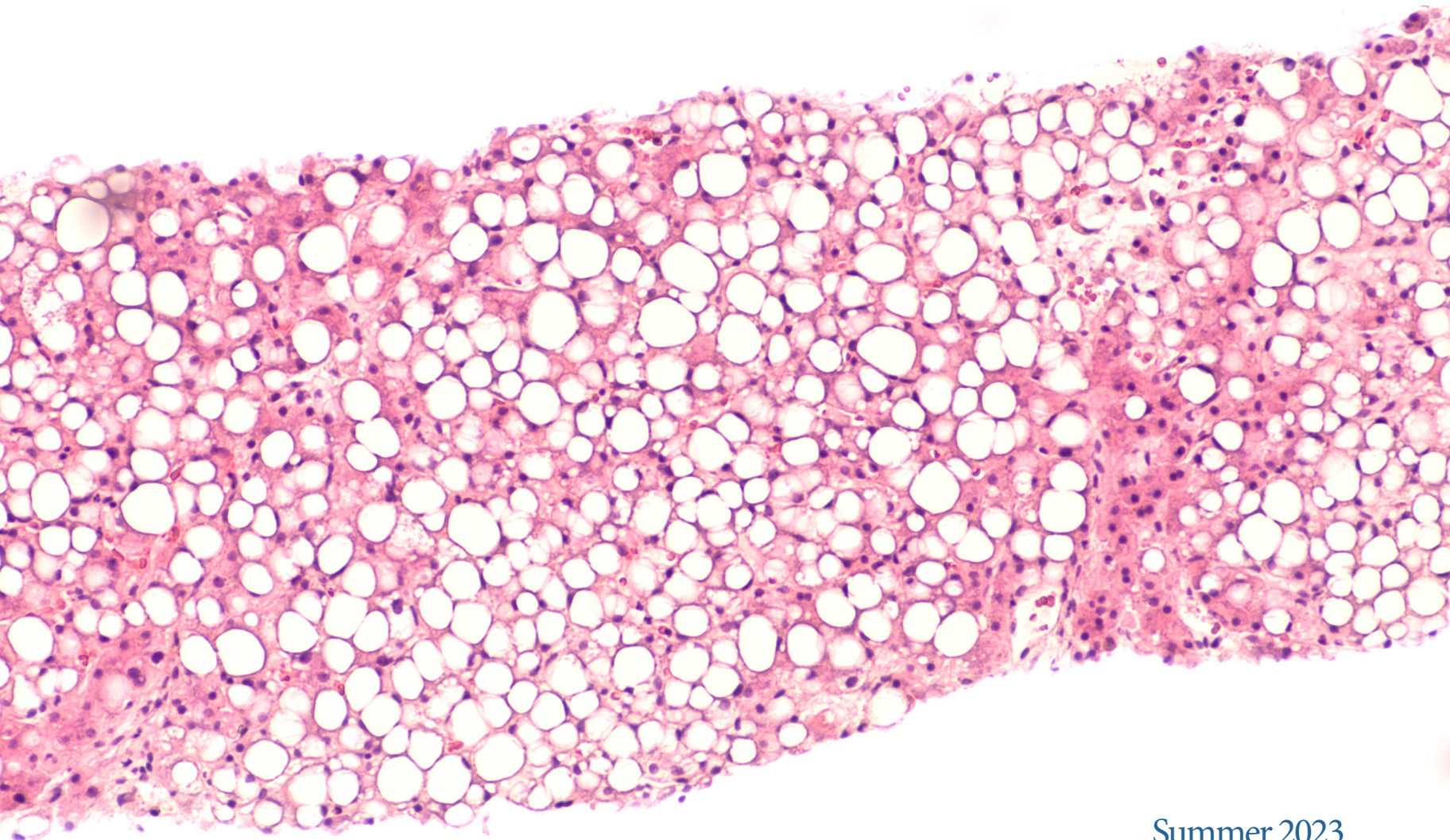




Fairfield Medical Center

# CLINICAL *Connections*

A Publication for Providers & Staff



Summer 2023

# Managing Hepatic Disease

## An Investigative Mindset

The liver is associated with many systems throughout the body, but perhaps none more than the digestive tract. As a gastroenterologist, Isabel Manzanillo-DeVore, DO, and her team at Fairfield Healthcare Professionals Gastroenterology have been keeping a particularly close eye on this critical structure.

