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OPENLINES



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Do you have a UF doctor?  
Now, more than ever,  
you can.

UF Health stands poised for growth in 2019. We have many exciting developments that will build upon our existing 34 primary care practices located throughout Northeast Florida and Southeast Georgia.

In the early spring, we will plant our flag in northern St. Johns County, with the opening of a primary care practice in Nocatee. On the west side, our plans for expansion include the establishment of UF Health Family Medicine – Crystal Springs.

This fall, the 40,000-square-foot medical office building in Wildlight, a new master-planned community in Nassau County, will open under the UF Health banner. The facility will include urgent care, primary care, pediatrics, obstetrics and gynecology, mental health services, dentistry, imaging and lab services.

In light of this tremendous growth, I encourage all members of our UF Health family to seek primary care from one of our practices. Take advantage of the high-quality services provided by our physicians and staff.

The new year is a time for new commitments, so commit to a healthier you.

Sincerely,



Leon L. Haley Jr., MD, MHSA



UF Health Primary Care  
Practices

<b>Arlington</b>	
UF Health Family Medicine – Merrill Road	904.633.0285
UF Health Family Medicine and Pediatrics – Monument Landing	904.383.1026
<b>Beaches</b>	
UF Health Pediatrics – Beaches	904.383.1046
<b>Downtown</b>	
UF Health Family Medicine – Brentwood	904.383.1040
UF Health Community and Family Medicine – Jacksonville	904.383.1002
UF Health General Medicine – Jacksonville	904.383.1003
UF Health Total Care Clinic – Jacksonville	904.383.1040
UF Health Family Medicine and Pediatrics – Elizabeth G. Means Center	904.383.1040
<b>Mandarin</b>	
UF Health Family Medicine – Augustine Oaks	904.633.0210
<b>Northside</b>	
UF Health Family Medicine – Commonwealth	904.633.0500
UF Health Family Medicine – Dunn Avenue	904.633.0700
UF Health Family Medicine – Lem Turner	904.383.1001
UF Health Family Medicine – Soutel Plaza	904.633.0500
UF Health Family Medicine and Pediatrics – New Berlin	904.633.0340
UF Health Family Medicine – North	904.383.1000
UF Health General Medicine – North	904.383.1000
UF Health Pediatrics – North	904.383.1540
<b>Southside</b>	
UF Health Family Medicine and Pediatrics – Baymeadows	904.633.0800
UF Health Family Medicine – San Jose	904.633.0475
UF Health Pediatrics – San Jose	904.633.0460
UF Health Family Medicine – Kernan Square	904.633.0585
UF Health General Medicine – Emerson	904.383.1003
UF Health Family Medicine – Goodbys Creek	904.633.0430
<b>Westside</b>	
UF Health Family Medicine and Pediatrics – Blanding	904.633.0610
UF Health Family Medicine – Murray Hill	904.633.0500
UF Health Family Medicine – Normandy	904.633.0640
<b>Baker County</b>	
UF Health Family Medicine – Crossroads	904.383.1777
<b>Clay County</b>	
UF Health Family Medicine and Pediatrics – Plantation Oaks	904.633.0820
<b>Nassau County</b>	
UF Health Family Medicine – Callahan	904.633.0560
UF Health Family Medicine – Yulee	904.633.0670
UF Health Family Medicine – Amelia Island	904.383.1396
<b>St. Johns County</b>	
UF Health Family Medicine – Ponte Vedra Beach	904.383.1560
<b>Georgia</b>	
UF Health Family Medicine and Pediatrics – St. Marys	912.576.2344
UF Health Family Medicine – Charlton	912.496.1155

Visit [UFJaxPrimaryCare.org](http://UFJaxPrimaryCare.org)  
for more information.



## Sticking to your resolutions in January is easy. UF Health physicians have tips for making lasting lifestyle changes.

New Year's is an exciting time, and for many it means following tradition and setting resolutions while the motivation is there. But it takes commitment to stay motivated when January turns to springtime and the holidays are a distant memory. Popular opinion polls report fewer than 10 percent of people stick to New Year's resolutions.

What is the key to a successful New Year's resolution? It all starts with setting a goal and making small, sustainable changes in daily habits. Researchers from University College London found that, on average, it takes people at least two months to form a new habit.

According to Katherine McMullan, MD, a primary care provider who joined UF Health in 2018 and will be part of the team at UF Health Family Medicine and Pediatrics – Nocatee when it opens this spring, the first of the year is a natural time for people to advance past the contemplation stage of change. The turning of the calendar represents an opportunity to follow through and take action toward a goal.

