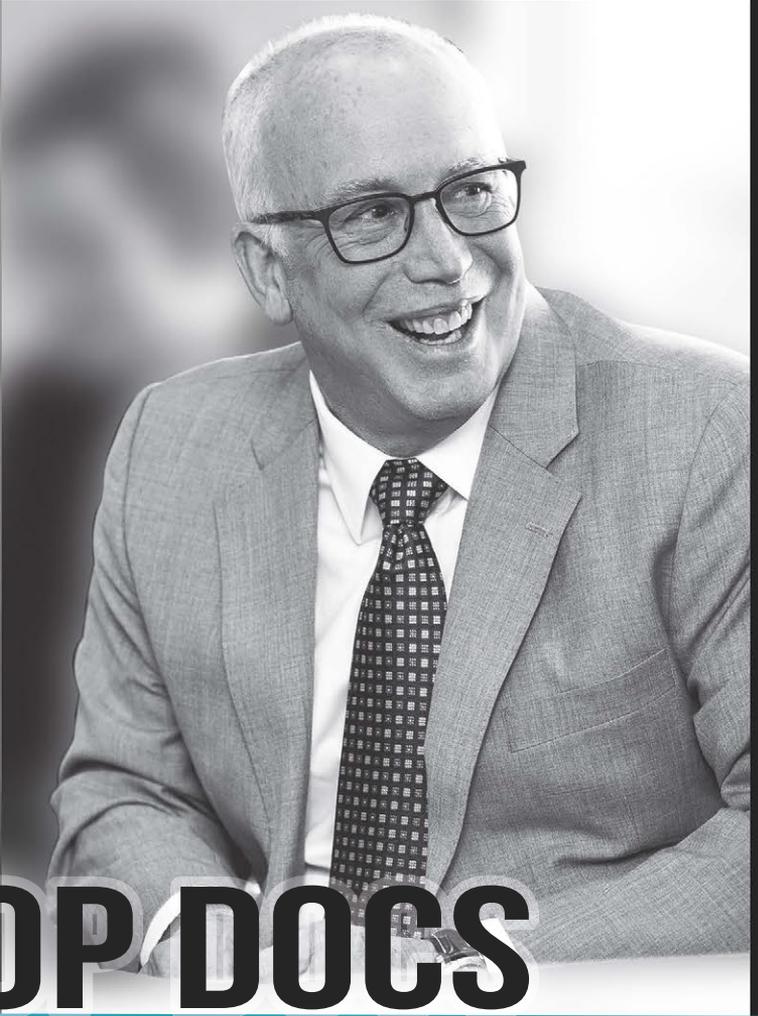
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Larry Yu, MD

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entc.com

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Alexandra Aguilar, MD

Dignity Health-Dream Fund
Pediatric Endocrinology Clinic
702-616-5865
dignityhealth.org

Brian Berelowitz, MD

Brian Berelowitz MD
702-804-9486

Chard Bubb, MD

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hcpnv.com

William Reid Litchfield, MD

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Quang Nguyen, DO

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Lisa Haworth MD
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drlisahaworth.com

Michelle Mark, DO

Dignity Health-Henderson
Primary Care Clinic
702-616-5801
dignityhealth.org

Christopher Mercado, MD

Dignity Health Medical Group
702-616-5801
dignityhealth.org

Suresh Prabhu, MD

Ascent Primary Care
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Wei Feng Zheng, MD

Wei Feng Zheng MD
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lasvegasgastro.com

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Pediatric Gastroenterology &
Nutrition Associates
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David Shih, MD

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Saju Joseph, MD

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Fikre Mengistu, MD

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southernnvsurgery.com

Kevin Rayls, MD

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Danilo M. Duenas MD
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Aurelio Muyot, MD

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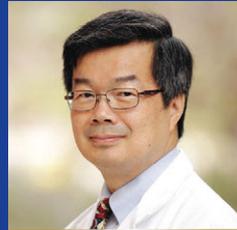
**WOLFRAM SAMLOWSKI,
MD, FACP**
Medical Oncology



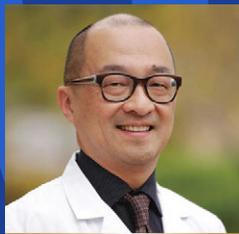
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Infectious Diseases
of Southern Nevada
702-776-8300

Brian Lipman, MD

Infectious Diseases
of Southern Nevada
702-909-7170

Chukwudum Uche, MD

Infectious Disease Associates &
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702-380-4242
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Infection Doctors
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sienahillsprimarycare.com

Lindsay T. Hansen, MD

Lindsay T. Hansen MD
702-240-8111
lindsaythansenmd.com

Daniel Malone Jr, MD

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Angela S. Miller, MD

Concierge Medicine Las Vegas
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conciergemedicinelasvegas.com

Robert White, MD

Executive Health and
Wellness Center
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NEPHROLOGY

Michael Aigbe, MD

Children's Nephrology Clinic
702-639-1700

Radhika Janga, MD

Nevada Kidney Disease and
Hypertension Center
702-588-7077
nkdhc.net

Dijana Jefic, MD

Las Vegas Kidney and
Hypertension Specialists
702-629-7510
lasvegaskidney.com

William King, MD

Nevada Kidney Disease and
Hypertension Center
702-726-6344
nkdhc.net

Chidi Okafor, MD

Kidney Specialists
of Southern Nevada
702-877-1887
ksosn.com

Cristy Robertson, MD

Kidney Specialists
of Southern Nevada
702-877-1887
ksosn.com

Zvi Sela, MD

Kidney Specialists
of Southern Nevada
702-877-1887
ksosn.com

NEUROLOGY

Azin Azma, MD

MountainView Hospital
702-962-5000
mountainview-hospital.com

Omar Cabahug, MD

Omar Cabahug MD
702-914-6994

Luis Diaz, MD

Luis L. Diaz MD
702-233-0755
luisldiaz.com

Shanker Dixit, MD

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Russell Shah, MD

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Venkatachalam Veerappan, MD

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Gary Flangas, MD

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& Spine Care
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lv-neuro.com

Jason Garber, MD

Las Vegas Neurosurgical Institute
Center for Spine and Brain Surgery
702-835-0088
lvnicsbs.com

Michael Seiff, MD

The Spine & Brain Institute
702-948-9088
thespinebrain.com

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Joseph Adashek, MD

Desert Perinatal Associates
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desertperinatalassociates.com

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George Chambers Jr., MD
Chambers & Associates
702-463-0800
chambersobgynlv.com

Florence Jameson, MD
Florence N. Jameson MD
702-262-9676

Staci McHale, MD
New Beginnings OB/GYN
702-740-0500
newbeginningsobg.com

Donna Miller, MD
For Women OB/GYN
725-777-0414
nvforwomenobgyn.com

Nicole Moss, MD
Nicole J. Moss MD
702-233-2123
nicolemossm.com

Kirsten Rojas, MD
Women Health Associates of
Southern Nevada
702-870-2229
whasn.com

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Edwin Kingsley, MD
Comprehensive Cancer Centers
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cccnevada.com

Raja Mehdi, MD
Hope Cancer Care of Nevada
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Rupesh Parikh, MD
Comprehensive Cancer Centers
702-952-3444
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Wolfram Samlowski, MD
Comprehensive Cancer Centers
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Anu Thummala, MD
Comprehensive Cancer Centers
702-952-2140
cccnevada.com

Ann Wierman, MD
Ann M. Wierman MD
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annwiermanmd.com

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Mark Doubrava, MD
Eye Care For Nevada
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Gregory Hsu, DO
Sunset Eye Center
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Timothy Perozek, MD
See Right Now
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Helga Pizio, MD
New Eyes Las Vegas
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Ravi K. Reddy, MD
Shepherd Eye Center
702-745-5058
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ORTHOPEDICS

Michael Daubs, MD
OptumCare Orthopaedics
and Spine
702-724-8877
optumcare.com

Thomas Dunn, MD
Desert Orthopaedic Center
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doicl.com

Bernard Ong, MD
Bernard Ong MD
702-796-7979
ongortho.com

Michael Miao, MD
Desert Orthopaedic Center
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doicl.com

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TOP _____
DoCS
2021

A white stethoscope graphic is integrated into the 'DoCS' text. The 'D' is a solid block letter. The 'o' is a circle with a dot in the center, connected to the stethoscope's tubing. The 'C' is a circle with a plus sign inside, also connected to the tubing. The 'S' is a solid block letter. The year '2021' is positioned to the right of the 'C'.

