



NASSAU COUNTY MEDICAL SOCIETY

The Pulse Point

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CONQUERING THE OPIOID CRISIS: HOW TO FIGHT BACK

In the 1990s, pharmaceutical companies assured physicians and others in the medical field that patients would not become addicted to opioids. Before the medical community became aware of how highly addictive opioids could be, the increase in prescribed opioids sparked the misuse and overuse of legal and illegal substances throughout the United States. According to the National Institute on Drug Abuse, this directly contributed to the 50,000 US overdose fatalities in 2019. The COVID-19 pandemic disrupted daily life, including recovery and treatment options, which consequently heightened the risk for relapse and overdose-related deaths.

No two opioids are the same. Morphine, codeine, and oxycodone are all medically prescribed substances that aid in pain relief, while the use of heroin and fentanyl was made illegal due to their high potential for abuse rather than medical purpose (Continued on page 5).



LET'S CONNECT

Follow us on Facebook, Instagram, LinkedIn, and Twitter using the handle @MedicalNassau to stay up to date on NCMS news and health awareness days that are important to our community. Subscribe to our YouTube channel to view our growing library of webinars, in case you might have missed any!

MEMBER OF THE MONTH

Is there a member of NCMS who has done outstanding work in their medical practice and deserves recognition? Send us an email to nominate the next Member of the Month.

February: [Donna-Marie McMahon, D.O. FAAP](#)

March: [Mr. Michael Osei, Second-Year Medical Student](#)

April: [Gerald Ente, MD, FAAP](#)

VIRTUAL EVENTS

Latest Events:

March: [Coloring a Quarantined, Social Distanced, and Vaccinated World for Children's Understanding](#)

April: [Coping With COVID - NY Project Hope](#)

ENDEMIC COVID-19 BY GERALD ENTE, MD

Finally, Covid-19 has slowed down in the U.S. Death rates are down by 31%. Hospitalizations are down by 44%. Daily new cases are down by 43%. Vaccination daily rates are down (not a good thing). The virus is now endemic, which means it is in a steady state. Its numbers are neither increasing nor decreasing. Americans are now too complacent (my opinion) for several reasons. Although many of the experts are predicting an end to the COVID pandemic, no one knows for sure what our future will actually be. Officially, we have not yet met herd immunity. Presently, 65% of all Americans are fully vaccinated, including 89% of Americans over 65 years (fully vaccinated does not include a booster). But this is not considered enough to reach herd immunity. However, these numbers do not include natural immunity gained after surviving this viral disease. On February 18, 2022, according to the Palm Beach Post (USA Today), "73% of US has omicron immunity." Other estimates are that over 40% of Americans have had this disease. As of the end of February 2022, 140 million Americans have had this virus according to blood tests (showing antibodies from infection) done by CDC. (These numbers do not jive with my thinking) (Continued on pages 2, 3, and 4).

ENDEMIC COVID-19 BY GERALD ENTE, MD

Much of the world shows split data. Many areas in the USA are getting back to normal living while elsewhere within the USA hospitals are full, closing, and overworked. Many countries are in better shape while China, Japan, Fiji, Brazil, New Zealand, and other countries in Europe are surging with an Omicron variant known as BA.2. (This reopens the pathway for Covid to re-enter the USA.) Even though the entire world believes in the efficacy of vaccines, my state, Florida, does not plan to recommend the vaccine. Politicization has turned dealing with Covid-19 into that of the red states and that of the blue states. (I think this is disgraceful.)

The only good thing that comes from being 2 years into this pandemic is that many studies are coming to fruition. We now know how the COVID-19 virus destroys the sense of smell. This hallmark of the disease is called anosmia and occurs in many infected people. The virus cannot enter the specific neurons (nerve cells) that detect odors because neurons do not contain the proper receptors. They do enter neighboring supporting cells lining the nasal membranes, which then shed the virus and die. In response to this, immune cells flood the area attempting to kill the virus and protect the brain. This is another example of the immune response, inflammation, upsetting the architectural balance and indirectly creating the problem. Loss of smell is intimately, but not entirely, associated with loss of taste. It makes food taste like cardboard. This study on which this information is based was conducted at NYU, Columbia, Mt. Sinai, and several other medical centers.