"When considering your resolution, it is

important to think of it as a change you will incorporate into your daily routine for the rest of your life," McMullan said. "Resolutions are often made, then broken because we view them as something to work on temporarily."

Weight loss is often top of mind as it can help combat many chronic conditions, such as diabetes and hypertension. If you are looking to lose weight, discuss with your primary care provider what a reasonable weight loss goal looks like before implementing your resolution.

Mental health is something McMullan says is often overlooked. After the indulgences of the holiday season, most people focus their New Year's resolutions on dietary or lifestyle modifications to get healthier. It is important to remember, however, that our resolutions can also guide our attention toward mental and emotional health.

Holly Hamilton, MD, medical director at UF Health Family Medicine – Amelia Island, underscores the importance of involving others in your progress.

"Share your progress or challenge friends on social media, for example," Hamilton said. "It is a good way to get encouragement and

stay engaged."

Hamilton says to make your resolution a part of your routine, just like going to work and eating a meal. As you move toward your goal, take time to chart your progress on a calendar as a reminder.

Hamilton suggests making small resolutions year-round, such as walking a mile each day for 30 days. While it sounds simple, it requires commitment and time. Regardless of the challenge, be accountable to yourself for the change you want to see.

McMullan and Hamilton agree that, when it comes to resolutions, if at first you don't succeed, try again.

"It is OK to slip up, but do not give up," Hamilton said. "Do not make New Year's resolutions feel like you have to wait until next year to start another one."

McMullan says progress toward any resolution will have ups and downs. That's completely normal.

"It is important not to get discouraged if you falter in meeting a goal. Set another time to resume and try again," McMullan said.

To schedule an appointment with a UF Health primary care provider, visit [UFJaxPrimaryCare.org](http://UFJaxPrimaryCare.org) or call 633.0411.

UF Health employees seeking to make a resolution for a healthier New Year can also contact Employee Wellness at [wellness@jax.ufl.edu](mailto:wellness@jax.ufl.edu) or 244.9355 for resources and support groups, such as the Diabetes Prevention Program and more.

# MAKING RESOLUTIONS A REALITY





# FASTPASS

## TO STROKE RECOVERY

**Joseph Susdorf suffered a stroke on Monday and took his family to Disney World on Saturday thanks to the UF Health Comprehensive Stroke Program.**

Just after sunset on June 11, 2018, Joseph Susdorf stood at the entrance of Jacksonville International Airport, tapping his right hand but feeling nothing. In the short walk from the parking garage, a nagging numbness developed into a dead hand. The sensation quickly spread down his body.

Joseph collapsed to one knee and heard a police officer say, "He's having a stroke," before everything went black.

Meanwhile, waiting in the baggage claim area, Joseph's wife, Charoline, was growing concerned. He had dropped her off to greet her visiting family while he parked the car. What was taking so long?

The police officer answered Joseph's ringing cell phone and guided Charoline to the scene. She found him sprawled out, physically conscious but mentally unaware.

"His skin was pale and clammy, and his mouth drooped," she remembered. Screaming through tears, she tried to rally a response. "I called out his name and asked if he knew me. His eyes were blank. He tried to speak, but no words came out."

An ambulance whisked Joseph to UF Health Jacksonville. More flashing lights followed, with a police escort for Charoline and her family.

"Within minutes, a doctor told me, 'I need your permission to administer tPA,'" she said.

### tP-what?

Known as a clot-buster, tissue plasminogen activator dissolves the blood clots that cause ischemic strokes. These strokes account for 85 percent of strokes each year in the United States. There is only a four-and-a-half-hour window to administer the medication following the onset of a stroke. Scared and confused, Charoline relied on the medical staff to help her decide.

"How good is it?" she asked. The doctor said, "One in three recover."

She signed the paperwork.

Immediate treatment can be life-changing, says Scott Silliman, MD.

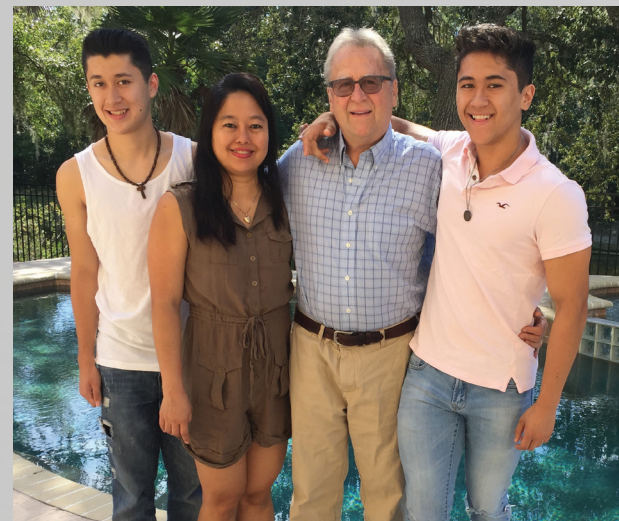
"A clot in an artery on the left side of the brain has potential to leave someone unable to speak or to understand," he said. "Unable to read or write as well."