"Alcohol use disorder has always been a strong determinant of health, and the numerous stressors of the pandemic seem to have exacerbated the problem," said Dr. Manzanillo-DeVore. "Unfortunately, we're seeing those repercussions in a really devastating way when it comes to liver disease."

For patients with previously diagnosed or suspected liver disease, alcohol abuse can hasten the development of irreversible damage. Additionally, those with a healthy liver who routinely exceed the recommended alcohol limit of one beverage/day for women or two beverages/day for men can wreak havoc on the organ. Symptoms of liver disease are slow to manifest, which means screening labs, behavioral intervention and prompt referral can help mitigate detrimental outcomes.

"Not all liver disease is preventable or attributable to alcohol use," Dr. Manzanillo-DeVore added. "We take a comprehensive approach to evaluating and managing all types of hepatic disease."

### Diagnosing ARLD and NAFLD

Alcohol-related liver disease (ARLD) and non-alcoholic fatty liver disease (NAFLD) are two commonly diagnosed hepatic ailments. With both conditions associated with varying degrees of steatosis, hepatitis, cirrhosis and potential malignancy, differentiating the root cause can be challenging.

"Diagnosing liver disease requires an investigative mindset," said Dr. Manzanillo-DeVore. "We want to know about family history to explore genetic or metabolic links, as well as lifestyle choices to determine a connection to substance abuse or diet – and we want to do all of this in a judgement-free zone."





In addition to a thorough patient history, clinical parameters based on a patient's gender, body habitus and blood values can assist in determining causative factors. Regardless of etiology, accurately staging the disease is paramount to management. While liver biopsy is considered the gold standard of care, elastography in conjunction with serology can offer comparable results with lower risk of complication.

To evaluate liver disease, Fairfield Medical Center utilizes minimally invasive FibroScan™ technology to determine the presence and level of fibrosis. Dual testing functionality, stiffness assessments and controlled attenuation rates can offer valuable insight to patients with abnormal liver function, diabetes mellitus, NASH, HBV, HCV and chronic abdominal pain.

"This diagnostic modality can be performed in an outpatient setting, making it accessible with no pain, no preparation and virtually no delay in evaluating results," Dr. Manzanillo-DeVore said. "We use it in gastroenterology, but it's also an important tool for infectious disease practitioners and primary care providers as we work together to manage these potentially chronic and progressive conditions."

**Treating ARLD and NAFLD**

Most patients with confirmed liver disease should follow up with a gastroenterologist or primary care provider every 3-6 months for monitoring of their condition, including repeat labs and imaging. If cirrhosis is part of the disease process, endoscopic screening for esophageal varices is necessary.

Like many diseases characterized by organ dysfunction, management of liver disease focuses largely on minimizing harm through prevention rather than complete restoration. Depending on the differential diagnoses, medication may be prescribed to decrease inflammation and support hepatic function. Most importantly, however, is a commitment to appropriate lifestyle changes.

"We don't have treatments like dialysis for the liver. Once the liver stops working, we're really out of options. Even liver transplants aren't necessarily curative," Dr. Manzanillo-DeVore said. "We have to do everything we can to protect the function that remains, and I would urge any patient who has concerns about alcohol addiction to pursue a rehabilitation or cessation program as soon as possible."

**Local resources: alcohol, substance abuse and mental health**

Seeking appropriate resources and assistance is a vital first step in addressing addiction. Structured, supportive and professional environments can help patients regain a healthy lifestyle. For additional resources, patients may call 211 for essential community services.

