Historically, about 10% of NYU Langone Health’s 1.2 million patients have been residents of Long Island. But that number is sure to grow considerably now that NYU Winthrop, a 591-bed hospital in Mineola, is part of NYU Langone Health System. On August 1, the institutions officially merged, marking the culmination of a process that began more than two years ago and the integration of a vast network of clinical services that will expand and enhance healthcare for the 2.8 million residents of Nassau and Suffolk Counties.

“Successful mergers are made when like-minded organizations join forces,” says Robert I. Grossman, MD, the Saul J. Farber Dean and CEO of NYU Langone. “Our institutions share a dedication to quality and excellence that represents true synergy.”

Prior to its relationship with NYU Winthrop, NYU Langone had recruited more than 200 physicians in Nassau County to extend its ambulatory care network east of Manhattan, beyond Queens. “It became clear that we needed an outstanding local hospital to partner with, particularly for practices whose patients might require inpatient care,” explains Andrew Brotman, MD, senior vice president, vice dean for clinical affairs and strategy, and chief clinical officer. “In NYU Winthrop, we found an institution that not only shares our high clinical standards and our commitment to improving quality and safety standards, but also has a culture that’s a good fit with ours.”

Though NYU Langone’s main campus in mid-Manhattan is only about 20 miles from Nassau County, the drive can take up to two hours. “If you need to be hospitalized, you want the best possible care within arm’s reach,” says Joseph Greco, MD, senior vice president and executive director of NYU Winthrop, the hospital’s chief medical officer, and longtime chair of its Department of Anesthesiology. “NYU Langone’s Long Island residents now have access to an inpatient facility much closer to home.”

The merger capitalizes on the excellence both institutions share in numerous clinical areas, including cancer, stroke, diabetes, trauma, pediatrics, and transcatheter cardiac procedures.

Among the more notable benefits to Long Island residents is NYU Winthrop’s expanded organ transplant capability. Thanks to the expertise of NYU Langone’s (continued on page 3)
The newly accredited NYU Long Island School of Medicine (NYU LISOM) recently opened its doors to its first class of students, welcoming a new generation of aspiring physicians in its inaugural White Coat Ceremony—an emotionally moving rite of passage for students entering medical schools the world over. This year’s ceremony marked the official kick-off of New York University’s flagship medical school on Long Island based at NYU Winthrop. Full-tuition scholarships were offered to all students at NYU LISOM, regardless of merit or financial need.

The inaugural White Coat ceremony included each of the 24 new students reciting a version of the Hippocratic Oath—acknowledging their commitment to serving humanity with honor, compassion, and dignity, after which a white medical coat was draped upon each students’ shoulders.

The event took place at the Mineola campus of NYU Winthrop Hospital. During the ceremony, students were surrounded by family and friends, as well as school leadership and faculty.

“NYU Long Island School of Medicine is the realization of a bold vision to make medical school attainable—without financial hardship—to attract the brightest and best students from diverse walks of life into the medical profession,” said Andrew Hamilton, PhD, president of New York University.

“Our inaugural White Coat Ceremony is an important milestone as our new students’ journey toward becoming outstanding primary care physicians who we hope will one day serve the regional area.”

The incoming students at NYU LISOM come from all over the country, including the Tri-State Area (including one from Mineola) to Pennsylvania, Massachusetts, Michigan, Oregon, and beyond; and from top universities including Harvard, Duke, Vassar, and NYU, as well as schools in the SUNY system—including Binghamton and Stony Brook. Nine incoming students are male and 15 are female, the latter including two nurses (one of whom is a U.S. Air Force veteran) who decided to become physicians. Students come from all different backgrounds; one shared a story about how her Nigerian parents inspired her to become a primary care physician so that she could give back.

NYU LISOM received over 2,400 applications for the 24 available slots this year. It has already begun recruiting for next year’s class, which will include 32 students. The year following, the class size will expand to 40 students and be capped at that number in subsequent years.

“The students in our inaugural class are among our physician leaders of the future, NYU Long Island School of Medicine Welcomes First Class at White Coat Ceremony Full-Tuition Scholarships Offered to All Students

Help Unlock the Power of Medicine: Philanthropy Supports Full-Tuition Scholarships and Medical School Facilities

The NYU Long Island School of Medicine strives to improve access to primary care for residents of Long Island and the metro-New York area, and you can be part of that noble effort. The medical school offers ways for donors to designate philanthropic support to initiatives including endowed and spenddown scholarships, professorships, and school facilities. We invite you to support this pivotal effort as we seek to improve the quality of people’s lives, the vibrancy of our communities, and deliver the benefits of primary care to our region. For more information about our full-tuition scholarship campaign and donor recognition opportunities, please contact the Office of Development at (516) 663-2706.
and many overcame remarkable odds to get where they are today," said Founding Dean Steven Shelov, MD. “We’re proud to be stewarding them toward their goals of becoming primary care physicians. Our exceptional clinical curriculum will be further enhanced by very strong mentorships from school leadership and faculty.”

NYU Long Island School of Medicine is the second medical school to open under the auspices of NYU. The new school’s curriculum, with its primary-care focus, will concentrate on internal and community medicine, pediatrics, OB/GYN, and general surgery, as compared to more traditional four-year schools that tend to focus on other specialties. All students are offered a conditional acceptance to an NYU Winthrop Hospital residency slot upon matriculation; it is believed that NYU LISOM is the only school in the nation to offer such a conditional guarantee.

“In the decade ahead, there is expected to be a significant shortage of primary care physicians nationwide. NYU LISOM hopes to inspire its graduates to help fill that void in the New York metro area and on Long Island," said Steven B. Abramson, MD, chief academic officer at NYU Langone Health. NYU LISOM also offers an accelerated three-year curriculum, allowing physicians to get into the field of their choice earlier, during their most productive years, and with less debt. “The tuition-free initiative, along with the three-year curriculum, are critical milestones in transforming medical education and addressing the dramatic changes in the healthcare delivery system,” said Dr. Abramson.

To sustain its full-tuition scholarship initiative, NYU LISOM will follow the landmark model created at NYU School of Medicine when it became the first major medical school in the U.S. to offer full-tuition scholarships to all enrolled MD program students. NYU School of Medicine’s initiative is supported by philanthropy; NYU LISOM will adopt the same approach to fund its students.

“W hen you’re all done, you will be on the front lines of the noblest of all callings, which is to help your fellow person.”
—Ken Langone, chair of the Board of Trustees of NYU Langone Health, philanthropist, and co-founder of Home Depot

Phananthropists like Ken Langone have made full-tuition medical school scholarships possible.

Elevating Healthcare on Long Island
(continued from cover)

Transplant Institute, NYU Winthrop’s patients are now offered heart, lung, and liver transplants in addition to kidney transplants. While the actual procedures are performed at NYU Langone’s main campus in Manhattan, much of the pre- and post-operative care takes place at NYU Winthrop. “Before the merger,” Dr. Greco explains, “our patients had their transplants at hospitals we were not affiliated with. Now, they can be prepared for the operation at NYU Winthrop and return to their own community for recovery and rehabilitation.”

Wherever Long Island residents are treated within NYU Langone’s expansive system, they are ensured continuity of care through its electronic medical record system, known as Epic. By October, NYU Winthrop's patients will be fully integrated into Epic, making their electronic health record accessible to care providers across NYU Langone, including NYU Winthrop's physician practices and ambulatory care sites in more than 160 locations, and to patients via MyChart, a secure online portal. “Long Island residents not only have access to NYU Langone physicians closer to their own neighborhoods," says Dr. Brotman, “but these patients can flow seamlessly from one clinical location to another because each of their doctors will have full knowledge of their medical history.”

NYU Winthrop was Long Island’s first nonprofit hospital, founded in 1896 by a group of local physicians and concerned citizens. Originally Nassau Hospital, the hospital was later named Winthrop-University Hospital for a family that traces its roots to John Winthrop, the first governor of the Massachusetts Bay Colony. Today, NYU Winthrop serves several hundred thousand patients, who are now members of NYU Langone’s care network.