The origin of this pandemic has been debated since the disease was first diagnosed in 2019. The W.H.O. (World Health Organization) has a 26-member (from 26 Nations) committee that has been trying to ascertain the exact origin of this pandemic. China has continuously prevented key information from becoming public. Hundreds of papers have been written in many languages on this subject. Recently the debate has been narrowed down to 2 theories: the virus escaping from a laboratory scenario vs the animal to human scenario. Finally, several excellent studies have just reported results that throw light on this issue. The escaping Wuhan Viral Laboratory theory is based on the fact that several virologists working there went to Wuhan Hospital with a viral disease looking like Covid-19 back in October of '19 and they had been studying coronaviruses. Recent studies point to the Wuhan seafood market as the origin culprit. There is proof that there were cages stacked at that market with raccoons, dogs, a lone red fox, and many varieties of bats. In December 2021, after the start of the pandemic, this market was closed down for four months. When the W.H.O. committee was allowed to go there, it found evidence of the Covid-19 virus persisting in the area where the cages of those animals had been. Photographic, biological, and genetic evidence pinpoint specific stalls. New genetic analysis pinpoints the time when not 1 but 2 spillovers jumped from 1 live wild animal (not a bat which was the old thinking) into people. This timing is a perfect fit with the large number of market workers who developed COVID in early December. These studies do not prove beyond a doubt that this theory is correct, but the present evidence favors the Wuhan seafood market as the origin with wild live animals as the zoonotic source of the pandemic.

Recently completed studies concerning the particular condition commonly referred to as Long COVID (also called post-acute COVID sequelae or PASC) show that there are 4 factors that are frequently seen in people who develop this complication: pre-existing type 2 Diabetes, Epstein-Barr virus (Infectious Mono) DNA in the blood, SARS-CoV2 RNA in the blood, and the presence of certain autoantibodies in the blood. It seems that there is more than a single cause for this condition. Once we find the cause we know where to look for the treatment. In people with autoantibodies (antibodies that damage their own bodies), whose immune systems may be overrun with excessive or abnormal inflammation, certain anti-inflammatory drugs might help. People with Epstein-Barr (I.M.) risk factor (after having Infectious Mono, it often remains dormant in the body), may re-activate with COVID because of some "dysregulation" problem in the highly complex immune system. If the symptoms persist because of an overactive immune system, the treatment will include medications that suppress the immune system. Someone with remnants of COVID RNA in his/her blood should not receive these suppressive drugs. The Israelis reported that Long COVID symptoms are less likely in fully vaccinated people. A giant new study shows that brain fog, depression, and anxiety frequently persist for more than 1 year after the acute infection. Another new study speaks about using trained dogs to 'sniff out' Long COVID in sweat samples with over 50% accuracy. One-third of seniors over 65 are at risk to develop at least 1 symptom of Long Covid. New research for this new disease abounds.

A new, low-cost, patent-free vaccine, called Corbevax, has recently been developed by two researchers at Texas Children's Hospital. Dr. Peter Hotez, a pediatrician, and Dr. Maria Elena Bottazi, a virologist, developed this to vaccinate all the people of the world, thus ending the inequity of the vaccine global gap. They realized that the only way to protect all the people is to vaccinate everyone because as long as the virus replicates anywhere and therefore persists, it will mutate and create more variants. Up to now, poor nations have been at the mercy of donations from rich nations. (Dr. Fauci has said that for every dose of vaccine given in the USA, we donate 3 doses of COVAX to be distributed in poor countries.) Corbevax will be given free of charge to vaccine manufacturers and is expected to be a long-term solution to this inequity. Dr. Hotez and his colleague have been nominated for the Nobel Peace Prize.

'**Test-to-Treat**', a new White House initiative has recently been launched in March. This allows **high-risk patients** with COVID-19 symptoms to be tested at certain pharmacies and clinics and within 15 minutes to receive **free anti-COVID pills** if

ENDEMIC COVID-19 BY GERALD ENTE, MD

positive. Oral treatment at present must be started within 5 days to be effective. The program is launching at several hundred sites with plans for growth. The NYS program began on March 7th. Sites may be found on the **COVID-19 Therapeutics Locator**.