**Fairfield County ADAMH**

108 W. Main St., Ste. A, Lancaster  
740-654-0829

**Ohio GuideStone**

111 S. Broad St., Ste. 209  
844-622-5564

**New Horizons Mental Health Services**

2660 Kull Rd., Lancaster  
740-277-6166

**Fairfield Community Health Center**

220 W. Walnut St., Lancaster  
740-277-6043

**The Recovery Center**

201 S. Columbus St., Lancaster  
740-687-4500

**Meet the team: Fairfield Healthcare Professionals Gastroenterology**

The team at Fairfield Healthcare Professionals Gastroenterology is composed of physicians and advanced practice providers who are focused on expanding care and improving digestive health. In addition to our certified nurse practitioners, Steven Cox, MD, is currently managing routine screenings and follow-up care while gastroenterologists Seth Levin, DO, and Isabel Manzanillo-DeVore, DO, facilitate complex or acute gastroenterology cases.



**To refer a patient to FHP Gastroenterology, contact 740-687-9182.**

*Pictured on page 2: Isabel Manzanillo-DeVore, DO, with a patient*

*Pictured: (top row) Isabel Manzanillo-DeVore, DO; Seth Levin, DO; Steve Cox, MD (bottom row) Jill Davisson, CNP; Tonia Dunnigan, CNP; Angela Welch, CNP*



## Biomarker testing to assist with early detection, treatment of cancer



Roopa Saha, MD

FMC was recently one of three facilities in the U.S. to be accepted into a program by the Association of Community Cancer Centers (ACCC), which focuses on the development of biomarker testing workflow for stage-IV non-small cell lung cancer (NSCLC) patients in rural cancer programs. Upon completion of the project in April 2023, ACCC invited FMC to the “Practical Insights on How to Improve Biomarker Testing” webinar to present the overall findings and successes from the program. Roopa Saha, MD; Chad Stoltz, MBA-HM, BSN, RN; and Celeste Schmelzer, MSN, RN, represented FMC Cancer Services alongside doctors from across the country.



Chad Stoltz,  
MBA-HM, BSN, RN

The newly refined biomarker testing workflow, paired with FMC’s partnership with Integrated Genetics and the investment in Intuitive’s ION robotic technology, has led to more comprehensive and efficient patient experiences. FMC is one of a few hospitals in the state to invest in ION technology, which is designed to beat lung cancer in the earliest stages by allowing biopsy samples to be taken from nodules anywhere in the lung immediately after detection. If a sample is determined to be cancerous, biomarker testing can be ordered, leading to more informed decisions about the cancer for both providers and patients.



Celeste Schmelzer,  
MSN, RN

The development of genetic counseling and risk assessment in partnership with Integrated Genetics has allowed FMC Cancer Services to streamline its process of identifying and counseling patients who are considered at risk for familial or hereditary cancer syndromes. Patients are screened in-office and, if the results are positive, FMC’s oncology nurse navigators assist with the consultation and testing process with Integrated Genetics.

Source: Association of Community Cancer Centers

### Biomarker testing

Biomarker testing can be ordered by any provider, allowing them to:

- Decide what targeted therapies will work most efficiently for the patient
- Determine patient’s risk of cancer recurrence
- Gauge how quickly the cancer may grow or spread

Biomarker testing allows patients to:

- Make more informed decisions about cancer treatment and prevention
- Gain more information about their cancer risk and specific type of cancer
- Have a more streamlined experience with treatment and avoid those that are not likely to help



**For more information on ordering biomarker testing, contact FHP Hematology Oncology at 740-687-4505.**

## FMC performs first Tactiflex case in Central Ohio

FMC’s electrophysiology (EP) team recently performed the first Tactiflex case in Central Ohio. The Tactiflex ablation catheter, created by Abbott and recently approved by the FDA, works seamlessly with FMC’s advanced cardiac mapping system to improve precision when treating arrhythmias. The innovative design includes a catheter tip that flexes when in contact with the heart wall, allowing for more accuracy as the heart beats during ablation procedures. FMC is proud to offer this technology, and grateful to have a team dedicated to safe, effective and high-quality arrhythmia care.