“We’ve always offered the high-level primary and specialty care of a major teaching hospital, along with the personal touch of a community hospital,” notes Dr. Greco. “Now, we’re part of a health system that offers ultraspecialized care—the most advanced therapies and procedures—to serve all the needs of our patients.”
An important discovery related to preterm births was made by Louis Ragolia, PhD, director of Biomedical Research at NYU Winthrop—and that discovery may hold the keys to predicting preterm births. Preterm births occur in approximately 400,000 pregnancies in the U.S. each year—15 million worldwide*—and are a leading cause of newborn deaths. Dr. Ragolia’s discovery, which NYU Winthrop has patented in the U.S. and Europe, involves a biomarker for predicting preterm births—meaning that it involves a substance that can be measured and that predicts an outcome. Developing a biomarker test that can identify the risk of preterm birth could improve the health management of these pregnancies. Such an advancement may also lead to further discoveries that help physicians better understand and prevent preterm births.

“NYU Winthrop’s biomarker represents a potential breakthrough in predicting preterm births, which may save lives and decrease the rate of life-threatening neurological issues in preterm infants,” said Dr. Ragolia.

Specifically, Dr. Ragolia’s discovery involves a gene that produces an enzyme in pregnant women. The enzyme is responsible for the synthesis of a lipid called “prostaglandin D2,” a hormone-like product that contributes to early contractions and preterm labor. Further work by Dr. Ragolia led to the full characterization of the enzyme and its clinical effects relative to the risk of early delivery and preterm birth.

On the heels of that discovery, NYU Winthrop has formed a collaborative research and development initiative with Progenity, Inc., a biotechnology company that is providing expertise to harness the full capabilities of this important discovery. NYU Winthrop granted Progenity an exclusive license to its patents, and the two organizations are collaborating on discovery studies to identify additional preterm birth markers.

“Combining the diagnostic test development expertise of Progenity with NYU Winthrop’s leading clinical center and state-of-the-art research facility strongly positions this partnership for success,” said Matthew Cooper, PhD, chief scientific officer at Progenity. “Progenity is continually striving to make healthcare more precise with new technologies supplying previously unavailable evidence informing critical care pathways. Novel tests for these prenatal conditions could reduce complications and provide better outcomes for mother and child.”

“Conditions like preterm labor and births are major contributors to morbidity and mortality for both the mother and newborn,” added Martin Chavez, MD, chief of the Division of Maternal-Fetal Medicine and Fetal Surgery at NYU Winthrop Hospital. “The successful development of this test could enable us to proactively manage and screen for the risk of preterm delivery rather than being reactionary. No one test should be used in isolation, but this biomarker panel for preterm birth could be a powerful tool.”

* World Health Organization
According to the American College of Surgeons, hernia repair is one of the most common surgical operations performed in U.S. hospitals. Now, following four years of tracking outcomes, NYU Winthrop Hospital announced that its use of minimally invasive robotics for repairing complex hernias has produced superior patient outcomes. The new robotic approach was introduced at NYU Winthrop by David Halpern, MD, chief the Division of General Surgery. Dr. Halpern has performed more than 100 of these operations, using daVinci robotics.

“This is a major advancement in the field of abdominal wall reconstruction, resulting in expedited patient recoveries,” said Dr. Halpern. “Previously, large, complex hernias would require a 10- to 12-inch incision, but with robotics the incisions are quite small. This means patients have shorter hospital stays, less risk of a wound infection—and markedly less pain.”

A report summarizing the improvements in patient outcomes was peer-reviewed and published in the Journal of the Society of Laparoendoscopic Surgeons. Key improvements to complex hernia repair using robotics included the following:

• Reduces the average hospital stay from six days down to 1.8 days.
• Reduces the wound infection rate since, rather than a big incision, the minimally invasive robotics only makes four to six small puncture wounds.
• Unlike open surgery, where the need for a large incision means that patients must go home with drains in them for about a month (to decrease fluid build-up and help healing), the use of minimally invasive robotics eliminates the need for drains; patients go home without them.
• Patients have less post-operative pain.
• There is an average cost savings of $6,000 per surgery compared to open repair.
• NYU Winthrop has seen no hernia recurrences to date.

Dr. Halpern also noted that the robotic procedure is particularly beneficial to patients who pose a BMI-dependent surgical risk and are unable to undergo a weight loss procedure before hernia repair, and very beneficial to patients with an increased risk of post-operative wound complications, such as those with a history of smoking or diabetes.

NYU Winthrop Hospital’s Hernia Center has a multidisciplinary team that collaborates on complex hernia cases to further improve outcomes. For more information, call 1-866-WINTHROP •

Dr. David Halpern has shown that using minimally invasive robotics to repair complex hernias reduces hospital stays from 6 days down to 1.8 days.
Westbury resident Juan Ventura was finding it increasingly difficult to manage his construction and landscaping work crews because he constantly needed to take breaks to use the bathroom—a common occurrence for someone with an enlarged prostate. He had to get up three or four times during the night as well, a disruptive situation for a married man with a young child. Thanks to an advanced new therapy called Aquablation—only offered in this region by NYU Winthrop Hospital—he’s now better than ever.

“Aquablation allows a very high level of control in operations aimed at alleviating symptoms from enlarged prostates,” said Joseph Jamal, MD, the robotic surgeon who introduced the procedure at NYU Winthrop—and treated Mr. Ventura. Dr. Jamal, who is the director of Robotic Urological Operations at NYU Winthrop and a partner in Advanced Urology Centers of NY, has performed over 1,000 surgical urology procedures using a robotic platform.

Dr. Jamal says that more than 50 percent of all U.S. men age 60 years and over suffer from enlarged prostates. An enlarged prostate is a noncancerous condition—technically known as benign prostatic hyperplasia (BPH)—that produces symptoms including frequent urination, an inability to empty the bladder, the need to urinate during the night, and loss of bladder control. The delivery system for Aquablation is the first FDA-approved surgical robot providing autonomous tissue removal for treating BPH.

The Aquablation technology combines three key elements to remove tissue safely, quickly, and precisely: real-time, multidimensional imaging for improved surgical decision-making; robotic execution for precision; and the power of a water jet—pulsating near the speed of sound—that is heat-free, thus avoiding thermal injuries that can occur with lasers. Dr. Jamal likens the water jets to pressure cleaners, or high-pressure ultrasonic cleaners used by dentists to remove plaque. Except in the case of Aquablation, the high-velocity water jets are removing prostate tissue to decrease enlarged aspects of the prostate that are causing urinary issues. The therapy also has the significant advantages of conserving anatomical structures associated with urine control and sexual function.

Dr. Jamal noted that for decades, a procedure called Transurethral Resection of the Prostate (TURP), has been the surgical gold standard for the treatment of BPH. In comparison, Aquablation therapy has demonstrated equivalent efficacy outcomes, an excellent safety profile, and a very significant reduction in sexual side effects.

“Aquablation offers a more holistic approach to treating men for enlarged prostates than traditional methods," said Aaron Katz, MD, chairman of the Department of Urology at NYU Winthrop Hospital. “In the past, men often had to choose between the lesser of two evils: relieve urinary problems but impact sexual function, or maintain sexual function but live with embarrassing and annoying urinary issues. Now, through this advanced procedure, resolving one side of the equation doesn’t have to negatively impact the other. This minimally invasive procedure also produces less scarring than traditional methods that rely on heated lasers to scrape away tissue and, in turn, less scarring reduces the need for secondary procedures." The surgical planning for Aquablation, including utilizing ultrasound and a cystoscope—a thin tube with a camera used to view the urethra and inside of the bladder, under anesthesia—takes approximately 20 minutes, while the water-jet ablation can be completed in under five minutes.