### Stroke care from a stroke care innovator

Silliman is a founding physician and the current director of the UF Health Comprehensive Stroke Program. He arrived at the hospital 22 years ago — the same year tPA gained FDA approval.

The professor of neurology participated in a pre-approval clinical trial for tPA in the early 1990s and keeps an original tPA medication bottle displayed in his office. A white label containing medical jargon scripted by an electronic typewriter





*Joseph Susdorf, third from left, with his wife, Charoline, and their two sons, not long after his stroke.*

validates its contents as well as its age.

The souvenir contains only a few droplets, a progenitor to the fluid used to save Joseph.

Neurology specialist Nikola Jovanovic, MD, and a team of emergency room physicians and staff acted quickly, administering tPA through an IV in Joseph's arm.

"The tPA went in and blasted part of the clot out," Joseph said, bringing his fingers together on his forehead and quickly snapping them out. "After that? Bang. My right arm and leg popped up."

Because a remaining portion of the clot continued to obstruct a cerebral artery, Joseph qualified for a thrombectomy.

"It's a new strategy," Silliman said. The clinical trials were published in the *New England Journal of Medicine* just two years earlier. "Adding clot retrieval to tPA in certain patients has changed the landscape of recovery. The two-step strategy results in an overall reduction in disability compared with intravenous tPA alone."

During the procedure, Dan Siragusa, MD, chief of interventional radiology, and his team guided a catheter that contained a stent-based retrieval device through Joseph's circulatory system and extracted the remainder of the clot from the brain artery.

"They went into an artery," Joseph said, pointing to his inner thigh. He wrapped his left hand around his right-hand fingers, then yanked them out with force. "They sucked everything out that they blew apart."

### Other plans

Joseph does not remember any of it firsthand. Doctors said he was awake throughout the procedure, though not alert. His first memory is Charoline by his side in the Neuro Intensive Care Unit.

"I told her, we've got to get out of here." Plans had been made for the visiting in-laws. "We need to get to Disney World."

Michael Pizzi, MD, who specializes in neurocritical care, and his team closely monitored Joseph over the next three days.


"Blood vessels can break, and hemorrhage in the brain can occur in some patients following tPA treatment and/or clot retrieval if their blood pressure is not kept below certain parameters," Pizzi said.

Once Joseph moved from intensive care to another unit, the neurology team found that he had an irregular heartbeat called atrial fibrillation. This condition is associated with a higher risk of clot formation within an upper heart chamber, the likely cause of Joseph's stroke. An oral medication that thins the blood was prescribed to reduce the risk of future stroke.

"I was really impressed with his wife," Silliman said. "Charoline was on board with continuing his care at home from the start."

After five days at UF Health Jacksonville, Joseph made good on his promise to the visiting family members. He spent one night in his own bed, then got up early the next morning and took them to Disney World.





# THE *Calm* AFTER THE STORM

In the aftermath of Hurricane Michael in October, one UF Health physician traveled to Panama City to provide medical support for an urban search and rescue team.

If you have ever experienced a major hurricane, you're familiar with the eerie quiet that follows. With no electricity, no running water and no cars on the road, the silence is palpable.

That was the scene for one Panama City woman after Hurricane Michael ravaged the Gulf Coast. In the wake of so much destruction, everything was quiet and still — oddly peaceful — until the contractions started.

For a first-time expectant mother, full-term with twins, the silence must have been deafening. The stillness and isolation, terrifying. Between her and the nearest accessible road, there lay almost a mile of downed pine trees. There was no power, no water and no way out.

And then, a distant hum of chainsaws broke the silence. Salvation, in the form of the Florida Task Force 5 Urban Search and Rescue unit, was on the way.

"We cut through a good three-fourths of a mile of downed trees to get to her, to get her out and to the hospital after the storm," said Carolina Pereira, MD, UF Health Jacksonville disaster medical officer, associate professor of emergency medicine for the University of Florida College of Medicine – Jacksonville, and three-year veteran of Task Force 5 USAR.