**For more information on Tactiflex, contact EP, Cardiology at 740-689-4480.**



Pictured: FMC EP team members Maddy Burt, Erin Hoffman, Sara Crispin and Brandee Stemen pose with Dr. Alex Hattoum and Abbott representatives following the first Tactiflex case.

## One step at a time: Team helps patient with anxiety disorder undergo cardiac procedure



Michael Reinig, DO

Amanda Reynolds, 54, began experiencing frequent episodes of supraventricular tachycardia (SVT) in May 2021. Initial medication management was unsuccessful, and higher dosages of antiarrhythmic drugs were contraindicated by Amanda's worsening asthma symptoms. She was then referred to Fairfield Healthcare Professionals Cardiology for consultation, where she met with cardiologist Michael Reinig, DO.

For Amanda, pursuing medical intervention was further complicated by a severe anxiety disorder. At her first appointment with FHP Cardiology, the closed-door exam room triggered a specific condition known as cleithrophobia, or a fear of being trapped. As a result, Amanda was unable to focus on the treatment plan provided to her.

"Unfortunately, I heard nothing Dr. Reinig had to say," Amanda said. "I should have spoken up, but I didn't. When I called the office to explain what happened, they graciously scheduled a follow-up appointment, and Dr. Reinig answered all my questions with understanding and compassion."



Prepared to move forward, Amanda underwent a sedation-only electrophysiology (EP) study and ablation at Fairfield Medical Center. Utilizing advanced mapping technology, cardiologist Alex Hattoum, MD, pinpointed an unexpected culprit for the arrhythmia. While most cases of SVT are classified as atrioventricular node re-entrant tachycardia (AVNRT), Amanda was diagnosed with the less common atrial tachycardia.

"Amanda had a focal atrial tachycardia from the upper edge of the tricuspid valve," Dr. Hattoum said. "From a location standpoint, it was rare, and there's no question we needed mapping to identify it."

Amanda is grateful she was able to receive complex EP care at her hospital of choice. She credits FMC's staff and the EP team for keeping her calm, grounded and comfortable, sharing that she felt understood and incredibly cared for throughout the experience.



**To refer a patient for electrophysiology evaluation and intervention, contact Fairfield Healthcare Professionals Cardiology at 740-689-4480.**

*Pictured (above): FMC's Electrophysiology Team poses in hybrid operating room (left to right): Brandee Stemen, Dr. Michael Reinig, Ashlee Skibinski, Erin Hoffman, Dr. Alexander Hattoum, Maddy Burt, Megan Iser and Sara Crispin*

*(left) FHP Cardiology Patient Amanda Reynolds*



## Cholesterol-lowering injections help reduce risk of heart attack, stroke



Andrew Stiff, MD

Hyperlipidemia and hypercholesterolemia increase the likelihood of developing atherosclerotic plaque and associated cardiovascular conditions. Lifestyle modifications and lipid-lowering therapies, predominantly statins, are the mainstays of primary management; however, injectable therapies may provide an additional avenue for lowering LDL-C and reducing cardiovascular risk.



PCSK9 inhibitors like Repatha and Praluent work by improving the function of LDL receptors in the liver, increasing binding and clearance of cholesterol from the bloodstream. This mechanism makes the newer class of drug ideal for patients experiencing primary hyperlipidemia and/or familial hypercholesterolemia, and may be used alone or in conjunction with other therapies. Injections are typically given every 2-4 weeks, and may be done in the office or self-administered by the patient.

“So far, we’ve had great success with these drugs in our practice,” said Andrew Stiff, MD, an interventional cardiologist with Fairfield Healthcare Professionals Cardiology. “Any tool that helps reduce the risk of heart attack and stroke is valuable, and we’re continuing to expand that collection.”