The fourth dose (the 2nd booster) is getting much press these days. France has launched it for those over 80. Israel gives the 4th dose to health workers and others at risk as well as seniors over 60. Sweden gives the 4th dose to those over 80, and those in nursing homes. Chile gives it to those over 55. The Health Ministry in the UK states that the 4th dose triples the protection from a serious illness for those over 60. Immunocompromised people, who are both more susceptible and who get a poorer immune response to the vaccine, should also receive a 4th dose. Pfizer is asking our government to authorize this shot for adults over 65. Most people may not need the 4th dose, but Omicron has produced a waning antibody level which drops down 50% after six months. T cells are the memory cells, which are the long-term protectors against future infection. This fourth dose has been shown to restore antibody titers peak post third dose levels but does not stimulate T cells.

Quick facts:

- **Ukraine war is** expected to induce surges of COVID-19, as well as other infectious diseases. The viruses and bacteria take advantage of all the horrible conditions produced by war and thrive.
- Parents are totally confused about **vaccinations for their children** because of conflicting data from various organizations.
- NYS has passed a law-making **faking of COVID vaccination cards** a class A misdemeanor.
- US Army reporting early work on a **COVID vaccine for all variants**. Within 5 years, it is expected that we may have a core vaccine that will be effective against all or most COVID variants.
- A 56-year-old Turkish man with leukemia has recorded **the longest continuous COVID-19 positive testing** for 14 straight months.
- **40 new billionaires** got rich fighting COVID, mostly making vaccines, personal protective equipment, or other medical products.
- The **Russian Flu Pandemic** in 1889 probably was caused by a coronavirus.
- **Unvaccinated seniors** are 50 times more likely to be hospitalized than boosted peers.
- In 1 week in January 2022, **more than 1 million kids** were diagnosed with COVID.
- **Full approval** was given to Moderna's vaccine in February 2022.
- **Strained US hospitals are** bringing foreign nurses and national guard troopers to assist 892 US hospitals that are at the brink of closing because of financial and staffing difficulties.
- **One nasal droplet** is enough to infect a human being.
- **Outdoor airflow** and **indoor ventilation** seriously avert viral disease.
- **Foods that we eat affect the risk of developing COVID-19:**
 - a. Coffee, vegetables, and breast milk lower the risk by 10%.
 - b. Hot dogs and other deli meats increase the risk by 10%.
 - c. Fruit, tea, and red meat have no effect.
- Even mild cases may cause brain changes, loss of brain volume (gray matter and tissue), and loss of cognition. This may also cause changes in personality and behavior. It stimulates many chronic diseases, including chronic kidney, lung, and heart disease.
- Special Omicron-targeted vaccines do not appear to give more protection than the original vaccines.

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- Over 200,000 US children have lost a parent or caregiver. .
- Even a mild castoff of COVID disease increases the **risk of heart disease** up to 1 year later.
- Many new studies again show that **vaccines given to pregnant women protect newborn babies**. COVID disease increases the risk of pregnancy complications. Human breast milk retains its COVID antibodies for up to 6 months after vaccination
- Record number of patients caught COVID in U.S. hospitals during the month of January 2022 (4,700 people).
- COVID disease **damages the lungs of survivors**. It scars the air-sacs, which then may cause difficulty with oxygen transfer into the bloodstream.
- **Coronacoaster**, a new noun, meaning the ups and downs of this pandemic.
- COVID disease is **associated with PTSD in family** members who are hospitalized.
- CDC is **updating and increasing time intervals** between mRNA vaccine shots to 8 weeks, especially for males 12-39 years old. (This increases peak booster response in all and decreases the risk of myocarditis in males.)
- **Risk of 2nd immediate allergic reaction to the vaccine is low. (0.18%)**
- **Omicron is infectious for at least 6 days.**

The known global toll of pandemic deaths is over 6 million according to Johns Hopkins University. **COVID-19 is not going away**. We may be easing up on our restrictions, but vaccination and treatments are still needed to prevent future infections. Wastewater surveillance in the U.S., as of March 15, 2022, showed a recent increase in viral levels. Add this to the slight increases in new cases last week due to the easing of safety precautions and the easy transmissibility of Omicron and its BA.2 variant suggest a surge in COVID-19 cases in the near future.

Please remember that masks save lives. Yesterday a friend of mine went out with his girlfriend and on the way passed his wife. She didn't recognize him because of his mask. His mask saved his life. **MASKS REALLY DO SAVE LIVES (so does good ventilation and frequent hand washing).**



WE ARE LOOKING FOR MEMBERS TO JOIN AND PARTICIPATE IN OUR PRE-EXISTING AND NEW COMMITTEES!