For more information about men’s health and treatment for BPH, call 1-866-WINTHROP.
NYU Winthrop Hospital received a donation of $50,000 from Mother Mary Breathe Easy, a West Hempstead-based non-profit foundation that funds research and is dedicated to raising awareness regarding Idiopathic Pulmonary Fibrosis (IPF). IPF is a progressive respiratory disease marked by thickening and stiffening of lung tissue, which causes scarring and changes the lung’s ability to function normally. The condition affects 200,000 people in the U.S. with more than 50,000 new cases diagnosed each year.* There is no known cure for IPF, the word “idiopathic” meaning "of unknown cause," and it was just such an unknown cause that prompted a Long Island family to search for a cure when its matriarch, Mary, was diagnosed with IPF several years ago. Since that time, the foundation, Mother Mary Breathe Easy, has raised a cumulative $150,000 that has been donated to NYU Winthrop for research into the pulmonary disease.

“We’re trying to open a different door into understanding this lung disease,” said lead researcher, Allison Reiss, MD, head of the Inflammation Laboratory at NYU Winthrop’s Biomedical Research Center. “The challenging part was ‘How do we get into the pathology of the lungs without being invasive?’

That’s where NYU Winthrop has innovated, and using a hand-held portable device, we are collecting the exhaled breath condensation of patients to then examine cell fragments.”

Droplets from exhaled breath contain a variety of biomolecules from the thin, fluid lining that covers the small and large airways along with the alveoli, the latter tiny air sacs that serve a key role in respiration. Under the guidance of Dr. Reiss, the Inflammation Lab team of Dr. Lora Kasselman and Ms. Heather Renna are using leading-edge technologies to analyze the breath samples.

Added Priya Agarwala, MD, attending physician in the Pulmonary Division of NYU Winthrop, “Our data from the exhaled breath condensation has shown a clear difference between patients with and without IPF. We have identified specific molecules, or microRNAs, that may hold the keys to better understanding IPF so that we may develop new therapeutic treatments.”

To make a contribution to support IPF, please visit www.nyuwinthrop.org/give or call the hospital’s Office of Development at (516) 663-3398 and dedicate your gift to Mother Mary Breathe Easy.

*Pulmonary Fibrosis Foundation

Several generations of Mary’s family join in presenting a $50,000 donation toward pulmonary research at NYU Winthrop Hospital.

Cancer survivor Peter A. Forman presented the medical staff at NYU Winthrop with a ship’s bell that serves as a symbol of hope in the hospital’s Oncology/Hematology Infusion Center. The bell is to be rung in celebration by patients—like Forman—who conquer cancer. Forman (right) finished his last leukemia treatment, then rang the bell to a thrilled crowd that included his wife and daughters, treating physician Jaime Andres Suarez-Londono, MD (left), and chief of the Division of Oncology/Hematology, Jeffrey Schneider, MD.
In an advancement for women diagnosed with breast cancer, NYU Winthrop Hospital now offers Hidden Scar surgery—an enhanced approach to breast cancer surgery that removes cancerous tissue but hides visible scarring. More than 65 percent of women who’ve undergone breast cancer surgery are said to be left feeling self-conscious and unhappy with the remaining scar.* Not anymore.

“This procedure will become the new ‘normal’ for breast cancer surgery,” said Virginia Maurer, MD, chief of Breast Surgery at NYU Winthrop and director of the Breast Health Program. “We’re proud to pave the way, introducing this important advancement to women on Long Island.”

Just ask Andrea, who discovered that she had breast cancer following a routine mammogram. “It sort of hits you like a brick—cancer.” Also very upsetting to her was that the lump in her breast was going to be difficult to remove without leaving a disfiguring scar.

“If I have a scar, it will always remind me that I had it [breast cancer], and that I could have it again.”

Andrea’s husband saw her palpable anxiety regarding how she’d look following surgery. “I just wanted her healthy...But this is such an intimate part of the body. I think what I feared the most is that it [the surgery] would change how she felt about herself.”

Then Andrea heard about the Hidden Scar program and after asking her doctor about it, knew this unique procedure, which would eradicate the breast cancer and still leave her feeling whole—was for her. Following her successful Hidden Scar procedure, she explained, “I don’t have a dimple or any kind of indication that something was taken out of me. Isn’t that amazing? I don’t have to look at the scar and remember.”

What is the innovation behind the Hidden Scar procedure? The approach involves a specially trained surgeon making a small incision—much smaller than with traditional breast surgery—to remove a tumor. The approach requires consistent illumination of the surgical cavity, which is guided by advanced photonics—a sophisticated amplification of light—that improves visibility within the breast cavity. This illumination provides enhanced visualization of the tumor so the specially trained NYU Winthrop surgeon can effectively remove it. The cancerous tissue is removed through that single incision, which is made in a hidden area, thus preserving the natural shape of the breast while reducing visible scarring. This small incision may be made in the natural crease beneath the breast; in the armpit hidden in a natural fold; or along the edges of the areola, which can be very desirable for some mastectomies, since it is a nipple-sparing technique. The Hidden Scar approach can be used both in a breast-conserving lumpectomy that removes only part of the breast tissue, or a mastectomy that removes all of the breast tissue.

Shubhada Dhage, MD, director of Breast Surgical Services and associate director of Breast Health at NYU Winthrop Hospital, said of the Hidden Scar approach, “Our goal is to go well above and beyond standards of care, and that includes helping a patient continue to feel like a whole woman by using the Hidden Scar procedure to minimize disfigurement. We not only take into account the safest and best breast cancer treatments, but also consider how a cancer diagnoses fits into a woman’s lifetime.”

Patients who undergo the Hidden Scar procedure experience optimal clinical and cosmetic outcomes and are at no higher risk of cancer recurrence than patients who undergo other breast cancer surgical techniques. The Hidden Scar procedure is available to most breast cancer candidates, with some exclusions based on the size and location of a tumor, breast shape, and breast size.

The procedure proved right for Kim, who is young and single, but unfortunately carries the BRAC gene mutation—as did her mother, who also fought breast cancer. Kim was told she had an 88 percent chance of getting breast cancer and opted for a double mastectomy via the Hidden Scar procedure.

(continued on page 12)
Swim Laps Go a Long Way for Child Life

Children and their families were eager to jump into the pools at the Hofstra University’s Swim Center at NYU Winthrop’s 18th Annual Swim-a-thon. Amidst the sounds of splashing, laughter, and lively music, adults and children alike enjoyed a healthy activity while raising essential funds for the Child Life Program at NYU Winthrop. This year’s event was a great success, raising nearly $32,000 for a vital program that utilizes supervised play and education to make the hospital experience as smooth as possible for young patients and their families. Special thanks to all those who attended and helped make the day such a success.

Families enjoyed a healthy activity while raising vital funds for a worthy cause at NYU Winthrop’s 18th Annual Swim-a-thon.

Ron Marino, DO, associate chairman of Pediatrics at NYU Winthrop, is joined by a Swim Committee Member Beth Spirakis.

A Cause to Celebrate Raises more than $160,000 for Child Life Program

In an outstanding show of support for NYU Winthrop’s Child Life Program, more than 300 guests gathered at The Garden City Hotel to enjoy an evening marked by fine dining and dueling pianos at the 22nd Annual “A Cause to Celebrate.” The event raised more than $160,000 for the program.

The event honored Glen Head residents Sam S. Jain and his wife, Vera Jain, for their advocacy toward quality medical programs for all patient populations. In addition to supporting the presence of a Child Life Specialist at NYU Winthrop’s Hempstead Pediatric Clinic, the family has made magnanimous contributions to the Emergency Medicine program as well as in support of the hospital’s excellent cardiology program. They share their philanthropy mindset with their three children, Sonia, Prajna and Krish. Additionally, Mr. Jain, the Founder and CEO of Fareportal, a travel technology company, spearheaded a coat drive collection among his staff for the benefit of the Hempstead Pediatric Clinic.

The theme of the evening was “Dueling Pianos”—an energetic piano “battle” between two internationally accomplished pianists, Henry Haid and John Arden. Attendees also had an opportunity to participate in a community auction and silent auction, featuring items donated by local vendors.

A Cause to Celebrate is a pivotal event that garners the community’s support for NYU Winthrop’s Child Life Program, which is dedicated to minimizing fear and providing young patients and their families with the optimal hospital experience. For more information about the Child Life Program at NYU Winthrop, call 1-866-WINTHROP or visit www.nyuwinthrop.org.