For patients with poorly controlled lipid levels despite intervention, or those with complete statin intolerance, cholesterol-lowering injections should be considered as an adjunct or alternative treatment option. This therapy is given indefinitely for maintenance of acceptable LDL levels and is commonly covered by commercial insurance with financial aid available for qualifying patients.



**If you would like to refer a patient, or if you have additional questions, contact FHP Cardiology at 740-689-4480.**

## FMC & Nationwide Children’s Hospital resume pediatric care partnership

After a brief pause in select services, FMC reopened admissions for all pediatric patients on May 1. NCH’s four pediatric hospitalists are responsible for the well-baby nursery, attendance at all C-sections, newborn resuscitation, short-stay pediatric observation, ED consultation and pediatric support at FMC. This collaborative relationship provides comprehensive care to infants and children while keeping families close to home. If you are a pediatrician, family medicine provider or otherwise caring for patients of all ages, we encourage you to educate guardians on the availability of this vital resource. We have also implemented a seamless process for direct admission to expedite care and coordination.



Robin Rhodes, MD



Kara Tencza, MD



Jean Robertson, MD  
Medical Director



Jennifer Gibson, MD

### Direct admits are quick and easy:

- Call PerfectServe at 1-888-880-7205 and request “Pediatric Hospitalist” or text “Pediatric Hospitalist-FMC” on the PerfectServe app.
- You will be connected with a pediatric hospitalist to discuss your patient.
- We then take care of all the admission details.
- We will notify you with updates.



**NATIONWIDE  
CHILDREN’S**

*When your child needs a hospital, everything matters.™*

### Kicking the habit: Electronic cigarettes can complicate tobacco cessation efforts



Jarrod Bruce, MD

Vaping has steadily increased in recent years, especially among the younger generation. While healthcare professionals agree the trend is harmful for teens, its role in tobacco cessation for adults remains unclear. With less exposure to known carcinogens compared to combustible cigarettes, electronic cigarettes might be regarded as the lesser of two evils – but that doesn't mean they are safe.

"When electronic cigarettes originally came out, they were controlled and used as a tool to help people stop smoking," said pulmonary and critical care physician Jarrod Bruce, MD. "Unfortunately, now the market has been saturated with devices that are unregulated. We don't know what goes in them, which means we don't know the long-term effects."

Generally, Dr. Bruce and his colleagues at Fairfield Healthcare Professionals Pulmonology & Critical Care discourage using smoking modalities as a way to quit smoking, leaning instead on FDA-approved nicotine replacement strategies. Some patients, however, are reluctant to give up vaping devices. "Tobacco cessation is a difficult process, and for any plan to work, it needs to be built with input from the patient," Dr. Bruce said. "If a patient insists on using electronic cigarettes after we've educated them on the risks, then we move forward as we would with any other cessation method."

In addition to employing the 5 A's of intervention – ask, advise, assess, assist and arrange – and setting a quit date, Dr. Bruce recommends setting the following ground rules:

- Continued users only – do not encourage patients who are not currently vaping to adopt the habit
- No flavors to reduce appeal and limit additives
- No THC compounds
- Do not refill or mix cartridges
- Select lowest nicotine level possible
- Purchase same brand from same store for greater chance of consistency in unregulated market



**Dr. Jarrod Bruce is a provider with Fairfield Healthcare Professionals Pulmonology & Critical Care.**  
**To contact the office, call 740-689-6833.**

### Graduate Medical Education program prepares residents for the future

FMC is proud to contribute to the education and professional development of medical residents through its Graduate Medical Education (GME) program. This June, the GME program celebrated the graduation of its newest class of physicians and welcomed eight new residents, who will complete a three-year residency for board certification in family medicine or internal medicine.

GME has been in operation since 2010, with its first family medicine class graduating in 2013, followed by its first internal medicine class in 2015. Each residency training program is comprised of a physician program director, an assistant program director and a program coordinator. Further support for the department mission includes a medical director, supervisor, director of osteopathic education and student coordinators, as well as approximately 70 clinical faculty, who contribute to the education and professional development of the residents. To date, 14 graduates of the program have remained at FMC or in Fairfield County as local physicians.