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Ineada Okafor, MD
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anthemhillspediatrics.com

Laura Weidenfeld, MD
Sunshine Valley Pediatrics
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Ronda Zulich, MD
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unlvmedicine.org

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Cameron Earl, MD
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cairncenter.com

Jacob Manjooran, MD
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Renee Ngo, MD
Renee Lim Ngo MD
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Uzma Zafar, MD
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Craig Nakamura, MD
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Congratulations to **J. E. (Rick) Martin, Jr., M.D., F.A.C.S.** for the *Lifetime Achievement* *Reader's Choice award!*



**J. E. (RICK) MARTIN, JR.,
M.D., F.A.C.S.**

Dr. Martin has put patients first for more than 37 years, most of that time spent in the Las Vegas community. As a cardiothoracic surgeon, he has been a skillful provider of lifesaving care. Just as importantly, he is a passionate advocate who has served every patient he has encountered with humility, skill and perseverance, even during the pandemic. His practice has touched thousands of lives and he is deeply deserving of recognition for his extraordinary commitment and service to the Las Vegas community.

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Steven Topham, MD
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OTHER

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Naz Wahab, MD
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LIFETIME ACHIEVEMENT

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Optum Care Lung and Allergy Care

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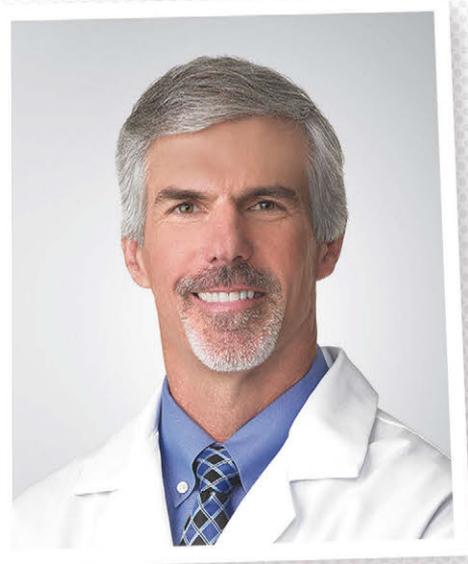
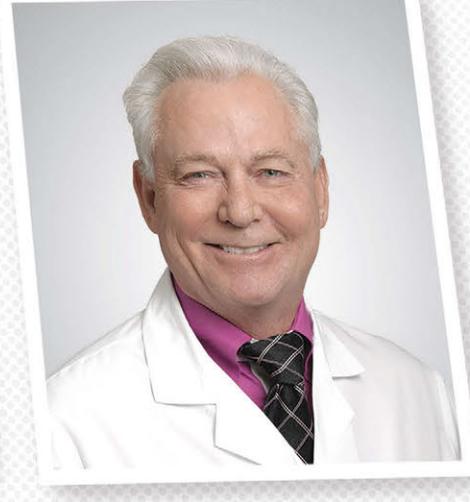
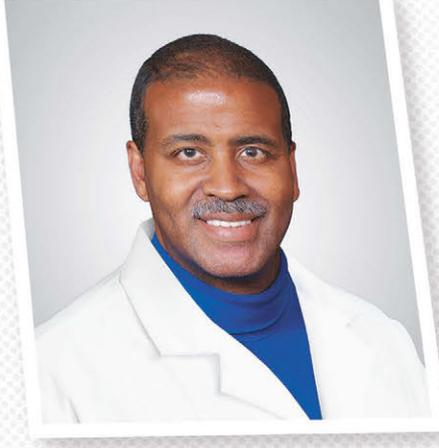
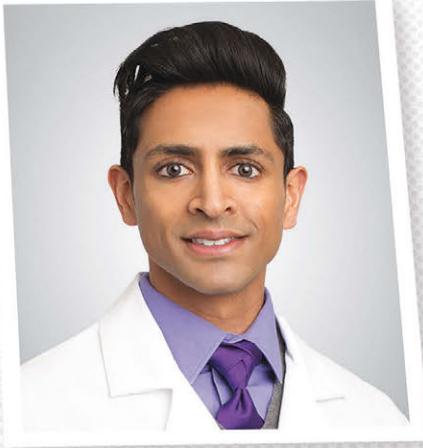
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FAMILY MEDICINE/GERIATRICS

William VonTobel, MD

Dr. William VonTobel specializes in family medicine with a focus in geriatrics. He graduated from University of Nevada School of Medicine in Reno and received his postgraduate training at Scottsdale Memorial Hospital in Scottsdale, Arizona.

Born and raised in Las Vegas, Dr. VonTobel has been practicing medicine in Clark County for more than 30 years. He is committed to compassionately serving patients in the community, many of whom he considers more than patients, but life-long friends.

Recently, Dr. VonTobel joined forces with Access Primary Care Physicians. These respected neighborhood doctors have more than 60 years of combined experience. The new partnership allows Dr. VonTobel to continue his mission to put patients first, with more access than ever to extensive expertise, the latest technologies and all-new state-of-the-art facilities.

In Dr. VonTobel's limited free time, you'll find him fly fishing and exercising.

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OPHTHALMOLOGY

Roman Fajardo, MD

Dr. Roman Fajardo joined New Eyes in 2016 to provide excellent comprehensive ophthalmic care to residents of Southern Nevada.

Dr. Fajardo graduated from the University of California, San Diego with degrees in biochemistry and cell biology, as well as psychology. He completed his medical education at the University of California, San Diego School of Medicine. Dr. Fajardo conducted his ophthalmology residency at the Shiley Eye Institute, UCSD. He also completed refractive surgery training at the Navy Refractive Surgery Center in San Diego, performing LASIK and PRK for our troops.

Dr. Fajardo currently performs both standard cataract surgery and refractive cataract surgery. Using LenSx and ORA technology in combination with multifocal and toric intraocular lenses, he strives to give patients the best vision possible. In addition, he performs numerous medically-indicated eyelid surgeries, including upper eyelid blepharoplasties.

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CANCER GENETICS

**Barbara Caldwell,
MSN, APRN, GCRA**

Barbara Caldwell, MSN, APRN, GCRA has more than 40 years of experience in medicine. At Comprehensive Cancer Centers she offers assessment, counseling and testing for those who may be at risk for developing an inherited cancer.

Caldwell is one of only nine health care professionals in Nevada to receive training through an intensive cancer genetic risk assessment program at City of Hope. She provides patients a thorough consultation and tailors a medical care plan to the individual and their family needs.

Recently, Caldwell passed the Cancer Genetic Risk Assessment Certification, a national certification of achievement focused on the areas of knowledge and competency in cancer genetics and risk assessment—one of the first in the country to sit for the exam.