A Cause to Celebrate honorees, Sam S. Jain (right) and his wife, Vera Jain, (left) and their children, join with Leonard Krilov, MD, chairman of Pediatrics at NYU Winthrop.
To many, the name John F. Aloia, MD, is synonymous with NYU Winthrop Hospital. With 40 years of inspired vision and dedicated service to the hospital under his belt, it was only fitting for Dr. Aloia—beloved physician, researcher, mentor, and educator—to be honored with the Board of Directors’ 2019 Lifetime Achievement Award.

“It’s been said that ‘leadership is the capacity to translate vision into reality,’ and I think everyone in this room would agree—Dr. John Aloia is a man of extraordinary vision, outstanding leadership, and tremendous accomplishments,” said John F. Collins, president and CEO of NYU Winthrop Hospital during the June 18 ceremony.

A graduate of Creighton University, Dr. Aloia began practicing medicine immediately after completing medical school. “It was idealism that prompted me to go into medicine,” said Dr. Aloia. “When I meet people who are interested in pursuing medicine as a career, I tell them if you have that idealism, where you want to care for people, then it’s the greatest thing you can do with your life.”

After a brief stint as a captain in the U.S. Army Medical Corps., Dr. Aloia had a unique opportunity to measure total body calcium in humans at Brookhaven National Laboratory. He made several important discoveries while studying bone mass, uncovering racial differences in metabolism and the aging process. This ultimately led to great strides in research in the areas of osteoporosis and endocrine disorders, research that has continued throughout his career.

In 1978, Dr. Aloia came to what was then Nassau Hospital. His initial appointments as director of Medical Education and chairman of the Department of Medicine marked the first expansion of the hospital’s medical education program and a commitment to building the Department of Medicine with the highest caliber of medical staff. Dr. Aloia also established the Bone Mineral Research Center at NYU Winthrop, which has been the recipient of multiple National Institutes of Health and other investigator-initiated grants, and has participated in nearly every pharmaceutical trial for the prevention or treatment of osteoporosis over the course of the last several decades. He was appointed to the Board of Directors in 1999, and in the same year was named chief academic officer. His leadership was most pivotal in facilitating NYU Winthrop’s formal designation as a Clinical Campus of Stony Brook University’s School of Medicine in late 2011—a major achievement that enriched the academic culture and future of the hospital.

With Dr. Aloia’s great input and foresight, the 95,000 square-foot state-of-the-art Research and Academic Center at 101 Mineola Blvd. in Mineola was constructed. It opened its doors in early 2015 as a beaming symbol of the hospital’s position (continued on page 14)
When the medical staff leadership of NYU Winthrop Hospital learned about the impending retirements of Charles M. Strain, chairman of the Board of Directors, and John F. Collins, president and CEO, they wanted to do something special to honor the transformational leadership of both individuals over the past decade.

“It's important to do good and give credit to those who do good when you have the opportunity,” remarked Anthony Vintzileos, MD, chairman of Ob/Gyn at NYU Winthrop. It was Dr. Vintzileos who spearheaded the momentous effort to raise funds among the medical staff leadership in support of a portrait by master artist Daniel E. Greene as a means of honoring two men ready to take their rightful place in the hospital's Hall of Leaders.

The Hall of Leaders was conceived when the hospital's Research and Academic Center (RAC) in Mineola first opened its doors in 2015. It is a dedicated place to honor those who, through significant and distinguished service, represent the embodiment of the hospital's mission. Revered physician, mentor, and medical educator, John F. Aloia, MD, chief academic officer, was the first individual to be inducted into the Hall of Leaders for his long-term vision which led to the establishment of NYU Winthrop’s RAC—and ultimately paved the way for the NYU Long Island School of Medicine. His portrait, made possible by NYU Winthrop’s Administration, now hangs prominently outside of the Treiber Family Conference Center in the RAC.

Mr. Strain's and Mr. Collins’ contributions to NYU Winthrop, while serving in tandem over the past decade, have been many. “Their visionary leadership has placed NYU Winthrop in the position it is today—front and center for healthcare on Long Island,” said Joseph Greco, MD, Chief Medical Officer, during the June 27 portrait unveiling ceremony.

Now, as an emblem of their highly collaborative partnership and shared commitment to NYU Winthrop, a life-like portrait of the two men has been added to the prestigious Hall of Leaders. It is a symbol of their transformational leadership that advanced NYU Winthrop as a major academic medical center, developed the RAC, enabled the merger with NYU Langone Health, and inspired the creation of the NYU Long Island School of Medicine.

Surrounded by family members, friends, colleagues, and medical staff, both Mr. Collins and Mr. Strain were humbled by the medical staff’s thoughtfulness to have a permanent, lasting tribute to their service to NYU Winthrop Hospital.

“Tonight is a celebration of something that is unique in the healthcare field—a fantastic relationship between the medical staff, administration, the medical staff, and nursing staff. The care we provide at NYU Winthrop is superior to anything on Long Island because of our committed focus and strong vision.” — Mr. Strain, adding, “and a highly collaborative partnership between the board of directors, administration, the medical staff, and nursing staff. The care we provide at NYU Winthrop is superior to anything on Long Island because of our committed focus and strong vision.”

“Tonight is a celebration of something that is unique in the healthcare field—a fantastic relationship between the medical staff, administration, the medical staff, and board of directors that led us to where we are today,” added Mr. Collins. “I know NYU Langone Health shares a great vision for this hospital, and will lead NYU Winthrop to new heights in the future.”
Lyn Weiss, MD was named the inaugural chairman of the Department of Physical Medicine and Rehabilitation. Dr. Weiss has more than 30 years of expertise in rehabilitation medicine and is an industry trailblazer who was among the first-ever women (in 1996) to serve as chairman of a hospital’s rehabilitation department. In her leadership position at NYU Winthrop, she is aligning the services of the hospital’s Physical Medicine and Rehabilitation department with that of NYU Langone’s Rusk Rehabilitation, which for 29 consecutive years has been ranked by U.S. News & World Report as one of the top-10 rehabilitation programs in the country. NYU Winthrop will now provide Long Islanders with access to the same type of education, research, and stellar clinical services that have kept Rusk in the elite tier of rehabilitation programs for so long.

Long Islanders to benefit from non-surgical rehabilitative services on par with that of Rusk Rehabilitation, one of the top rehabilitation programs in the U.S.

"At Rusk Rehabilitation, we've seen the great value of a multidisciplinary team approach to rehabilitation medicine for patients facing not just physical, but social and emotional challenges," says Steven R. Flanagan, MD, the Howard A. Rusk Professor of Rehabilitation Medicine and chair of the Department of Rehabilitation Medicine at NYU Langone Health. "We’re thrilled that by implementing this patient-centered model under Dr. Weiss’s leadership, our colleagues at NYU Winthrop will further expand Howard Rusk’s legacy."

Prior to joining NYU Winthrop, Dr. Weiss was chairman and director of Residency Training for the Department of Physical Medicine and Rehabilitation at Nassau University Medical Center, where she was also director of Electrodiagnostic Medicine and chair of the Ethics Committee. She is Board Certified in Physical Medicine and Rehabilitation (also called physiatry) as well as in Electrodiagnostic Medicine.

Rehabilitation services have long been represented at NYU Winthrop, including physical and occupational therapy, speech therapy, and cardiac rehabilitation. The new Physical Medicine and Rehabilitation department rounds out those services by adding in the strong component of physiatry. Physiatrists are focused on non-surgical approaches to treating disorders, injuries, or pain resulting from musculoskeletal conditions such as neck and back pain, neurological conditions such as stroke or concussions, and other medical conditions. Expertise includes electrodiagnostics, therapeutic exercise, medications, injections for management of pain, prostheses (artificial limbs), and more.

"The goal is to increase the functionality and quality of life of patients by treating and managing their conditions through conservative, non-surgical methods," said Dr. Weiss. She points to back pain as an example of the need for a focus on non-surgical approaches: "Over 80 percent of Americans will develop back pain at some point in their life, but only about five percent will actually need surgery. Physiatric medicine can help to prevent and manage back pain and bring patients back to maximum functionality."