Legislative Committee

Let's review and evaluate existing legislature and recommend courses of action where change is needed. Please join this committee to play a role in providing justice to physicians and ensuring ethical goodness in the medical field.



Equity and Inclusivity Committee

Let's use this present moment to create a more inclusive future in medicine for doctors, patients, and everyone in between. Are you dedicated to positive change and empowering others from all walks of life? Join this committee today.



Public Health Committee

Let's analyze, discuss, and promote the issues that matter. If you have a passion for public facing issues regarding healthcare, and you would like to meet with like-minded people, this is the committee for you.

CONQUERING THE OPIOID CRISIS: HOW TO FIGHT BACK

Methadone, Buprenorphine, Suboxone, Naloxone, and Vivitrol play a role in substance abuse treatment.¹ When examining the statistics, we see a 44% rise in opioid deaths in 2020, which accounted for nearly 12 deaths every day.² However, the problem lies not within the numbers but in the long-lasting impact of families who lost loved ones and victims who lost years of their lives to addiction.

Moving forward, our focus, as the medical community, should lie in assisting victims to recovery and preventing deaths. In an article published by the American Association of Medical Colleges, the President, Robert J. Sokol, MD, and Executive Vice President, Kevin Kunz, MD, of the Addiction Medicine Foundation wrote on implementing education to train and prepare future doctors to address the ongoing opioid epidemic. While more physicians who specialize in addiction medicine and addiction psychiatry are needed, every doctor can play a role in rectifying this public health issue. "All physicians—not only those who plan to specialize in addiction medicine or pain medicine—must be able to recognize the signs of opioid addiction and other substance use disorders, so they can refer patients to addiction or pain specialists when necessary."³

On a local level, we are inviting you to learn more about how you can get involved and save the lives of your patients who may be struggling. At our NCMS Spring Membership Meeting, the Long Island Council on Alcoholism and Drug Dependence (LICADD) will join us and speak on the opioid crisis. The LICADD is a nonprofit organization that aids in the prevention and recovery of drug and alcohol addiction and pushes its clients to reach their full potential. They will address: how this issue affects different age groups, how we can respond and advise families to respond in the case of overdose, what we can look for in terms of the warning signs of addiction, and how we can support our physician colleagues who may be struggling as well.

We hope that you will join us on May 26th at 6 PM to have your questions answered and grow your knowledge to help save lives.

¹ Hon. William Cherry and Stephen J. Acquario, "A Primer on NY's Heroin Epidemic," July 2016, <https://www.nysac.org/files/NYSAC%20Heroin%20White%20Paper2.pdf>.

² New York State Department of Health, "New York State - County Opioid Quarterly Report," April 2022, https://www.health.ny.gov/press/releases/2022/2022-04-04_qtr_opioid_report.htm.

³ Robert J. Sokol, MD and Kevin Kunz, MD, "Training Future Physicians to Address Opioid Crisis," September 2017, <https://www.aamc.org/news-insights/training-future-physicians-address-opioid-crisis>.

NOMINATING COMMITTEE ANNOUNCES BOARD CANDIDATES

A slate of candidates for the 2022-2023 Executive Board is being presented to the membership by the NCMS Nominating Committee:

Ronald Menzin, MD (Chair)

David Podwall, MD

Anthony J. Battista, MD

Robert Schreiber, MD

The 2022-2023 Nominating Committee Slate of Candidates

Qualified leadership is essential to NCMS's success. In the exciting years ahead, it is elected leadership that will shape the future policies and programs of the Society.

In accordance with the Bylaws of the Nassau County Medical Society, the Nominating Committee reviewed all prospective nominees, and selected those candidates who, in their judgment, best meet the qualifications to effectively serve as Officers of the NCMS Board



David Podwall, MD
Neurology
President

Dr. David Podwall practices general neurology, with a subspecialty in neuromuscular diseases. He is certified by the American Board of Psychiatry and Neurology and the American Board of Electrodiagnostic Medicine. He has held several positions in the American Medical Association, Medical Society of the State of New York, Nassau County Medical Society, and the Nassau Academy of Medicine.

Currently, Dr. Podwall is a Clinical Assistant Professor of Neurology at the Zucker School of Medicine at Hofstra/Northwell. He is an attending physician at North Shore University Hospital in Manhasset, NY, and St. Francis Hospital in Roslyn, NY.