Prior to joining Comprehensive, Caldwell was the director of chemotherapy at Women’s Cancer Center of Nevada, managing partner/owner of Genomicare and a nurse practitioner at Nevada Surgery and Cancer Care.

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INTERVENTIONAL PULMONOLOGY

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Mehta, MD**

Dr. Vishisht Mehta treats patients with acute and chronic pulmonary health concerns. He specializes in interventional pulmonology, focusing on advanced, minimally invasive procedures to diagnose and treat a wide range of thoracic diseases. Dr. Mehta’s expertise includes minimally invasive treatment for patients with benign and malignant airway obstructions, subglottic stenosis, malignant pleural effusions, advanced COPD/emphysema and bronchopleural fistulas.

He has authored and reviewed various published scholarly articles. At international conferences, Dr. Mehta has been a presenter and moderator for original research sessions. He also co-founded the Lung India Foundation, a nonprofit dedicated to improving lung health in Mumbai, India.

Dr. Mehta believes the most important aspects of the patient-physician relationship are the patient’s goals of care and shared decision-making. Sharing the opportunity for the patient to make their informed decision is another cornerstone of this relationship.

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RADIATION ONCOLOGY

**W. Andrew
Wang, MD**

Dr. W. Andrew Wang brings the most modern experience in technology and procedures to Comprehensive Cancer Centers. He treats all cancers with a special interest in radiosurgery and brachytherapy.

Dr. Wang graduated with a Bachelor of Science in chemical engineering from UCLA. He received his medical degree from the Medical College of Wisconsin and completed a residency in radiation oncology at William Beaumont Hospital in Michigan.

Prior to joining Comprehensive, he was a radiation oncology resident at William Beaumont Hospital where he served as chief resident. His research and findings have appeared in a number of publications including Journal of Neurosurgery, Journal of Neuro-Oncology as well as Physics in Medicine and Biology.

Dr. Wang believes an open line of communication is an important aspect of a doctor-patient relationship. He strives to provide high quality and compassionate care to patients and their loved ones, similar to how he would want his own family to be treated.

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MEDICAL PROFILES

NEUROLOGY

Eric Farbman, MD

Dr. Eric Farbman is a neurologist with Roseman Medical Group, the medical practice of Roseman University's College of Medicine.

Dr. Farbman specializes in movement disorders, a class of neurological diseases that includes Parkinson's, Huntington's, dystonia, ataxias and tremors. Dr. Farbman utilizes deep brain stimulation and is successfully managing 200 patients with this cutting-edge therapy.

Dr. Farbman is currently conducting several clinical trials, and through the Roseman University College of Medicine, is a provider for both the Parkinson Study Group and the Huntington Study Group with studies for patients experiencing mild, moderate or severe symptoms. A new study will soon begin on multiple system atrophy, an atypical Parkinson-plus disorder with no current treatments, as well as an essential tremor study. Patients interested in enrolling in a clinical trial for movement disorders can call 702-463-4040, extension 1004 to learn more or email clinicaltrials@roseman.edu.

ROSEMAN MEDICAL GROUP

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MEDICAL EDUCATION

Pedro Jose "Joe" Greer, MD

Dr. Pedro Jose "Joe" Greer is a Presidential Medal of Freedom winner, a recipient of the MacArthur Foundation's "Genius Grant" and the author of *Waking Up in America*, a book on caring for the homeless.

Driven by social justice, Dr. Greer began his career developing clinics for the underserved—from the Camilus Health Concern, a clinic for homeless, to Saint John Bosco's Clinic for the undocumented, to a clinic for migrant workers displaced by Hurricane Andrew. Dr. Greer has dedicated his life to changing the future of health care by looking beyond hospitals and office visits and creating a medical curriculum that delivers wellness at the street level, in neighborhoods, and most importantly, in individual households.

Today, Dr. Greer serves as the founding dean of the College of Medicine at Roseman University of Health Sciences, leading the development of a new kind of medical school in one of America's most diverse and dynamic cities.

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College of Medicine
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702-802-2840
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DENTISTRY

Glen Roberson, DMD

Dr. Glen Roberson is the program director of Roseman University College of Dental Medicine's Advanced Education in Orthodontics and Dentofacial Orthopedics program and Orthodontic Clinic. Dr. Roberson is in a unique position to shape the next generation of compassionate, technologically-savvy, patient-focused orthodontists. Each year, Roseman's AEODO residency welcomes 10 new residents.

From northern New Jersey, Dr. Roberson knew as a high school student that he was suited to a career in health care. He found his way to dental school and, ultimately, to his specialty in orthodontics.

Perhaps closest to his heart, however, is the work that the clinic does in treating infants, children and adults with cleft lip and palate anomalies. One of few clinics in Nevada to provide this highly specialized care, Dr. Roberson's team works with patients that are only a few days old, helping babies who are born with issues that impact their ability to feed and thrive.

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RADIOLOGY

Aanshu Shah, MD

Dr. Aanshu Shah has cared for the women and men of Southern Nevada since 2000 when she joined Steinberg Diagnostic Medical Imaging. She now serves as its director of women's imaging, a title earned for her dedication to radiology, knowledge of the most advanced women's imaging equipment, commitment to specialty-trained technologists and her sincere compassion for her patients.

Largely due to the high standards Dr. Shah has set, SDMI is accredited as an ACR Breast Imaging Center of Excellence, all cases required for accreditation are meticulously reviewed by her.

Dr. Shah received her medical degree from University of Michigan Medical Center, her residency in diagnostic radiology from University of Pittsburgh Medical Center and finished her fellowship in women's imaging at University of Pittsburgh Magee Women's Hospital.

Dr. Shah balances her career with being an involved parent, instilling in her children the value of passion for education and giving back to their community.

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RADIOLOGY

David Steinberg, MD

In 1988, Dr. David Steinberg joined his father, Dr. Leon Steinberg, and friend, Dr. Mark Winkler, as they broke ground on what would be the first Steinberg Diagnostic Medical Imaging facility. Founded on Dr. Leon Steinberg's simple philosophy, "If you practice good medicine, patients will follow."

Today, SDMI has grown to 10 locations with over 500 employees and 35 radiologists. Dr. Steinberg works to guarantee our Southern Nevada neighbors have access to top-of-the-line technology at all locations, consistently upgrading equipment and facilities, and implementing new technology to ensure every patient has a positive experience.

Dr. Steinberg's dedication to the community is unmatched; he gives back to several nonprofit affiliations and sits on the board of CEO's Against Cancer, Roseman University and Keep Memory Alive. As a radiologist, Dr. Steinberg is board-certified, sub-specialized and has received the prestigious award of ACR Fellow, the highest honor the ACR bestows.

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BARIATRICS

James D. Atkinson, MD, FACS

Dr. James D. Atkinson is a multi-year recognized Top Doctor. Board-certified and a native of Las Vegas, he earned his medical degree from the University of Nevada and completed his residency at University Medical Center where he trained in bariatric surgery and trauma surgery, and served as chief resident. He subsequently received specialized training in advanced laparoscopy.

Dr. Atkinson was inducted into the distinguished medical honor society Alpha Omega Alpha, has been featured in MD News and is recognized as one of America's Top Surgeons. As a respected leader in the field of bariatric surgery, Dr. Atkinson has mentored more than 100 surgeons from across the nation who seek to learn from his surgical expertise and the techniques he personally developed.

Under his direction and leadership, the Surgical Weight Control Center is the leading bariatric program in Nevada and has earned a top 5% ranking in the nation by Health Grades.

