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Have you been to one of our locations and wish to Shout-out someone who went above and beyond during your visit?

A simple gesture can brighten up someone's day. Giving a shout-out is a great way to recognize employees for their work, talent, and living by our company's Mission, Vision and Values, it also contributes to a culture of appreciation, community, and kindness.

**If you know of someone who deserves to be recognized please send in your shout out via this link below.**



<https://www.surveymonkey.com/r/HFHCSHout-Outs>



## What are the early symptoms of cancer in men?

The early symptoms of cancer in men can include changes in bowel habits, unintentional weight loss, testicular changes, and urination difficulties. Recognizing the warning signs of cancer can significantly improve a person's outlook.

According to the National Cancer Institute (NCI), males are more likely to die from cancer than females in the United States.

Some people may not notice the early signs of cancer or may confuse them for symptoms of other conditions. Knowing which symptoms may indicate cancer can help a person get treatment sooner.

Common early signs of cancer in males are;

- ◇ Changes in bowel habits
- ◇ Urination Difficulties
- ◇ Weight Loss
- ◇ Testicular Changes
- ◇ Breast lumps
- ◇ Skin and Mouth Sores
- ◇ Persistent cough
- ◇ Stomach Pain and Nausea
- ◇ Bone Pain
- ◇ Fatigue

It is recommended you see a doctor for any of the following symptoms:

- ◇ a persistent cough with no obvious cause
- ◇ blood in sputum
- ◇ bloody stools or rectal bleeding
- ◇ blood in urine or semen
- ◇ unintentional weight loss
- ◇ severe or ongoing chest pain
- ◇ bone pain
- ◇ chronic headaches

In the United States, men have a higher risk of dying from cancer than women. However, people can take action by being vigilant and speaking to a doctor about any unusual bodily changes or persistent symptoms.

A person can also take part in screening tests for cancer. For instance, the ACS recommends that men over the age of 50 years speak with a healthcare provider about whether screening for prostate cancer would be right for them.

Early diagnosis and treatment generally improve a person's outlook for many types of cancer.

Medically reviewed by Christina Chun, MPH — Written by

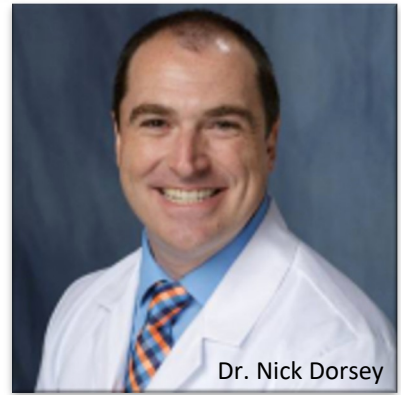
Jamie Eske on March 18, 2019

# MONTHLY HIGHLIGHT

Family Medicine Residency Program Interview with

**Dr. Nick Dorsey**

Program Director of our Family Medicine Residency Program



**1. Where are most of your graduates located, and what type of practices are they going to from residency?**

Graduates from our current third years are doing some amazing things. Two intend to stay in town and provide primary care services. Several are moving all across the country to practice primary care and at least one will be doing hospital medicine.

**2. How do you think that your program compares with other programs?**

This is such a challenging question to answer because not all programs are the same. Some have a goal of teaching physicians to be great researchers' others want you to know every disease in the textbook and their treatment off the top of your head. Internal medicine physicians traditional tend to build their strengths in the hospital while family medicine is known for our acumen in the clinic. But what I think our program does better than any other is embrace the opportunity to be any kind of physician you want to be. Excelling in not just one thing but all things. We are juxtaposition in regard to having new leadership and faculty in the residency, a new clinic, and a new mind set. We have created several new leadership positions to embrace education, wellness, and research. Undoubtedly, we will establish ourselves as "THE leader" in the state of Florida amongst family medicine programs providing the highest level of evidence-based health care to everyone from infants to geriatrics, becoming a leader in quality and research, mastering care to patients in the hospital, clinic and home. In the next two to three years I would not compare us to other programs as my intent is to become the measuring stick to which all programs try to hold themselves to. But as I said the true strength of this program lies in its diverse physicians who are trained to be not just the best at one or two things but to be well rounded individuals who enjoy what they do and are capable of anything.

**3. How many residents are currently enrolled in the program?** 18 total. We have 6 new residents train with us each year for 3 years total.

**4. How does someone participate or get into the program?**

If they wanted to be a resident: After graduating from med school, they would apply through ERAS system. If health care members want to participate in teaching or learning from us, they could reach out to myself or Maurice Armstrong our program coordinator to help find the best role for them.