Dr. Weiss is especially renowned for her expertise in electrodiagnostic medicine (electromyography or EMG), a nerve and muscle test that evaluates the integrity of peripheral nerves and muscles. This can help in the diagnoses of multiple disorders including nerve entrapments, such as carpal tunnel syndrome, and radiculopathy. In addition, Dr. Weiss has authored nine books, several of them serving as authoritative guides for physicians worldwide, such as one on physical medicine and rehabilitation titled "PM&R Q&A" and "Easy EMG A Guide to Performing Nerve Conduction Studies and Electromyography."

NYU Winthrop’s Department of Physical Medicine and Rehabilitation is located at 173 Mineola Boulevard in Mineola. For more information, call 1-866-WINTHROP or visit www.nyuwinthrop.org.

Advanced Treatment for Women Battling Breast Cancer (continued from page 8)

"You can’t see my incision at all," she said. “Having the Hidden Scar procedure allowed me to make it [the mastectomy] more private. My results are amazing. I like the way I look, and now I don’t have to worry about cancer."

To learn more about NYU Winthrop’s Hidden Scar Center of Excellence—the first Center of Excellence on Long Island—call 1-866-WINTHROP or visit www.nyuwinthrop.org.
New “Opioid-Sparing, Multimodal” Approach to Pain Management

Orthopedic surgeons minimize use of opioids: Approach to postoperative pain control includes “pre-loading”—having medications in a patient’s body before an operation begins to decrease the need for pain medications after surgery.

There are more than 47,000 deaths each year in the US attributable to the opioid epidemic.* Pharmaceutical companies and physicians have contributed to this crisis. Multiple studies have also cited prescription opioid medications, found in the home, as a significant initiating-incident causing individuals to become addicted to illegal drugs. The Department of Orthopedic Surgery at NYU Winthrop Hospital is making every effort to minimize opioid use in its orthopedic and spine patients. A major component of its approach to postoperative pain control is what’s known as “pre-loading”—having medications in a patient’s body before an operation begins to decrease the need for pain medications after surgery. This is an effective course, proven out by multiple studies, that decreases the need for potentially addictive opiates.

However, according to James Capozzi, MD, chief of Total Joint Replacement at NYU Winthrop, “Patients do best when their expectations are realistically set.”

Pre-Loading & Anesthesia
Several days before surgery, Capozzi says physicians begin pre-loading patients with a combination of non-narcotic medications including acetaminophen (Tylenol); pregabalin (Lyrica), a nerve stabilizer; and celecoxib (Celebrex) or meloxicam (Mobic) anti-inflammatory medications. This mixture of medications given before surgery has significantly decreased post-operative pain levels—and decreased the need for potentially addictive opiates. Additionally, whenever possible, the orthopedic surgeons use regional anesthesia instead of general anesthesia, and they may also perform nerve blocks after surgery to provide additional pain relief.

Postoperative
The orthopedic team also provides patients with preoperative nutritional drink supplements to decrease postoperative nausea, which can be caused by the multiple medications. Less nausea allows the patients to more quickly participate in their physical therapy. Early mobilization improves functional outcomes and decreases postoperative pain. Cooling devices and other non-medication modalities are also used. Studies have demonstrated that with a multimodal approach of preoperative loading, regional anesthesia, rapid mobilization, and non-narcotic postoperative medications, 80 to 90 percent of patients will require minimal narcotic medications for pain control after surgery—or none at all. A small amount of opioids is used only for breakthrough or uncontrolled pain.

Patients also submit pain level scores daily, which helps our physicians monitor their symptoms, prevent complications, and minimize pain issues before they occur. To date, over 8,000 pain scores have been collected at NYU Winthrop. The hospital also refers patients to educational and exercise videos, which patients have reported as having helped limit discomfort and improve function. The NYU Winthrop Orthopedic Healthcare team also has an app called Force Therapeutics that allows patients to access their personalized care plan and report outcomes.

Pediatric Patients
Since the opioid crisis often begins with children and young adult patients, NYU Winthrop’s orthopedic team is especially examining pain issues among those age groups. That includes ensuring parental understanding of postoperative pain expectations, proper dosing of over-the-counter medications, and age-appropriate education of the pediatric patient. Attention is also placed on distraction and coping techniques to decrease anxiety and pain. “Depending on the patient’s age, this may be as simple as blowing bubbles at the bedside or allowing a parent/guardian

*National Institute on Drug Abuse (continued on page 14)
Fueling your Game: Winning Sports Nutrition

Area students have been returning to school fields, gearing up for the fall sports season. NYU Winthrop athletic trainers, who work with athletes at 16 Long Island high schools, turn to the hospital’s sports nutrition specialists to raise the ante and teach athletes how they can best fuel winning games with the right nutrition. The hospital’s nutritionists especially focus on how athletes can use nutrition to their advantage right before a competition. The goal, says Nicole Regan, registered dietitian nutritionist at NYU Winthrop, is to focus on "easily digestible carbs for quick energy."

A few sports nutrition pointers:

- Regan said it may defy logic to recommend white bread, but white bread-type products like crackers and pretzels are good bets in the hour leading up to a game because they are easily digested, thus providing a quick energy boost. Bananas, yogurt, smoothies and sports drinks like Gatorade are also good choices. Foods high in protein, fat, and fiber, on the other hand, take longer to digest, can cause cramping, and should be minimized in the final few hours leading up to a game (as shown in illustration).

- Calcium is, naturally, important for bone health, but NYU Winthrop’s nutritionists also share that calcium aids in nerve impulses and muscle contraction. Poor calcium intake can lead to decreased bone mass and, consequently, an increased risk of stress fractures and other bone-related injuries. So, healthy daily doses of calcium are important for athletes’ peak performance.

- A low iron level will reduce energy levels. Athletes either need to have plenty in their diet or take a daily vitamin with iron (especially female athletes).

- NYU Winthrop sports nutritionists say to eat meat/animal protein foods in moderation since: 1). Excessive calories from protein may be stored as fat; 2). High amounts of meat/animal products produce a lot of acid in the body, and the body draws calcium from the bones to buffer that acid, making it more prone to fractures and breaks. Proteins, however, are beneficial in the first one to two hours after exercise, which is the optimal window of time during which to replace energy stores and build muscle protein.

For more on NYU Winthrop’s Sports Medicine Program, including athletic trainers’ services and sports nutrition, visit www.nyuwinthrop.org or call 516-663-1054.
NYU Winthrop’s Cancer Center for Kids: Committed to Treating the Whole Patient – Body & Spirit

No family can ever prepare for a child’s cancer diagnosis. It’s among the greatest life challenges a family will ever face. That’s why it’s so important to have a compassionate medical team to provide positive and memorable experiences for the patient and family throughout diagnosis and treatment. In addition to providing stellar care in a comfortable and welcoming environment, that’s exactly what the Cancer Center for Kids (CCFK) at NYU Winthrop Hospital does—priding itself on helping families take their minds off treatment and focusing on normalizing the patient and family experience.

“The CCFK’s psychosocial staff works very closely with the clinical staff to create specific therapeutic and supportive interventions for each patient and their family,” said Mark Weinblatt, MD, chief of Pediatric Hematology/Oncology, and director of the CCFK. “The team fosters a sense of hope and healing through a variety of fun activities and programs.”

In recent months, several events and activities have helped brighten the days of CCFK patients and their families in a wealth of ways.

Special Events

An outing to DreamWorks’ “The Trolls Experience” in the heart of New York City proved that every day can be an extraordinary celebration of children. This hands-on adventure for young patients and their caregivers was pure excitement from beginning to end as participants enjoyed lunch followed by an interactive program filled with singing, dancing, glitter tattoos, and face painting.

Adolescents and young adults, both on treatment or having finished treatment, also enjoyed a fun time together at a spring Mets game. Patients and their families appreciated the opportunity to get to know one another while watching the ball game from impressive seats and eating delicious food.

“A cancer diagnosis doesn’t mean life has to stop, or that kids have to stop being kids,” points out Kim Krupa, certified Child Life specialist at the CCFK. “One of the center’s goals is to provide families with experiences that not only heal the body—but also the human spirit.”