Dr. David Podwall graduated from Cornell University with a Bachelor of Science, with distinction in neurobiology. He received his M.D. degree from the Albert Einstein College of Medicine and was the recipient of the Alfred Angiest award for excellence in pathology research.

Dr. Podwall completed his internal medicine internship at the Mount Sinai School of Medicine and completed his residency in neurology at The Neurological Institute of Columbia Presbyterian Medical Center.

After residency, Dr. Podwall completed a neuromuscular fellowship at Columbia and acquired extensive experience in electromyography (EMG). While at Columbia he had multiple publications, including two reviews of diabetic neuropathy. He has published in such journals as: Current Neurology and Neuroscience Reports, The Neurologist, Journal of Neurology, Cancer Investigation, Journal of Child Neurology, Ecotoxicology and Environmental Safety, and Medical Mycology.

Dr. Podwall has continued his academic career serving as the Principal Investigator on numerous clinical trials in the area of Alzheimer's and dementia. He has also been recognized for his outstanding teaching by the Department of Medicine at North Shore.

Dr. Podwall has been recognized as one of New York's "Top Doctors" by Castle Connolly as well as New York Magazine's "Best Doctors."



NOMINATING COMMITTEE ANNOUNCES BOARD CANDIDATES



Robert Schreiber, MD
Pulmonology
President-Elect

Robert T. Schreiber MD, FCCP joined Nassau Chest Physicians, P.C. in July 1986. He completed his undergraduate education at Emory University, earning a B.S. degree in Biology in 1976. He pursued his medical education at the State University of New York-Downstate Medical Center, College of Medicine and received his Doctor of Medicine degree in 1980.

In 1983 Dr. Schreiber completed a three-year residency in Internal Medicine at Baltimore City Hospital, an Affiliate of Johns Hopkins University. Following his residency training, he pursued a three-year fellowship in Pulmonary Medicine at the University of North Carolina-Chapel Hill-North Carolina Memorial Hospital which he completed in 1986.

He is Board Certified in Internal Medicine and Pulmonary Diseases by the American Board of Internal Medicine. He also achieved Board Certification in Critical Care Medicine in 1989 and recertified in 2000 and 2010.

Dr. Schreiber is on the professional staffs of St. Francis Hospital in Roslyn NY, North Shore University Hospital (Manhasset and Plainview, NY), and St. Joseph Hospital in Bethpage NY. He is also a Clinical Assistant Professor of Medicine at Hofstra University Medical School.

Dr. Schreiber holds the following positions:

- > Medical Director of the Surgical ICU at St. Francis Hospital
- > Member, Executive Board, Nassau County Medical Society
- > Member, Nassau County Medical Reserve Corps
- > Fellow of the American College of Chest Physicians
- > Member of the American Thoracic Society and the Society of Critical Care Medicine.

Dr. Schreiber is particularly interested in the management of asthma and COPD-chronic obstructive pulmonary disease.



Ellen Braunstein, MD
Neurology
Vice President

Dr. Ellen J. Braunstein is a board-certified physician, specializing in Neurology. She is currently in private practice in Woodmere, NY, providing all phases of neurological care.

She has been honored with numerous medical practice awards, including “America’s Top Physicians,” “Leading Physicians of the World,” and “Top Doctor Award.”

Dr. Braunstein has held various positions in multiple university health care systems throughout Nassau County, including Medical Director of the Multiple Sclerosis Center at Mercy Hospital of Catholic Healthcare Services. She is a past president of the Nassau County Medical Society, and ten years later she still demonstrates the energy and commitment necessary to help steer its mission forward.

Through the years she has served the society as chairperson of the “Bylaws” committee and is an active member of the “Board of Censors,” “Peer Review,” and “Communication/Media” committees. She is a member of the House of Delegates at the state level and has helped to lead successful state committees on “Independent Practices” and “Health Systems Reform and Implementations.” Dr. Braunstein crosses over into the public health sector as well, where she is the Chair of the Nassau County Department of Health. She is part of the Medical Reserve Corps, supporting all communities in Nassau County through 9/11, Super Storm Sandy, and Flu vaccination programs.

She is a graduate of Hofstra University, where she met her husband, and the Chicago Medical School. Dr. Braunstein completed her Internal Medicine Internship at the Mount Sinai Hospitals in New York City and the Neurology residency training program through Cornell University at North Shore University Hospital and Memorial Sloan Kettering Cancer Center, attaining chief residency status. Dr. Braunstein looks forward to many more years of service in our medical communities and embraces the challenges ahead.