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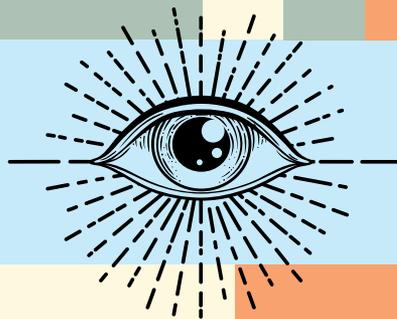
HEALTH

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DIABETIC

RETINOPATHY



BY ZACHARY BODNAR, MD

Approximately 1 in 10 Americans have diabetes. Diabetes is a chronic medical condition where the body is unable to process sugar appropriately. Normally, sugar in the bloodstream causes the pancreas to release a hormone called insulin. Insulin is needed to take the sugar out of the bloodstream and bring it to the cells in the body for energy. In diabetics, either the body does not make enough insulin, or the body does not respond to the insulin in the way it should. This causes blood sugar to build up in the blood vessels. Eventually, this leads to damage of the blood vessels, leading to many complications, including kidney disease, nerve problems and damage to the eye.

The most serious eye problem from diabetes is diabetic retinopathy (DR). The retina is the light-sensitive tissue in the back of the eye. It is made of specialized nerve cells that sense light and pass the visual signals to the brain. In diabetic retinopathy, the blood vessels that course through the retina become damaged, leading to damage in the retina.

There are two major types of diabetic retinopathy. The less severe form is called nonproliferative diabetic retinopathy. In this form of DR, blood vessel damage leads to leaky blood vessels, spots of blood within the retina and swelling in the retina. Nonproliferative DR can cause significant blurry vision.

The more severe form of diabetic retinopathy is called proliferative diabetic retinopathy. In this form of DR, the small blood vessels become so inflamed from the high sugar levels that they close off completely and the retina loses circulation. The retina then tries to compensate for this by growing new blood vessels. Unfortunately, these new blood

vessels are abnormal and dangerous, and can lead to serious complications including blood filling up the eye, a severe form of glaucoma and retinal detachment. In the most severe cases of proliferative DR, the disease can lead to complete and permanent blindness. A retina surgeon can repair a retinal detachment from diabetes; however, in many cases the damage to the retina is so severe that even with successful surgery, the patient does not regain vision.

Fortunately, if caught early, there are treatments available to prevent DR from progression to an advanced stage, and to prevent the advanced stage from causing blindness.

When there is swelling in the retina, a retinal surgeon can perform injections of medication into the eye (anti-vegf medications) to stop swelling and bleeding. If the eye begins to lose circulation, a retina surgeon can perform laser treatment to the damaged

areas of the retina to prevent growth of the dangerous abnormal blood vessels. These treatments need to be initiated early, and often need to be performed monthly. However, with compliance and determination, and the care of a dedicated retinal surgeon, your vision can be maintained.

The only way to detect these earlier changes is to have regular retinal examinations. This should be done at least annually, and more frequently depending on the findings. The exam should involve dilation of the pupils so the retina can be thoroughly examined. The exam will often involve specialized imaging to detect subtle changes in the retina. Optometrists, ophthalmologists and retinal surgeons all perform diabetic screening exams. If there are any signs of diabetic retinopathy, the patient should be evaluated as soon as possible by a retinal surgeon.



Dr. Zachary Bodnar
is a retina specialist
with Meadows Eye
Physicians & Surgeons.

WHAT'S THE DIFFERENCE BETWEEN AN OPTOMETRIST AND AN OPHTHALMOLOGIST?

Optometrists are Doctors of Optometry (OD), who have completed four years of college with a bachelor's degree, and four years of optometry school to obtain the OD degree. Some optometrists go on to complete an additional year of residency training, during which they gain additional specialty training.

Optometrists perform refractions and prescribe glasses or contact lenses. If an abnormality or disease of the eye is discovered beyond the scope of practice of the optometrist, they will refer you to an ophthalmologist.

An **ophthalmologist** is a medical doctor who has completed four years of college with a bachelor's degree, followed by four years of medical school to obtain a Medical Doctor (MD) degree.

After obtaining the MD degree, a physician chooses an area of medicine in which to specialize. Physicians who choose ophthalmology must complete a four-year ophthalmology residency program, during which they learn to diagnose and treat eye diseases and perform eye surgery.

Many ophthalmologists go on to do 1- or 2-year fellowship training programs, for additional surgical training and specialization.

— Isaac Ortiz, OD

Dr. Ortiz is a comprehensive medical optometrist at Meadows Eye Physicians & Surgeons.

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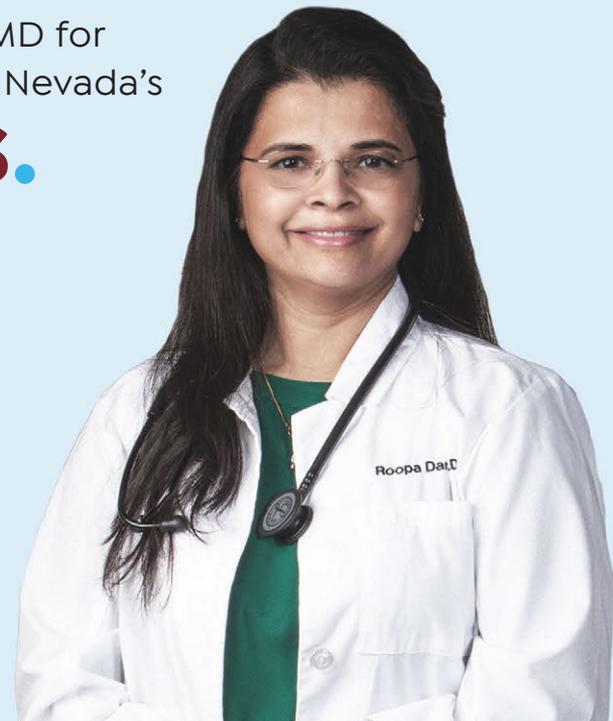


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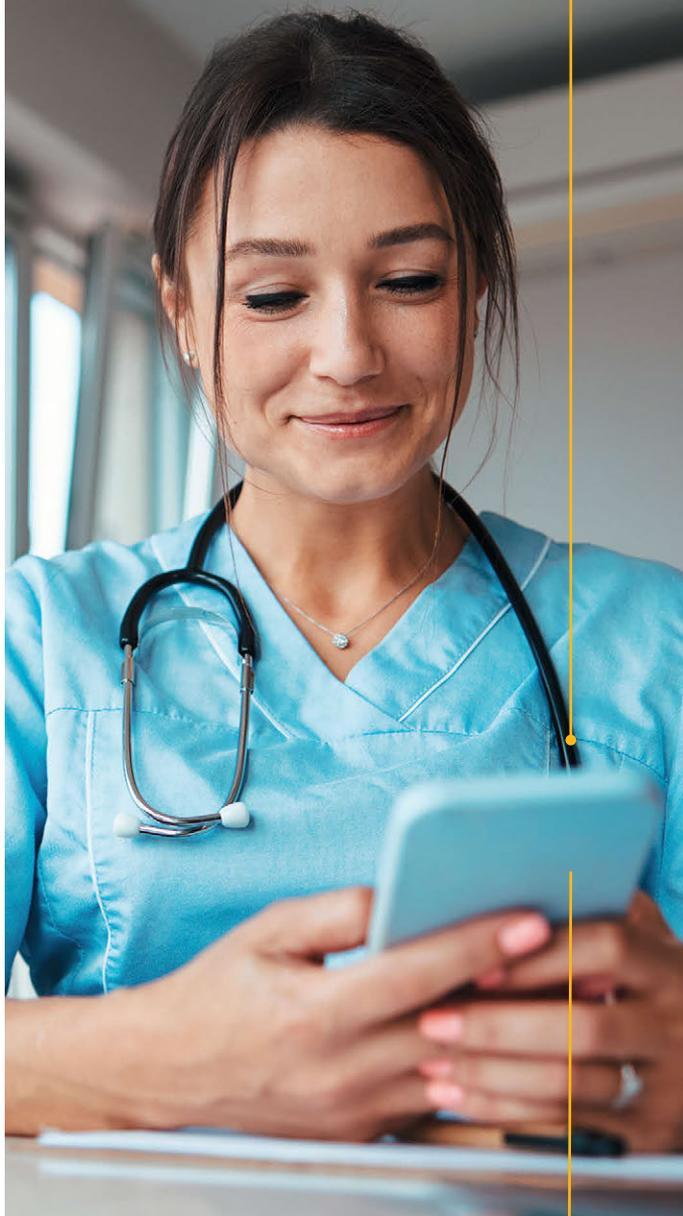
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DR. RONALD HILLOCK - OSSEOINTEGRATION EXPERT



❏ What is Osseointegration?