Local Foundations Show Continued Support

The CCFK waiting room’s book cart was recently restocked with over 200 new books for patients and their siblings to enjoy and take home thanks to The Spencer Reid Foundation. The foundation, which is dedicated to providing smiles for children with cancer, has been generously filling the book cart several times a year since 2016.

The Nicholas Pedone Foundation, whose motto is “Fight Hard Smile Big,” has once again provided vital support where it’s needed most—in treatment rooms. Recently, the foundation provided new opportunities to “relax and recharge,” replacing three chairs in the infusion room for greater comfort and flexibility as well as adding multiple charging stations throughout the CCFK. A complete projection set-up was also acquired to help the center’s Child Life team continue to create positive experiences for patients of all ages.

“We are thankful to our amazing community of friends and supporters who continue to help us create a nurturing environment filled with comfort, hope, and healing for our patients and their families,” said Dr. Weinblatt. *

The Nicholas Pedone Foundation, whose motto is “Fight Hard Smile Big,” has once again provided vital support where it’s needed most—

The infusion room at the CCFK is equipped with comfortable new treatment chairs, thanks to The Nicholas Pedone Foundation.
Long-time Hospital Supporters Make Generous Donation toward Opening of the New Research and Academic Center Courtyard

An inviting and beautiful outdoor space—the Research and Academic Center Courtyard—now adorns Mineola Boulevard thanks to a generous gift from one of NYU Winthrop Hospital’s most loyal and long-time supportive families Mr. and Mrs. Ronald and Constance McGlynn. Members of the Board of Directors, senior administration, staff, as well as the beloved family of the McGlynn’s gathered for a special cocktail reception to celebrate and acknowledge their distinct contribution.

“This welcoming new space is symbolic of the culture here at NYU Winthrop,” said John F. Collins, president and CEO of NYU Winthrop Hospital. “Without question, staff, medical students, and visitors to the hospital will enjoy this beautiful courtyard for decades to come.”

The McGlynn’s, pillars in the Garden City community, have been dedicated champions of NYU Winthrop Hospital for decades. Ronald McGlynn, co-founder and chairman of Cramer Rosenthal McGlynn LLC, has been a member of NYU Winthrop Hospital’s Board of Directors for over 20 years and has served as the chairman of the Investment Committee and as a member of the Finance Committee. His wife, Constance, who is a former Board of Regents member, was also a leader of the original NYU Winthrop Yuletide Ball, committing many years to that community fundraiser and its ongoing success in generating vital support for the hospital’s Child Life Program. In 2013, the Gateway to New Discoveries Campaign, an initiative to fund the Research and Academic Center, was supported by 650 hospital employees who contributed over $1 million, and the McGlynn’s generously matched the employee gifts.

The unique courtyard, which serves as a symbol of the enduring philanthropic support and service of the McGlynn family, is prominently located near the entrance to the hospital’s 95,000-square-foot Research and Academic Center.

“This one-of-a-kind space embodies the spirit of the community and will have a lasting impact for years to come,” said John F. Collins, president and CEO of NYU Winthrop Hospital.
Recently, NYU Winthrop Hospital was awarded The Joint Commission’s Gold Seal of Approval® for Advanced Certification in Inpatient Diabetes Care. NYU Winthrop was the first teaching hospital in New York State to earn this distinction, beginning in 2013, and the latest Gold Seal distinction marks uninterrupted Advanced Certification since that time.

The Joint Commission is the premier healthcare quality improvement and accrediting body in the nation, and its experts conducted a rigorous on-site review at NYU Winthrop, evaluating compliance with national disease-specific care standards as well as inpatient diabetes-specific requirements. Clinical practice guidelines and performance measures also were assessed. These in-depth reviews proved NYU Winthrop’s commitment to excellence that resulted in the Gold Seal. More than 30 million adults and children in the U.S. have diabetes, and every 21 seconds, another individual is diagnosed with diabetes."

The care of diabetes patients at NYU Winthrop is closely coordinated by a multidisciplinary team that includes every service, department, and specialty of the hospital. In reviewing standards of care for this very prevalent disease, the Joint Commission analyzed NYU Winthrop’s protocols across the entire hospital system related to:

- Patient education on self-management of diabetes
- Consistency in the continuum of care across hospital departments
- Ongoing quality improvement processes
- Continuing staff education
- Thorough data collection
- Blood glucose monitoring protocols
- Plans for treatment of hypoglycemia and hyperglycemia

"Those in the region who have diabetes know to come to NYU Winthrop for the absolute highest standards of care," said Virginia Peragallo-Dittko, RN, executive director of the Diabetes and Obesity Institute at NYU Winthrop Hospital, (left) led the effort toward achieving the Joint Commission’s Gold Seal of Approval® for Advanced Certification in Inpatient Diabetes Care.

"For adults and children with diabetes and their families, the significance of this certification is personal," noted Ms. Dittko. "Managing diabetes at home is hard enough and it becomes more complicated when ill, delivering a baby, or having surgery. The effort involved in achieving certification serves as a testament to NYU Winthrop’s commitment to patients with diabetes, strengthens community confidence, and reinforces NYU Winthrop’s position as the regional leader in diabetes care."

For more information about diabetes care at NYU Winthrop Hospital, visit www.nyuwinthrop.org.

NYU Winthrop Hospital has earned Perinatal Care Certification from The Joint Commission. The certification program recognizes Joint Commission accredited hospitals committed to achieving integrated, coordinated, and patient-centered care for mothers and their newborns.

*American Diabetes Association
Eva Chalas, MD, physician director of the Center for Cancer Care, vice chair of the Department of Obstetrics and Gynecology, and professor, NYU Long Island School of Medicine, has been named president elect of American College of Obstetricians and Gynecologists (ACOG)—the specialty’s leading professional membership organization dedicated to the improvement of women’s health, with more than 58,000 professional members. Dr. Chalas specializes in treating women with gynecologic cancers and complex gynecologic conditions. She has been actively involved in clinical research and has published extensively on various women’s health topics including the prevention and treatment of gynecologic cancers. This extensive experience, combined with her outstanding administrative and clinical leadership, and dedication to best practices, is an asset to ACOG.

In her role as president elect for ACOG, Dr. Chalas is serving as a national officer of ACOG and the ACOG Foundation, which pursues innovative ideas in education delivery, patient, and physician advocacy, and the provision of full spectrum healthcare, including addressing the global issue of maternal mortality and morbidity. She represents ACOG’s values, mission, and message to medical organizations, government, media, and the public, as well as in the international health community.

“The three-year term, which will progress to president and immediate past president, provides me with a voice to advocate for those I serve, and to promote education and clinical excellence at national and international forums,” said Dr. Chalas. “I am committed to bringing my passion for women’s health and strong work ethic to this position, while continuing to lead our exceptional team at NYU Winthrop Hospital’s Center for Cancer Care, working diligently to ensure its growth and development into a flagship cancer service on Long Island for NYU Langone Health.”

Dr. Chalas has long been committed to raising the bar for NYU Winthrop’s clinical cancer services, educational, and research activities. In her leadership role as physician director of NYU Winthrop’s Center for Cancer Care, Dr. Chalas leads a multidisciplinary team in enhancing services in the areas of cancer prevention, early detection, and treatment. In all components of cancer care, including patient outcomes and cancer care delivery, Dr. Chalas works with chairs of clinical departments to implement multidisciplinary best-practice strategies that not only provide patients with the best treatments, but are instrumental in improving cancer avoidance and early detection of the disease.

A Celebration of Life

NYU Winthrop’s 21st Annual “Celebration of Life” dinner honored the extraordinary courage and vivacious spirits of all those who have been impacted by a cancer diagnosis. And what a celebration it was, as more than 350 people filled the Carltun on the Park in East Meadow to enjoy a three-course meal, dancing, and inspirational words from survivors and NYU Winthrop’s world-class Center for Cancer Care team. Among those honored were cancer-care provider honoree, Edward Jimenez, DO, a gynecologic oncologist, and patient speaker, Marguerite Durkin, who engaged the crowd with her inspiring story of courage and gratitude.