The team, consisting of 47 people and two canines, is primarily staffed by Jacksonville Fire and Rescue workers. Pereira, whose training is in emergency medicine with a subspecialty in prehospital care and disaster medicine, serves as medical support for members of the team.

When Michael hit, they were the first group of responders in Panama City. The team had predeployed to Mobile, Alabama, on Oct. 9. The storm made landfall at 1:40 p.m. the next day, and it wasn't long before the calls started coming in. Multiple nursing facilities had collapsed. All but one area hospital were down.

"We started getting a ton of calls telling us to just get in there," she said.

Pereira's group was the first to arrive. The first order of business is always to get the task force's camp set up, then fan out and begin looking for anyone who needs help. The USAR team works a search grid across the affected area.

"In the first couple of days, we're helping people who are stuck and can't get to food or water — the absolute basics," Pereira said.

Task Force 5 USAR spent 10 days in Panama City after Hurricane Michael. Pereira doesn't have ready access to statistics on exactly how many victims they were able to help, but the group's impact can be measured in other ways. The mother who was stranded behind a long stretch of downed trees safely delivered two healthy babies.



# Helping the Helpers

**A box truck carrying supplies for victims of Hurricane Florence overturned in Jacksonville, injuring one of the volunteers and putting the relief mission in jeopardy. The team at UF Health TraumaOne got the group back on the road.**

UF Health TraumaOne treats more than 4,000 patients in a single year. It's an impressive number, but the scale is truly staggering when you consider the impact of helping just one person.

For the past six years, Timothy Arce has organized hurricane relief drives in the Florida Keys. He and fellow volunteers Wood Campbell, Troy Gilchrist and Lacey Wassenaar were bringing supplies to help those affected by Hurricane Florence in the Carolinas, when suddenly it was Arce who needed help.

"I was knocked out," he said. "I woke up and saw six feet trying to kick out the windshield. I came to, stood up, immediately fell down, got my wits about me and figured out what was going on."

Arce's truck, one of three loaded down with more than \$20,000 worth of relief supplies on that September morning, had overturned on Interstate 95 about three miles south of UF Health Jacksonville. He had sustained significant injuries, but there was no time to worry about that right away.

Arce and the others immediately went to work salvaging what they could from the crashed truck. It had been filled with 12 pallets of water, some of which had shifted, causing the accident.

Normally, their group wouldn't be hauling so much water. They know from experience that water is typically the first service to come back online after a storm. But flooding in low-lying agricultural areas of South Carolina meant the water supply could be contaminated for months.

"We ended up getting a third truck and loading that with just water. That was the truck I was in," Arce said. "It was the most dangerous truck to drive."

As the volunteers scrambled to save what they could, nobody mentioned Arce's head wound. He hadn't noticed due to the

combination of shock and adrenaline. But once the wreckers arrived, Arce stumbled and vomited on the side of the highway.

"Shoot, maybe we should go to the hospital," he said. "My intentions were to go ahead and jump in one of the other two trucks, refuel and get up there."

When somebody finally showed him his head with their phone's selfie camera, those plans changed. Arce checked into the Emergency Department at UF Health Jacksonville and was immediately transferred to TraumaOne with extensive road rash.

Although his injuries were not life-threatening, road rash and lacerations that have to be repeatedly cleaned and dressed can be extraordinarily painful. Still, Arce kept a positive attitude that had a profound impact on his caregivers.

"He was more worried about getting those supplies to the people who needed them than he was concerned about himself," said Teresa Calvert, a trauma resuscitation nurse who recently celebrated her 25th year with UF Health Jacksonville.

Arce was discharged that same afternoon. He and his group spent the night in a hotel near Jacksonville International Airport and parted ways the following morning. Arce boarded a flight bound for the Keys, back home to recover, while the rest continued north with the remaining two trucks.

They delivered the supplies to two churches, one hurricane shelter and an animal shelter in critical need.

"I can't say enough good things about the folks at your hospital," Arce said. "They were unreal. As far as care goes, as far as keeping me calm goes, and laughing at my corny jokes, the people there were absolutely fantastic."



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## OPENLINES

### NEWSLETTER DEADLINES

April – Feb. 6  
May – March 6

Submit your copy and photos via  
email to [openlines@jax.ufl.edu](mailto:openlines@jax.ufl.edu).

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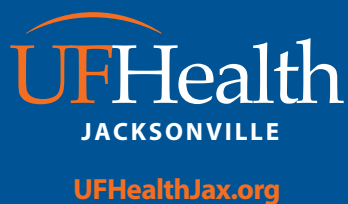
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