Osseointegration (also known as OI) is a process of anchoring an implant into bone and coupling through the skin to an external device. OI was first developed in dentistry as a way to anchor a prosthetic tooth to the bones of the jaws. OI has been used in extremity amputations for the last 30 years in Europe. I have been working with an expert team of surgeons and engineers toward the development of an OI system for US amputees for the last 10 years.

❏ What is your interest in OI?

The first years of my career were as a surgeon in the US Army. I participated in several combat deployments and treated many battle casualties. The battle amputee is near to my heart. They have given a limb for their service to our freedom and we owe them whatever can be done to improve their quality of life. I saw OI and its many advantages while stationed in Europe and have been working to bring this technology to the US since.

❏ Are there problems with conventional suction socket systems for amputees?

Amputees almost universally share the problem of skin irritation in the area where the socket is in contact. They develop calluses and blisters on the amputated residual limb due to friction from the socket against the skin routinely. If the amputee's weight changes by as little as 5 pounds up the socket will be too tight, or 5 pounds lost the socket will be too loose and slip or fall off the limb.

❏ Who qualifies for treatment with an OI system?

- Transfemoral level amputees (above the knee)
- Transtibial level amputees (below the knee)
- Transhumeral level amputees (above the elbow arm amputees)

The patient must be an adult, over 18 years of age and otherwise healthy.

The cause of amputation must be due to one of the following reasons:

1. Traumatic amputation
2. Tumor related amputation
3. Congenital malformation/birth defect

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Special Olympics Nevada works to combat disparities, increase access



Terrence Thornton is the executive director of Special Olympics Nevada. Learn more at sonv.org.

BY TERRENCE THORNTON

The mission and history of Special Olympics is a rich and storied one. For more than 50 years, Special Olympics has worked to create inclusive opportunities for people with intellectual disabilities through the transformative power of sport. The same can be said here in Nevada, as we offer inclusive sports, education, athlete leadership training and free year-round training and competition programs for athletes who compete in more than 14 competitions in seven sports annually. Our outreach programs and competitions affect nearly 24,000 Nevadans across the state.

However, what may not be widely known is that health care equity is an equally important tenet of our mission. Special Olympics works to combat disparities and increase access to quality health care for our athletes, members of a marginalized community, many whose experience is rooted in intersectionality. Unfortunately, people with intellectual disabilities on average live 16 years less than the general population and often have low or limited access to quality care. To combat this, Special Olympics offers Healthy Athletes, a free outreach and education program that contributes to the quality of life of our athletes and underserved communities in Nevada.

In addition to free sports physicals, hearing tests, and blood pressure and temperature checks for our athletes, Healthy Athletes includes:

■ **Strong Minds:** an interactive learning activity focused on developing adaptive coping skills and strategies for maintaining emotional wellness under stress.



■ **Special Smiles:** a program that provides comprehensive oral health care information, including offering free dental screenings and instructions on correct brushing and flossing techniques.

■ **Fit Feet:** volunteer podiatrists work with athletes to evaluate problems of the feet, ankles and lower extremity biomechanics. Up to 50% of Special Olympics athletes experience one or more preventable or treatable foot conditions that can affect their sports participation.

■ **Fit 5 Program:** aims to help Special Olympics athletes make healthy lifestyle changes through educating and emphasizing the importance of physical activity, nutrition and hydration.

One area of our work is to improve the process from within. When doctors or clinical staff go to medical school, they receive training in their respective specialty areas. However, this often does not include how to properly



identify the health risks of people with intellectual disabilities. To assist with this learning curve, Special Olympics partners with the Centers for Disease Control to create curriculum to train physicians and medical clinicians on how to identify health risks in people with intellectual disabilities. In Nevada, we have provided training to more than 300 medical professionals. These health care volunteers provide over 700 health screenings to SONV athletes annually. SONV will continue to partner with health care entities and medical students in higher education so we can expand services for people with intellectual disabilities throughout our state.

There are many benefits for medical professionals to volunteer with Healthy Athletes. Participation helps to increase their knowledge of best practices in caring for and communicating with people with intellectual disabilities. Notably, trained health care providers demonstrate improved awareness and self-efficacy in providing care for and communicating with patients with intellectual disabilities after completing training.

The mental health and wellness of our athletes is also a priority, which became critical during the COVID-19 pandemic as individuals with intellectual disabilities were

quickly categorized as a high-risk group. While Nevadans were isolating at home and feeling vulnerable, particularly students and marginalized communities, we were not able to offer our full suite of services under our Healthy Athletes program, however we were able to successfully pivot to a supportive remote experience for our athletes by creating Healthy Athletes @ Home. We provided virtual curriculum and small group sessions to educate and train our athletes on healthy eating habits to boost their immune system, mental health exercises and fitness routines that they could do safely in their home or in public, while practicing social distancing. This program helped SONV athletes and supporters to stay healthy, motivated, engaged and connected.

The activities within these programs are designed to not only provide a practical framework for people with intellectual disabilities to self-advocate, improve self-esteem and live healthier and active lives, they also promote more inclusive interactions for people with intellectual disabilities and their peers without disabilities to engage in activities together. This integrated approach is creating an atmosphere of equity for people with intellectual disabilities and fostering a community of mutual dignity and respect.

Diversifying brain disease clinical research



Dr. Dylan Wint
is director of the
Cleveland Clinic
Lou Ruvo Center for
Brain Health.

BY DYLAN WINT, MD

Black Americans age 65 and older are about twice as likely as Caucasians in that same age group to develop Alzheimer's disease or another dementia. For Latinx, the ratio is about 1.5 to 1, according to the Alzheimer's Association.

Yet the lack of diversity in clinical research is a broad-based and regrettable shortcoming: Minorities are woefully underrepresented in Alzheimer's clinical research, with college-educated Caucasians comprising 95% of all participants. The downstream effects are a lack of understanding of the manifestations of Alzheimer disease in diverse populations, ignorance about factors that promote or prevent it and limited ability to predict the positive or negative effects of current and future treatments in the breadth of patients for whom they might ultimately be prescribed. We simply don't know what we don't know.

At Cleveland Clinic Lou Ruvo Center for Brain Health, we hope to change this and remain focused on the important role diversity—in race, ethnicity, age, gender, socioeconomic status, microenvironment (home), macroenvironment (geography) and more—plays in health care research.

For the past three years, we have committed sustained resources to amplify our community outreach and education efforts, implemented institutional programs like implicit bias training for all staff and hired more culturally diverse members to our research and clinical team.