Special thanks to NYU Winthrop’s Cancer Services team, under the leadership of Eva Chalas, MD, who on a daily basis provides high-quality, multidisciplinary care tailored to meet the unique needs of each patient. For more information about cancer care services at NYU Winthrop Hospital, call 1-866-WINTHROP or visit www.nyuwinthrop.org.
When an elderly loved one begins to show signs of cognitive impairment and behavioral disturbances such as agitation and confusion, the impact on the individual, family members, and caregivers can be detrimental. When unrecognized, delirium causes a wide range of physical, emotional, and financial ramifications.

More than 7 million hospitalized Americans suffer from delirium each year, according to the American Delirium Society. As the most common neuropsychiatric syndrome in the hospital, delirium is a state of confusion that comes on suddenly and tends to fluctuate. There are different types of delirium, with symptoms including changes in alertness and behavior such as rapid mood swings, lack of concentration, hallucinations, and disturbed patterns of sleeping and waking. Delirium can accelerate dementia and lead to permanent cognitive decline.

In addition to affecting family members and loved ones, delirium can drastically impact a patient’s length of stay in the hospital as well as their overall prognosis. In fact, the latest estimated cost to the U.S. healthcare system is approaching $164 billion annually. That is why it is so important that clinical teams, caregivers, and family members are equipped with the knowledge and tools to recognize and manage this complex condition, which impacts nearly 50 percent of older hospitalized patients yet is missed in close to 60 percent of cases.

“NYU Winthrop Hospital is committed to providing the very best holistic approach to patient care, and the integration of both medical and mental health is an important part of that care,” said Aaron Pinkhasov, MD, chairman of the Department of Behavioral Health at NYU Winthrop Hospital. “Recognition and early treatment of delirium are critical.”

Recently, NYU Winthrop’s Department of Behavioral Health, in conjunction with the Continuing Medical Education Department, developed a web-based education module geared towards helping healthcare professionals and family members better understand the condition. The video is accessible online through NYU Winthrop Hospital’s YouTube channel at https://tinyurl.com/NYU-Winthrop-delirium-video. Each vital piece of information presented in the 16-minute video is backed by evidence-based literature, and will leave viewers with: a better understanding of the signs and types of delirium; help them identify common risk factors; and enable them to recognize the best way to prevent and treat delirium.

Additionally, the video presents information about an interventional model, called ACE, developed at NYU Winthrop. ACE addresses three vital issues—activity, comfort, and environment—all of which impact episodes of delirium. The ACE model is a comprehensive and effective non-pharmacological approach to prevent and treat delirium.

“Education is the first step to understanding the full scope of this disease,” said Dr. Pinkhasov. “I encourage every individual who comes across this condition—either in the professional or personal setting—to watch this video which can help improve the detection, prevention, and effective management of delirium.”

Predisposing Factors
- Advanced age
- History of brain disorders (e.g., dementia, stroke, Parkinson’s Disease)
- Multiple medical comorbidities
- History of previous episodes of delirium
- Hearing or vision impairment
- Alcohol and/or benzodiazepine use

Types of delirium
Hypoaactive
- Most common, affects up to 70 percent of patients
- Patients are usually quiet and drowsy

Hyperactive
- Affects up to 20 percent of patients
- Patients are usually agitated and restless

Mixed
- Up to 56 percent of patients
- Individuals fluctuate between hypoaactive and hyperactive
The Cancer Center for Kids (CCFK) at NYU Winthrop Hospital recently hosted its largest annual fundraiser, the Black and White Ball, at The Garden City Hotel. Garden City residents Drs. Anthony and Ruth Randi were recognized for their vast contributions in support of the center’s patients and their families. Also recognized, with youth awards, were siblings Jack and Brooke Williams of Rockville Centre. The “Masquerade Inspired” Black and White Ball was a great success, raising approximately $175,000 to benefit the CCFK’s comprehensive and essential psychosocial programs, which help improve the quality of life for a child undergoing treatment for cancer or blood disorders and facilitate a child’s sense of well-being.

“An outpouring of support from community members and friends of the center made this event a success. Additionally, we are extremely grateful for the generosity of extraordinary individuals, such as this year’s ball honorees, who exemplify character, compassion, and goodwill.”
— Mark Weinblatt, MD chief of Pediatric Hematology/Oncology at NYU Winthrop Hospital and director of the CCFK.

Did You Know?
NYU Winthrop’s detailed financial assistance policy and application form are available in multiple languages on our website (www.nyuwinthrop.org) and at all registration locations, or you may call the Credit & Collection Department at (516) 576-5600, option #3 for more information or to obtain a hard copy version of these documents at no cost.
Community Programs

Please call (516) 663-8300 to register for these FREE programs.

Wednesday, November 13 · 1:15 PM
Health Update for Seniors
Medication Safety Tips for Seniors
Brian R. Malone, BS, MS, RPh, director of Pharmaceutical Services
Mineola Community Center, 155 Washington Avenue, Mineola

Thursday, November 14 · 7 PM
Perspectives in Health
Got Support? Who’s on your Diabetes Team
Lynne Chimon, RD, director of NYU Winthrop’s Diabetes Education Center
NYU Winthrop Research & Academic Center, 101 Mineola Boulevard, Mineola

Community Health Needs Assessment
Now Available

A provision of the Affordable Care Act requires that not-for-profit hospitals conduct and publish a Community Health Needs Assessment (CHNA) once every three years, and later adopt an implementation plan designed to address the most significant health needs of the community. To complete the CHNA and produce the most effective assessment possible, NYU Winthrop, in addition to all of the hospitals across Long Island, participated in the joint assessment that was led by the Long Island Population Health Program. To read NYU Winthrop’s 2019 CHNA, please visit https://www.nyuwinthrop.org/community-health-needs-assessment. We value your opinions and questions. Written comments about the assessment and wellness initiatives are welcome and can be emailed to: webmanager@nyulangone.org or mailed to the Welcome Center at NYU Winthrop Hospital, 1300 Franklin Avenue Suite, Suite ML-5, Garden City, NY 11530. Complimentary hard copies of the CHNA are also available upon request by calling the Welcome Center at 1-866-946-8476.

Former Board Chairman Honored

The Board of Directors of NYU Winthrop Hospital was pleased to recognize Charles M. Strain with the Winthrop Legacy Award during their final annual meeting on June 18, 2019. Mr. Strain was honored for his transformative leadership as Chairman of the Board of Directors at NYU Winthrop over the past 13 years. Presenting the award to Mr. Strain (right) was the immediate past Board Chairman, Patrick K. Long (left). Mr. Strain will also be honored for his years of service to NYU Winthrop and its patients at the hospital’s Annual Gala, set to take place on Saturday, October 26, 2019 at RXR Plaza in Uniondale. For tickets and more information, visit www.nyuwinthrop.org/events or call (516) 663-8275.

Michael Magro Foundation Supports Pediatric Patients and Families

The Michael Magro Foundation, a non-profit organization founded by Paul and Terrie Magro to honor their son Michael, who passed away from leukemia at the age of 13, is committed to helping families who have a child battling cancer or other catastrophic illnesses. That includes long-time support for NYU Winthrop's pediatric programs and the Cancer Center for Kids. The foundation’s annual golf outing, held at the Cold Spring Country Club, will help further some of those NYU Winthrop programs, with the event having raised more than $140,000.

"Paul, Marc, and I give our hearts every day in memory of Michael," remarked Ms. Magro. "I am so grateful to everyone we have met along this journey for their support. Every year we are able to touch more lives and impact more families because of all of you."
John F. Collins, President and CEO of NYU Winthrop Hospital, Announces Plans for Retirement

John F. Collins, president and CEO of NYU Winthrop Hospital, will retire from the 591-bed academic medical center, effective November 30, 2019. Following Collins’ retirement, the hospital’s chief medical officer, Joseph Greco, MD, will assume the role of senior vice president and executive director, and serve as senior leadership on the NYU Winthrop campus.