**5. What kind of feedback are you hearing from your graduates?** One of our best graduates Dr. Abernathy seems to really enjoy the work she does now and values the training she had as a resident. Another one of our Graduates Dr. Casey Turner is joining our inpatient faculty this year. I think it speaks highly of a program if the graduates are willing to come back and be a part of that after that graduate. (FYI: I've only been at this for two months, so I think I'll have more to report on previous grades in a year or so)

**6. How would you describe the patient demographics?**

As coined by Mr. Churchill in 1943. provide care to patients "from the Cradle to the grave" and to "every class of citizen in the state" Although getting to study medicine first hand in England for over a year I would like to say we here in Ocala do it much better. In general, I think we are very fortunate to take care of an underserved and often underinsured population. Most of our patients are very great full as they have not had access to such high-quality health care and medications in the past. Their relief and gratefulness is often visible on their faces. We have a fair amount of Spanish speaking population. Bottom line is we will take care of anyone who walks in our doors.

From Left to Right,

Nicholas Dorsey MD,  
Eslam Mohamed DO,  
James Vandruff DO, Jason  
Ko DO, Maura Pipkins  
MD, Nicholas Hayden DO,  
Manal El-Hag MD, An-  
drew Ross DO, Kaviya  
Sathyakumar MD, Vin-  
cent LY DO, Candice Kuz-  
ma DO, Stephen Zehring  
DO .







# Crisp-skinned chicken breast with salsa verde

Ingredients
1 small free-range or organic chicken breast, skin on
1 fresh rosemary sprig or 2-3 fresh thyme sprigs, leaves chopped
Grated zest and juice 1 lemon
10g unsalted butter
1½ tbsp olive oil
1 banana shallot, finely chopped
1 fat garlic clove, crushed
Large handful chopped soft fresh herbs (use parsley, basil, mint or a mixture of some or all)
1 tbsp capers, drained and roughly chopped
Good splash dry white wine
Cooked new potatoes and salad to serve

# Method

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- 1 Lay cling film over a chopping board, put the chicken breast on top, then cover the chicken with another sheet of cling film. Using a rolling pin, bash the chicken all over to flatten it to an even thickness (this ensures the meat will cook evenly in the pan). Season with salt and pepper, the rosemary/thyme and half the lemon zest.
- 2 Heat half the butter and ½ tbsp oil in a small non-stick frying pan, then cook the chicken for 10-12 minutes, turning, until golden, adding the remaining butter to the pan as you turn. Continue to cook until the chicken is cooked through.
- 3 Meanwhile, for the salsa verde, mix the remaining oil and lemon zest, ½ tbsp lemon juice, the shallot, garlic, soft herbs and capers in a small bowl. Taste and season.
- 4 Once the chicken is cooked, transfer to a warm serving plate to rest. Add a good splash of white wine to the frying pan and stir over the heat to release any tasty bits stuck to the bottom. Halve or slice the chicken, then toss in the warm pan juices. Serve drizzled with the salsa verde, with new potatoes and salad.



 SERVES 1  HANDS-ON TIME 20 MIN

Got an evening to yourself? Cook this crisp-skinned chicken dinner for one, served with a homemade salsa verde. All it takes is 20 minutes!

We've got lots more [delicious dinner recipes for 1 person](#) right here.

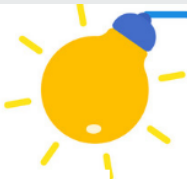
NUTRITION: PER SERVING	
CALORIES	476KCAL
FAT	31.9G (9.4G SATURATED)
PROTEIN	33G
CARBOHYDRATES	3.6G (2.3G SUGARS)
FIBRE	3.2G
SALT	0.6G

DID YOU KNOW?

INTERESTING FACT

Microwaving is the healthiest way to cook vegetables?

Though microwavable food is seen as radioactive junk, most vegetables retain more nutrients from microwaving than any other cooking method.



## Enjoy With



### Ingredients

- 1 cup sugar
- 1 cup of water
- ¾ cup raspberries; pureed and pushed through a fine mesh sieve; plus more whole berries for garnish if desired
- 1 cup fresh lemon juice, about 8 lemons
- 4-6 cups cold water (this will vary depending on your taste)

### Instructions

1. Make a simple syrup by combining the sugar with 1 cup of water in a saucepan. Place over medium heat and heat until the sugar is completely dissolved; swirl the pan occasionally. Let cool.
2. Measure ¾ cup of fresh raspberries and puree them in your blender or food processor.
3. Push the raspberry puree through a fine mesh sieve to separate the seeds from the pulp.
4. Once the simple syrup has cooled, combine the raspberry puree, simple syrup and lemon juice in a large pitcher.
5. Add 4-6 cups of cold water. The amount of water you use will depend on your taste, so add as little or as much as you want to achieve your perfect sweet tart balance.



## Raspberry Lemonade