It is our mission to ensure that people who fully reflect the diversity of our state be inspired to contribute to the solutions we seek through clinical research. We don't know if or when

there will be a cure for Alzheimer's or other brain diseases, but we do know the first person to be cured of one will be in a clinical trial and we desperately need more participants of all kinds.

Here are a few ways all Nevadans can get involved and become "Citizen Scientists":

■ **NVeADRC:** We established the Nevada exploratory Alzheimer's Disease Research Center (NVeADRC), to understand and reduce disparities faced by individuals with Alzheimer's disease and other dementias in settings outside of Nevada's major urban cores. Leveraging our status as a frontier state, the NVeADRC is developing novel methodologies and technology to enroll individuals from Laughlin, Mesquite and Pahrump into a rural cohort to collect high-quality data that can be shared with the broader scientific community.

■ **HealthyBrains.org/CerebrosSanos.org:** Based on Cleveland Clinic's six pillars of brain health, HealthyBrains.org and its Spanish-language version, CerebrosSanos.org, are interactive online communities where anyone can complete a free brain health self-assessment, receive personalized reports and keep up to date on brain health news anytime, from anywhere. Progress is recorded, tracked and presented on an individualized dashboard, displaying customized recommendations based on a person's Brain Health Index (BHI). Based on the BHI score and medical history, the app is able to provide recommendations for individuals who qualify for clinical trials at the center.

■ **The Alzheimer's Disease Neuroimaging Initiative (ADNI):** The ADNI Diversity Taskforce recently awarded us a grant to support recruitment of Black/African American and Latinx participants for the ADNI study. Using brain scans and other tests to track changes in individuals with Alzheimer's disease, ADNI is perhaps the largest and most influential study of Alzheimer's ever conducted.

It will take time and effort to strengthen our relationships with minority groups, but we are committed to the work. It is imperative to Alzheimer's drug development, and the health of Nevada residents that we recruit participants who reflect the diversity of brains that may be affected by this disease.

Go to clevelandclinic.org/NevadaResearch for more information about our research programs. Or contact healthybrains@ccf.org or 702-701-7944.



New inroad on Alzheimer's treatment or another dead end?

BY GABRIELA GREGORY, MD

For the first time in decades, a new medication has been approved by the FDA for treatment of Alzheimer's disease.

Alzheimer's is the most common type of dementia causing memory loss, personality changes, poor judgment and disorientation. For years, scientists have been aware of a correlation between the buildup of two proteins in the brain, amyloid and tau. The new medication, a monthly intravenous infusion called Aducanumab, is the first treatment that has been shown to decrease the amount of amyloid in the brain of patients suffering from Alzheimer's disease and was also found to lower the amount of tau protein in the spinal fluid, which suggests there is less

tau in the brain as well. The hope is that by reducing these proteins, the progression of the disease can be reduced and possibly even reversed.



Dr. Gabriela Gregory is a board-certified neurologist with the Nevada Neurosciences Institute at Sunrise Hospital & Medical Center.

Approval of this medication has been highly controversial, however. The FDA's process for approval includes a review of the published data by an independent panel of physicians. This panel met in November 2020 and did not recommend approval. Primarily the concern was that, while the studies showed the imaging and lab work for patients improved after one year of taking the medication, the clinical improvement was modest at best. Memory and cognitive function improved in the first of the published studies but not on a second study. The difference between the outcomes could not be explained.

Another major concern is the cost of

the medication. Biogen, its developer and manufacturer, expects to sell it for \$56,000 per year. Initially, the FDA approved the medication for all patients suffering from Alzheimer's disease. Given the millions of people with this type of dementia and the modest improvement seen in the studies, this medication could strain Medicare budgets for relatively little benefit. In a subsequent review, the FDA amended its approval and now recommends this treatment only for patients with mild disease, which is the population tested in the trials. It also required further studies to be done and submitted to the agency to maintain approval.

Alzheimer's is a disease that can last for decades. The trials for Aducanumab were only one year long. It is possible that extending treatment for two to five years can show continuing improvement, though this needs to be tested and demonstrated, as it is also possible that brain damage from this protein buildup may not be reversible.

Time and research will tell if this is the start of a new road to healing the ailing brain or yet another dead end in a high-priced neighborhood.

Quality, diverse residencies ensure we keep top doctors here



Shelley Berkley is the CEO and senior provost at Touro University Nevada.

BY SHELLEY BERKLEY

The state of Nevada continues to have a serious health care crisis. There are not enough physicians for the number of people who live in our state. According to a report for the CDC by America's Health Rankings, Nevada is also ranked the least healthy state in the nation. A little more than half of Nevadans reported having a personal health care provider, which often translates to lack of regular wellness checks, leading to disease and other health conditions.

The state has recognized it must do more to ensure the health of its citizens. Significant resources have been allocated to fund the medical school at UNR and create a new medical school at UNLV. Touro University Nevada was established in 2004 to help the state with the physician shortage at no cost to taxpayers. Yet, medical education in our state is confronted with several challenging issues.

The first two years of medical school are dedicated to lectures, labs and classroom activities. Third- and fourth-year students are expected to get hands-on training in the community working with physicians. These rotations are required to learn the

art of medical practice and to graduate medical school. It is critical for third- and fourth-year students to have as many opportunities as possible to get their training locally. If not, they must leave Nevada for their rotations. I hope more physicians consider taking students in clinical rotations. After all, that is how they became doctors.

The state has allocated millions of dollars to create residency programs for the pipeline of medical school graduates with the hope that Touro, UNR and UNLV graduates will remain in Nevada to practice after completing their residency program. Medical school graduates must complete a residency program before they can be fully licensed physicians. Seventy percent of physicians practice where they do their graduate medical education, also known as a residency. If graduates leave because there are insufficient numbers of programs in Nevada, chances are they will not return.

Among the three medical schools, Nevada has more than 350 students graduating each year. There are now 275 residency positions open each year, not nearly enough

We must do everything we can to build new residency programs, to give our medical students every reason to plant deeper roots in Nevada.

for the number of graduates we have. Many graduates must leave Nevada because there is no guarantee they will be selected for one of the available residency positions, or that the specialty they want is even offered. In addition, there are only 13 residency specialty programs for first-year medical school graduates. According to the Association of American Medical Colleges, there are 49 first-year residency specialties that medical students can go into after graduation.

We must do everything we can to build new residency programs, to give our medical

students every reason to plant deeper roots in Nevada, and practice in the same place they went to medical school. We cannot address the physician shortage if we are unable to keep medical school graduates here for residencies. Together, we can educate the next generation of doctors in Nevada, for Nevadans.



Clinical rotation helps rural Nevadans and grows doctors



Dr. Wolfgang G. Gilliar is the dean of the Touro University Nevada College of Osteopathic Medicine. **Johnathan Emahiser** is a third-year osteopathic medical student at Touro. Please visit tun.touro.edu/DO to learn more about coming to Touro for medical school.

BY WOLFGANG G. GILLIAR, DO, FAAPMR

Nevada ranks No. 47 in the U.S. for actively practicing physicians. With this shortage of health care providers across the state, many of the Silver State's 300,000 rural residents drive 300 miles for health care.

To make a positive impact addressing the health care needs of rural residents, Nevada Gold Mines (NGM), operated by Barrick, has teamed up with Touro University Nevada (TUN) to offer medical clinical rotations with the two company-sponsored health clinics. Through the program, students enrolled in the TUN College of Osteopathic Medicine gain valuable medical skills while providing medical care under the supervision of a licensed physician in underserved rural Nevada.

The new program allows two students to serve a month-long medical rotation in either Elko or Winnemucca. Johnathan Emahiser, a third-year osteopathic medical student at TUN, went from a childhood dream of wanting to serve as a funeral home director to realizing the enthusiasm he brings is better suited to help people thrive.