NOMINATING COMMITTEE ANNOUNCES BOARD CANDIDATES



Joel Portnoy, MD
Otolaryngology
(Ear, Nose & Throat)

Secretary

Dr. Joel E. Portnoy, a Long Island native, attended SUNY Upstate Medical University, in Syracuse New York, where he earned his medical degree and completed his residency in Otolaryngology - Head and Neck Surgery. He then completed his fellowship in Laryngology and Care of the Professional Voice at Drexel University College of Medicine.

Dr. Portnoy is board-certified by the American Board of Otolaryngology - Head and Neck Surgery. His advanced training makes him among the only experts on Long Island specializing in the art and science of caring for the human voice. Dr. Portnoy is affiliated with the North Shore/ Long Island Jewish Healthcare System. Dr. Portnoy specializes in the care of the professional voice, voice restoration, and the treatment of other complex adult and pediatric voice and swallowing disorders, in addition to treating other general ear, nose, and throat problems.

Dr. Portnoy is also affiliated with the American Laryngological Association, New York Laryngological Society, American Academy of Geriatric Otolaryngology.



Bernadette Riley, DO
Family Medicine

Treasurer

Dr. Riley, currently the Director of the New York Institute of Technology's Ehlers-Danlos Syndrome (EDS)/Hypermobility Treatment Center and an Associate Professor of Family Medicine at NYITCOM is a graduate of Fordham University (2001) and New York College of Osteopathic Medicine (2005). Dr. Riley has a special interest in treating hypermobile patients, in her current role she directs a multidisciplinary center for this specific population and participates in a variety of research projects, presentations, teaching, publications, and grants at the Center. She started the EDS 4th year elective and Congressional Health Policy Elective curriculums at NYITCOM. Dr. Riley is interested in Nutrition in treatment options for hypermobile patients and is currently enrolled in an MS program in Clinical Nutrition.

Prior to joining NYITCOM in 2017, she has served as Program Director of the Osteopathic Traditional Rotating Internship at South Nassau Communities Hospital, core faculty of their Family Medicine Residency, and Coordinator of Simulation Medicine. Prior to that, she served as Medical Director of the Long Beach Group Practice. Dr. Riley's postgraduate training started as an ENT/Facial Plastic surgery intern at the former Union Hospital, NJ and she completed two years of residency at the Union Hospital/Newark Beth Israel/St. Barnabas Medical Center before switching specialties. She finished her Family Medicine and Osteopathic Manipulative Treatment residency at Long Beach Medical Center (2010), where she served as Chief Resident and was awarded Family Medicine Resident of the Year. Dr. Riley is board certified in Family Medicine and Osteopathic Manipulative Medicine.

Dr. Riley has held numerous past academic titles of Clinical Assistant Professor at many medical schools. She serves as national faculty for the National Board of Osteopathic Medical Examiners (NBOME) since 2012 and is a member of their COMAT Family Medicine subcommittee and COVID-19 Topics Task Force.

In 2017, Dr. Riley achieved an Academic Qualification in International Medicine and Public Health from the Institute for International Medicine. In 2016, she became a Fellow of the American College of Osteopathic Family Physicians (FACOFFP). In 2013, she was inducted as a Fellow of the Institute of Leadership in Medicine (FILM) and ACOFP's Physician Leadership Institute and became a Certified Physician Leader. Dr. Riley has an interest in health policy and has been active in advocacy for many years. She was elected President of the New York State Osteopathic Medical Society (NYSOMS) in April 2022. She is an alumna of the American Osteopathic Association's (AOA) Training in Policy Studies (TIPS) Fellowship (2010). Dr. Riley graduated from the American Association of Colleges of Osteopathic Medicine (AACOM) Osteopathic Health Policy Fellowship (OHPF- 2020). She is on the Executive Committee for the Nassau County Medical Society (NCMS) and is a Board of Trustee for Nassau Academy of Medicine (NAM). She is a committee member of the Medical Society of the State of New York (MSSNY) Women Physicians and Physician Wellness and Resiliency Committees. She has been Chair of the Regional Osteopathic Conference (ROC-NY) since 2016. She serves as a yearly delegate for both the AOA's House of Delegates (HOD) since 2010, and as NYITCOM's delegate representative for MSSNY's HOD since 2019.