Collins has been an integral member of the NYU Winthrop leadership team for over two decades. He has served as President and CEO since 2009, earning the respect of the hospital’s Board of Directors, medical staff, and leadership team. Under his direction, the hospital’s revenue has doubled, to approximately $1.7 billion, and the number of employees has grown from less than 6,000 in 2010 to over 9,500 today.

“John Collins’ in-depth knowledge of NYU Winthrop and strong record of success in managing the hospital’s financial and operating activities have served the institution well over the past two decades,” said Charles M. Strain, chairman of the Board of Directors at NYU Winthrop. “His devoted service and management have established NYU Winthrop as a regional leader in healthcare and have helped the hospital achieve several important milestones in its 100-plus year history including a fruitful partnership with NYU Langone Health.”

At NYU Winthrop Hospital, Collins led the charge for the creation of a 95,000 square foot state-of-the-art Research and Academic Center, which opened its doors in early 2015 and stands as a physical embodiment of NYU Winthrop’s commitment to research, medical education, and clinical care.

Most recently, his vision and strategic leadership were instrumental in helping the hospital enter an affiliation agreement with NYU Langone Health that has brought the two organizations together to expand, enhance, and clinically integrate its healthcare networks on Long Island. This important partnership also led to the establishment of NYU Long Island School of Medicine—a collaboration with New York University and NYU Langone Health that brings the first tuition-free medical school to Long Island, focusing on training and producing primary care physicians.

“We thank John Collins for his service and the tremendous contributions he’s made to NYU Winthrop and NYU Long Island School of Medicine,” said Robert I. Grossman, MD, Dean and CEO of NYU Langone Health. “Our partnership with John reflects our joint dedication to providing the highest levels of clinical care, supported by the advanced technologies and sophisticated research and teaching programs that will enhance our collective institutions. Together we will continue to elevate the level of healthcare available on Long Island now and in the future.”

Under Collins’ leadership, NYU Winthrop became the first hospital on Long Island to qualify for a financial incentive for the meaningful use of certified electronic health record technology to achieve its health and efficiency goals. The hospital was also recognized in its first-ever edition of U.S. News & World Report’s Best Hospitals Metro Area Rankings for 11 high-performing specialties in 2011, and has continued to achieve national recognition each year since. Just recently, U.S. News named NYU Winthrop as one of the nation’s top 50 hospitals in six specialty areas including: Cardiology and Heart Surgery; Diabetes and Endocrinology; Gastroenterology and GI Surgery; Nephrology; Orthopedics and Urology.

His keen foresight and healthcare business acumen resulted in a very successful physician integration effort that led to the acquisition of approximately 70 faculty and community practices in 120 locations throughout the metropolitan area, as well as $295 million in physician service revenue through the establishment of a Practice Administration Alliance.

“As I reflect on my tenure as president and CEO of NYU Winthrop over the past decade, I know that NYU Winthrop Hospital is now well positioned to be the 21st century leader of healthcare on Long Island,” said Collins. “I am excited to move on to the next chapter in my personal life, and am confident in Dr. Greco’s ability to lead NYU Winthrop, with the full support of both the NYU Langone Health and NYU Winthrop leadership teams, into the next important phase of the hospital’s journey with NYU Langone Health.”

Collins joined Winthrop in 1997 as vice president and chief financial officer (CFO). In 2007, he was promoted to chief operating officer (COO) and CFO, and was later appointed executive vice president—a role he assumed as he continued as the hospital’s COO. In 2009, the Board of Directors named him president and CEO. Prior to his tenure at NYU Winthrop Hospital, Collins served as CFO at South Nassau Communities Hospital. ■
Nassau Hospital was founded by local physicians and residents as Long Island’s first voluntary hospital.

- 1900 The hospital was moved near the railroad and “horse and buggy trail,” now known as Old Country Road.

- 1917 Nassau Hospital acquires the first motorized ambulance in Nassau County.

- 1924 The hospital developed Long Island’s first social services department, which would prove indispensable during the Depression and World War II. The first volunteer auxiliary was established at Nassau Hospital.

- 1956 The first Cobalt Unit was installed to treat malignant cancers. It was a revolutionary advancement in radiotherapy in the post-World War II period, using beams of gamma rays directed at the patient’s body to kill tumor tissues.

- 1970 The hospital establishes the first Chronic Dialysis Center on Long Island, and to this day it continues to be the largest hospital-based dialysis program on Long Island.

- 1974 Nassau Hospital becomes Long Island’s first hospital to offer same-day surgery.

- 1979 The area’s first Diabetes Education Center opens to teach individuals with diabetes how to manage their disease.

- 1981 A “Maternal Child Care Center” opened, equipped with nurseries for infants at high risk—a precursor to NYU Winthrop’s current NICU, which ranks among the best in the world for overall survival of extremely premature babies.

- 1985 Nassau Hospital changes its name to Winthrop-University Hospital, honoring Robert Winthrop and his wife, Margaret.

- 1988 The hospital reaffirmed its commitment to graduate medical education as a major teaching affiliate of the Medical School of the State University of New York at Stony Brook. The hospital trained more than 100 residents and provided clinical experience for hundreds of health care students. With a staff of approximately 2,400 employees, Winthrop was not only one of the largest hospitals, it ranked among the 30 largest private employers on Long Island.

- 1991 Winthrop opens a separate Ambulatory Surgery Center.

- 2005 First Cyberknife in the New York Metro region comes to Winthrop.

- 2011 Winthrop’s Breast Health Center becomes the first one in Nassau County to earn the prestigious accreditation from National Accreditation Program for Breast Centers (NAPBC). And, for the first time in the hospital’s history, Winthrop is recognized by U.S. News & World Report as a best regional hospital, recognized in 11 specialties.

- 2013 Winthrop-University Hospital is the first major teaching hospital in New York State to earn The Joint Commission’s Gold Seal of Approval™ for advanced inpatient diabetes care.

- 2014 Winthrop Hospital designated as the first Baby Friendly hospital on Long Island.

- 2015 Winthrop opens a brand new 95,000 square-foot state-of-the-science Research and Academic Center. This true translational Research Center includes core laboratories, a clinical trials center, integrated adult and pediatric endocrinology physician practices, classrooms for medical students, as well as an innovative Simulation Center.

- 2016 Winthrop receives national recognition for excellence in nursing from the American Nurses Credentialing Center’s (ANCC) Magnet Recognition Program®.

Winthrop announces plans to affiliate with NYU Langone Health. With the affiliation comes a new name for the Hospital, NYU Winthrop Hospital, and paves the way for the establishment of an integrated health network on Long Island that will enhance healthcare across the region and enable residents to access a broad array of outstanding health services.

August 1, 2019

Two exceptional healthcare organizations—NYU Winthrop Hospital and NYU Langone Health—officially become one.
NYU Winthrop Hospital earned national acclaim with U.S. News & World Report Rankings

NYU Winthrop Hospital achieved national rankings in six adult specialties for 2019-2020, and was ranked the #7 hospital in New York State, according to the latest results from U.S. News & World Report’s annual “Best Hospitals” rankings. National rankings highlight specialty programs that place among the top 50 in the country.

NYU Winthrop Hospital ranked nationally in Cardiology and Heart Surgery, Diabetes and Endocrinology, Gastroenterology and GI Surgery, Nephrology, Orthopedics and Urology. In addition to these six, NYU Winthrop also ranked as “High Performing” in Geriatrics, Neurology and Neurosurgery, and Pulmonology and Lung Surgery.

“This is a wonderful achievement for NYU Winthrop and everyone who contributes to the high quality of our care,” said John F. Collins, president and CEO of NYU Winthrop Hospital. “Nearly 10 years ago, we committed to achieve national prominence for Winthrop, now NYU Winthrop Hospital. Coupled with our focus on improving quality and quality reporting, we worked hard to secure recognition for our improvements, such as in the U.S. News & World Report rankings. To achieve national ranking in six specialties is a true reflection of the hard work and dedication of our staff at NYU Winthrop.”

In June, the Children’s Medical Center at NYU Winthrop earned national rankings in the following pediatric specialties: Pulmonary & Lung surgery; Diabetes & Endocrinology; and Urology.