How would you describe this experience?

The rotation with the NGM clinic in Elko

is a great introduction to rural primary care. The patient population ranges from children to adults about to retire, in the setting of office visits, urgent care, and occupational medicine. Beyond the basics, a multidisciplinary staff of nurses, counselors, and providers of all levels show how teamwork in medicine can truly improve patient health.

What makes this rotation unique?

The clinic is a benefit provided for employees of Nevada Gold Mines, so there is a financial incentive to not only provide affordable care, but effective care. This means patient visits ranging from 30-60 minutes, an attached pharmacy, and a greater emphasis on developing therapeutic relationships with patients. To me, it provided an interesting look at what happens when the private sector pursues public health initiatives in a rural setting.

How did you become interested in the medical field?

My interest in medicine largely stems from wanting to have a bigger impact on the people around me. The decade or so before I came to Touro consisted of trying law enforcement, nonprofit administration, and naturopathic medicine for my career. It could also be viewed as 10 years of finding out I was smart enough to become a doctor. If you don't think you're good enough to do something, do it anyway. You are only as good as you let yourself be.

Health care is at its best when all stakeholders rally to contribute in a most meaningful way. Health care is at its best when all stakeholders rally to contribute in a most meaningful way. By creating a private, nonprofit partnership with public health and good health care in mind, medical students have the opportunity to follow patients from cradle to grave. They learn to listen to all patient needs and then work on mutual solutions based on desired outcomes. This way, our students will lead initiatives that will bring many others along.

Health care is at its best when all stakeholders rally to contribute in a most meaningful way.



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New program explores importance of Psychopharmacology



Rhone D'Errico, DNP, is an assistant professor at UNLV Nursing and program director for the Psychiatric Mental Health Nurse Practitioner program. **Joseph Gaccione** is the associate director of communications for UNLV Nursing.

BY JOSEPH GACCIONE

In fall 2021, UNLV School of Nursing will begin its new Psychiatric Mental Health Nurse Practitioner program. Offered through UNLV's master of science in nursing and post-master's tracks, the PMHNP program provides advanced nursing education by focusing on evidence-based and holistic approaches to psychiatric mental health assessment and treatment.

One of the most critical courses is Psychopharmacology Across the Lifespan, taught by Dr. Rhone D'Errico. Psychopharmacology is one part of high-quality patient care, but it is an essential skillset for students in this program to master.

D'Errico explains why this course is an important piece to becoming a psychiatric nurse practitioner:

What is psychopharmacology?

Psychopharmacology refers to the study of using medications to treat mental disorders.

What makes this course a requirement for the PMHNP program?

These medications are a cornerstone of modern mental health treatment and knowledge of them is fundamental to this role. These types of drugs are often most effective if prescribed alongside, rather than instead of, treatments such as counseling and psychotherapy.

Advanced practice registered nurses have a vital role to play in meeting Nevada's need for mental health specialists. As eventual providers with the licensure to write prescriptions, it's imperative that UNLV

students come out of the program with the most current understanding of medications available to patients.

What do students learn?

Students will learn about all aspects of psychopharmacology, including how it can be used to treat patients across the lifespan, with special consideration for cultural and social factors.

Students will study advanced concepts in neuroscience and pharmacology, including how drugs interact with the body (pharmacokinetics), and the range of reactions people have to these medications (pharmacodynamics).

They will also learn how drugs work in concert with therapy and other forms of mental health support. Although this is a complex subject, psychopharmacology is approachable and understandable for the dedicated student.

Why is this topic so exciting to teach?

Psychopharmacology touches on many aspects of advanced nursing practice, ranging from the hard sciences of psychology, biochemistry and biology, to the social sciences of human wellness and flourishing. The psychiatric nurse practitioner can make very real, significant improvements in the lives of those who struggle with mental health and behavioral disorders.

Do you feel courses such as this can help shed the stigma of using psychiatric medications?

Yes. There is sometimes a perception that taking psychiatric medications is a sign that a person is flawed in some way.

Through education, we can focus on changing this perception to instead view psychiatric medications in the same light as medications for disorders such as diabetes or hypertension, in that they treat biological symptoms that are causing distress or impaired functioning.

What are the most crucial traits a psychopharmacologist should possess?

A successful psychopharmacologist will always put the well-being of the patient ahead of all other concerns. They should be detail-oriented, curious and a life-long learner.

Psychopharmacology is both an art and a science, and it is a field that is constantly growing and changing. The prescriber of psychiatric medications must be continually developing as a practitioner, staying abreast of developments in the field, and always listen-

ing to what our patients are telling us about their treatment.

How prevalent are mental health concerns in Nevada?

There is a significant need for more mental health service providers at both the state and national level. According to the Health Resources and Services Administration, numerous Nevada counties have a shortage of mental health specialists.

Are there possible warning signs that could warrant psychiatric medical treatment?

Seeking mental health treatment is warranted any time a behavioral or mental health concern leads to distress or difficulty functioning in day-to-day life.

Thoughts of suicide or self-harm indicate a need to seek immediate mental health care, which can include

calling the suicide hotline (1-800-273-8255), dialing 911 for emergency services or visiting the emergency department.

Other high-risk signs include seeing or hearing things that others don't perceive, thoughts of persecution, obsessive thoughts that disrupt daily functioning and compulsive actions that the individual feels they cannot control. Signs that warrant urgent, but not necessarily urgent, mental health care include feelings of being down, depressed or hopeless, a loss of interest in previously enjoyable activities, anxiety that impairs optimal functioning, panic attacks, extreme fears, just to name a few.

In addition, a history of trauma as a child or adult can lead to significant distress, and a qualified mental health professional can help the individual make sense of these events and live a healthier, more fulfilling life.

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HCOQ Notes

The **Siena Campus of Dignity Health-St. Rose Dominican** achieved accreditation as a Center of Excellence in Robotic Surgery, recognized for providing the highest quality of care and patient safety by **Surgical Review Corporation**, an independent, not-for-profit, organization that administers best-in-class accreditation programs for medical facilities and professionals. The St. Rose Siena hospital is also the first Nevada hospital to achieve Center of Excellence in Robotic Surgery accreditation.

MountainView Hospital held a ceremonial groundbreaking for the first phase of its \$82 million expansion, including a five-story patient tower and additional ER space. The expansion will add 65,600 square feet to the hospital. A five-story, 525-space parking garage is planned at the southeast corner, near the hospital's second medical office building.

CareNow Urgent Care locations in Southern Nevada are offering pre-flight COVID-19 testing to **American Airlines'** guests traveling to 13 international destinations throughout Central America, the Caribbean as well as domestic destinations, including Hawaii. Travelers may schedule an appointment using web check-in at carenow.com. After completing a rapid test, patients will receive a physical and electronic copy of their test results before leaving the clinic. Those taking a PCR lab send out test will receive an electronic-only copy of results. Travelers should provide proof of their test during check-in or via the VeriFLY app to show travel readiness based on their results.

The **Clark County Medical Society** held its 67th installation gala to honor incoming president **Staci McHale**, MD, as well as the 2021-22 board of trustees. **Nicholas Fiore**, MD, will serve as the president-elect while **Deborah Kuhls**, MD, will be named the past president. **Derek Meeks**, DO, will be the secretary and **Thomas Hunt**, MD, is the new treasurer. **Larry Lehrner** will

serve as the delegate chair to round out the executive council.

Volunteers in Medicine of Southern Nevada will host its 12th annual **Hands Together** event on Oct. 23 at the **Venetian**. Volunteers in Medicine provides quality integrated health care and support for people without access to health care in Southern Nevada within a culture of compassionate caring. Learn more at vmsn.org.