NOMINATING COMMITTEE ANNOUNCES BOARD CANDIDATES



Carmen Rodriguez, MD
Obstetrics & Gynecology
Member at Large



Edward Rubin, MD
Pain Management
Member at Large



Rachel A. Ruotolo, DO
Plastic Surgery
Member at Large

WE MOURN THE DEATH OF DR. LEWIS E. WILLIAMS III



The Nassau County Medical Society mourns the loss of Lewis E. Williams, III, MD. Dr. Williams was a member of the Nassau County Medical Society and a thoracic surgeon who introduced open heart surgery to the Nassau County Medical Center in the mid 1970s. He was a great teacher and patient advocate, who devoted his life to serving and healing others.

After fighting with medical challenges, Dr. Williams passed away peacefully in his home on Monday, April 25, 2022 and is survived by his wife, sister, children, grandchildren, and many other loved ones. His family and friends are in our thoughts during this difficult time. We will always remember and honor his contributions to the

medical community of Nassau County. May he rest in peace.

To find out more information on Dr. Williams' life and practice, please visit his online obituary [here](#).



Nassau County Medical Society & Nassau Academy of Medicine



Cordially invites you to attend the following webinar

Health Literacy, Limited English Proficiency & Cultural Competence

Presented by

Deanna Mirro Altmann, RNC and Shelly Kriete, CPHQ
MLMIC Risk Management Consultants

**Wednesday, June 15, 2022
6:00pm to 7:00pm**

Registration Link:

https://mlmic.zoom.us/webinar/register/WN_6Gp_8DJ8Q_Knd2R6CuAeFA

HEALTH LITERACY, LIMITED ENGLISH PROFICIENCY & CULTURAL COMPETENCE

Effective communication with your patients is a vital component of healthcare. However, challenges often arise as a result of low health literacy, limited English proficiency and cultural competence (HLEPCC). These challenges can lead to adverse outcomes including longer hospital stays, misdiagnoses and medication errors. Join us as MLMIC Risk Management consultants address the risks associated with HLEPCC and offer steps physicians can take to improve care and treatment and mitigate the risks of malpractice claims.

At the end of this presentation, the participants will be able to recognize the challenges associated with HLEPCC in rendering care; discuss the obligations associated with patients with limited English proficiency; apply best practices to communicate effectively and improve patient satisfaction; and, implement strategies to mitigate the risks associated with HLEPCC and reduce the potential for malpractice claims.

MLMIC is accredited by the Medical Society of the State of New York (MSSNY) to provide continuing medical education for physicians.

MLMIC designates this live internet activity for a maximum of *1.0 AMA PRA Category 1 Credit™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Sponsored by:





WE STAND WITH UKRAINE



The New York State Fraternal Order of Police Surgeons & Associates is collecting donations for Ukraine.

Please bring donations of **first aid kits, acetaminophen, ibuprofen, aspirin, bandages, gauze, tourniquets, and clothes** to our office at **666 Old Country Road, Ste 705, Garden City, NY 11530**. We truly appreciate your generosity in supporting our efforts to stand with Ukraine during this difficult time.

Stay Connected:

516-832-2300

www.nassaucountymedicalsociety.org

THE NASSAU COUNTY MEDICAL SOCIETY

cordially invites you to our
GATSBY THEMED PRESIDENT'S GALA

in honor of
IMMEDIATE PAST PRESIDENT,
ANTHONY J. BATTISTA, M.D.

JOIN US FOR A
ROARING GOOD TIME!

WHEN:
5•10•2022 at 6 PM

WHERE:
Oheka Castle
135 W Gate Dr,
Huntington, NY 11743

GALA ADMISSION FEE:
\$200 per person

RSVP:
visit our website to RSVP by 4•29•2022

Would you like to submit an ad or
well wishes to the President's Gala
Souvenir Journal?

Ask us for more details using the
contact information below.

CONTACT INFORMATION:

PHONE: (516) 832-2300

EMAIL: information@nassaucountymedicalsociety.org

WEBSITE: nassaucountymedicalsociety.org





You're Invited!

Please join the Nassau County Medical Society for our Spring Membership Meeting. We hope to see you there!

Date and time: May 26th, 2022 from 6-9 PM

Location: Inn at New Hyde Park
214 Jericho Turnpike
New Hyde Park, NY 11040



RSVP by
May 17th, 2022

phone: (516) 832-2300