Nathan Adelson Hospice's Bonnie Schreck Memorial Complementary Therapies Program—created in 1999 to address, and provide comfort, to patients experiencing high levels of emotional stress and anxiety associated with end-of-life issues—has expanded to now include sound therapy. These therapies offer a perfect complement to traditional medical treatments, and recent studies show that they can reduce stress and anxiety, decrease depression, and increase oxygen absorption, helping patients feel more comfortable, soothed and relaxed. Additional complementary therapies offered at the hospice include guided imagery/meditation, reflexology, aromatherapy, reiki, art, pet and massage therapy.

The **Candlelighters Childhood Cancer Foundation of Nevada** honored three Candlelighters kids and families for their courage, resilience and strength, and four community supporters for their commitment to ensuring Candlelighters beneficiaries receive the help they need during its Everyday Extraordinary Breakfast. Honorees included the **Carvahlo, Duran and Nordstrom** families, and the **Robert Coomer Group-Celebrity Home Loans, Jeff Helvin, Stage House and Comprehensive Cancer Centers of Nevada**. During the event, Comprehensive also presented a \$10,000 donation to the foundation. Join Candlelighters at its next event, the Superhero 5K, to be held in-person and virtually on Sept. 18. Learn more at candlelightersnv.org.

Palo Verde High School is the latest local school to launch a **Hope Squad**, which is being backed by the local leading employee benefits advisory firm, **Coreprime**. Hope Squad is a peer-to-peer suicide prevention program. The student members are nominated by their classmates as trustworthy peers and trained by advisors. The program reduces youth suicide through education, training and peer intervention. "As mental health remains a serious threat to community members, including our youth, the development of Hope Squads on local school campuses is vital to many students' well-being," said Coreprime founder and President **Matt Harris**. Hope Squad members strive to help create a safe school environment. They help to promote connectedness, support anti-bullying, encourage mental wellness, reduce the mental health stigma and prevent substance misuse.

To address the disparity in the number of Black and African Americans in Clark County who have received COVID-19 vaccinations, **Clark County** and the **Southern Nevada Health District** launched the "Back to Life" Vaccine Awareness Campaign. Consisting of a multimedia campaign, community events, grassroots outreach and social media efforts, "Back to Life" focuses on encouraging Black and African American residents to take the COVID-19 vaccine; understand the importance of being fully vaccinated; counter vaccine hesitancy; and identify barriers that prevent access to vaccinations in some of Southern Nevada's hardest hit areas from COVID-19. For more information, visit clarkcountynv.gov/backtolife.

Health care provider **Optum**, with the **Kirk Kerkorian School of Medicine** at **UNLV**, established the "Optum **Dr. Tony and Renee Marlon** Endowed Chair in the Department of Orthopaedics," with a pledge of more than \$1.2 million over five years. Dr. Tony and Renee Marlon generously donated a match to those funds, for a total of \$2.5 million. This public/private partnership



Volunteers from **Southwest Medical**, in partnership with **Optum Care** and **One World Surgery**, traveled to the Dominican Republic in April to provide much-needed care to communities in dire need of medical support. During this primary care mission, health care providers and staff addressed acute and chronic health conditions such as parasites, respiratory problems, skin fungal infections, diabetes and high blood pressure. They served about 100 patients each day. One World Surgery is a global not-for-profit organization that hosts weeklong primary care medical missions in the Dominican Republic and Honduras.

is the first endowment chair for the school and will be instrumental in supporting and promoting the department of orthopaedics as well as orthopaedic education and research in Nevada. Endowed chairs are financially supported by the revenue from an endowment and assist medical schools in the growth of a department by investing in both education and research initiatives.

Four **Valley Health System** hospitals achieved certification as a Gluten-Free Food Service program, joining a handful of other hospitals in the United States to achieve this status. The Food & Nutrition teams of **Centennial Hills**, **Desert Springs**, **Summerlin** and **Valley** hospitals met the rigorous standards and expectations for safety required to achieve this honor. The GFFS validation program is affiliated with the **Gluten Intolerance Group**, a nonprofit organization that has been serving the

needs of the gluten-free community for over 45 years.



Hernandez

dean for academic affairs at **Khalifa University**, College of Medicine and Health Sciences, Abu Dhabi. Hernandez received his undergraduate degree at **Johns Hopkins University** and MD at **Tulane University** School of Medicine. He replaces **Dr. Sam Parrish**, who recently retired.

Dr. Robert Hernandez is the new associate dean for student affairs and admissions for the **Kirk Kerkorian School of Medicine at UNLV**. Hernandez was most recently founding associate

Focused on improving health equity, **Health Plan of Nevada** and its parent company, **UnitedHealthcare**, awarded the **Southern Nevada Community Health Center (SNCHC)** a \$250,000 grant to provide breast and cervical cancer screenings, preventative services and family planning services to Clark County residents, with focus on uninsured and under-insured females. SNCHC sub-awarded **Las Vegas Paiute Nation** \$75,000 to connect women to care. This initiative demonstrates UnitedHealthcare's efforts to address health equity, promote positive health outcomes and expand access to all. The company is also investing in food, transportation and social isolation programs, including \$80 million supporting minority populations impacted by COVID-19.

The **Kirk Kerkorian School of Medicine**

Continued on page 58

HCO Notes continued

at **UNLV**, which recently graduated its first class of physicians, remains on track to have its first permanent building completed by the summer of 2022. Construction began in October on the \$150 million, 135,000-square-foot, five-story facility, which, like the medical school itself, carries the name of the gambling icon-philanthropist. The first building on what has been envisioned as a health sciences campus, it is located on a nine-acre parcel near downtown Las Vegas, in the heart of the **Las Vegas Medical District**.

Comprehensive Cancer Centers is the official cancer center partner of the **Women's National Basketball Association's Las Vegas Aces**. Together, Comprehensive and the Aces aim to promote breast cancer awareness and raise money through "Every Point Counts," in which Comprehensive will donate \$20 from every free throw made during each home game to **American Cancer Society** and **Making Strides Against Breast Cancer**. During

the Aces' 2019 regular season and first-ever playoff run, the campaign raised more than \$20,000 to allow the American Cancer Society to provide vital services to cancer patients, including transportation to appointments and emotional support groups.



De Andrade

The statewide **Nevada Dental Association** welcomed **Ed De Andrade**, DDS, as its new president. De Andrade specializes in periodontics and dental implantology and takes great pride in providing his patients the best dental care possible at **Anthem Periodontics and Dental Implants** in Henderson.

Meadows Eye Physicians and Surgeons hired two new providers and is



Ortiz



Reddy

opening their fourth office location in the Las Vegas Valley. **Dr. Isaac Ortiz**, OD, is a Spanish-speaking comprehensive eye care provider who has been caring for patients in Southern Nevada for over five years. **Dr. Dave Reddy**, MD, is a cataract surgeon who joins Meadows Eye after completing his training at **William Beaumont Hospital** in Michigan. Drs. Ortiz and Reddy will be seeing patients in all Meadows Eye clinical offices, including the new North Las Vegas office at 5115 Camino Al Norte.

Anthem Hills Pediatrics

Anthem Hills Pediatrics would like to **CONGRATULATE BOTH DR. KIM LAMOTTE-MALONE and DR. INEADA OKAFOR** on winning **VEGAS INC DOCTORS 2021**

Anthem Hills Pediatrics
871 Coronado Center Drive Ste. 141
Henderson, NV 89052
(P) 702-566-2400
WWW.ANTHEMHILLSPEDIATRICS.COM

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