*Pictured: GME residents Courtney Fortner and Casey Norris examine a manikin in the FMC Sim lab.*



**For more information about the Graduate Medical Education Program's application and selection process, call 740-687-8651.**



## Esophageal testing recommended for high-risk patients, regardless of symptoms

As an endoscopy tech, Bill Maffit cares for patients every day who have been diagnosed with gastroesophageal reflux disease but, until recently, had no idea that he was living with the same condition. "I used to cough a lot, but never thought much of it or suspected it might be a symptom of GERD," Bill said. "I would occasionally have some burning in my stomach but, for the most part, I could eat whatever I wanted."

In early 2023, Bill, 60, decided to take a DNA test offered at Fairfield Medical Center called EsoGuard™, which detects abnormal esophageal cells, including Barrett's esophagus, dysplasia and esophageal cancer. As a white male over the age of 50, Bill is considered at risk for developing esophageal cancer, which is what spurred him to get tested despite his lack of symptoms (see box for full list of criteria). When the results came back positive, he had a follow-up esophagogastroduodenoscopy (EGD) and wide-area transepithelial sampling (WATS) biopsy, which confirmed a diagnosis of Barrett's esophagus.

Heather Luttrell, RN, BSN, nurse coordinator for the Fairfield Medical Heartburn Center, said it's not unheard of for patients with GERD to exhibit few if any of the classic symptoms, such as heartburn, regurgitation or epigastric pain. Instead, they may present with more obscure GERD symptoms, such as a chronic cough, non-cardiac chest pain, excessive belching, a hoarse voice, nausea or vomiting. Oftentimes, patients tend to ignore their symptoms, not realizing they can be an indication of GERD. In addition, many patients don't realize GERD can lead to esophageal cancer, something that has often metastasized by the time it's found.

"The Caucasian male over 50 demographic makes up a large portion of our patient population, which is at higher risk for developing esophageal cancer," Heather said. "If you also take into account the other risk factors, that demographic becomes even larger, so we are trying very hard to prevent those individuals from falling through the cracks when it comes to testing. We recommend testing for anyone who meets at least three of the risk factors for esophageal cancer."

While a traditional EGD is considered the gold standard and preferred test for patients who have already been diagnosed with GERD and/or Barrett's esophagus, the EsoGuard™ test is a good screening tool for patients like Bill who are at a higher risk for esophageal cancer and may or may not experience heartburn occasionally. The test may also benefit patients who aren't agreeable to having an EGD, or who are in a higher risk category for esophageal cancer, but an EGD isn't necessarily indicated.

Following his diagnosis, Bill now takes a daily proton pump inhibitor (PPI) to help slow any further damage and is scheduled to get an EGD every three years. "Had I not been tested, I could have gone on for years not knowing I had anything wrong, only to be surprised later on with a cancer diagnosis," Bill said. "So I'm very grateful that I found it when I did."



### Risk criteria for esophageal cancer

Each criteria increases a patient's risk for esophageal cancer. These patients may benefit from the EsoGuard™ test:

- Male
- Caucasian
- Over age 50
- Tobacco use
- Alcohol use
- Obesity
- Heartburn
- 1st-degree relative diagnosed with Barrett's esophagus or esophageal adenocarcinoma

### Who is not a good candidate for EsoGuard?

- Patients with any contraindication to non-endoscopic intubation procedures
- Patients who are anti-coagulated or have bleeding diathesis
- Patients who are on anti-coagulant drugs that cannot be temporarily discontinued
- Patients with the following conditions:
  - Dysphagia
  - Esophageal stricture, diverticula or fistula
  - Esophageal varices
  - Esophageal ulceration
  - Pill swallowing phobias





## Programs help alleviate financial stress for patients in need of screenings, treatment

The cost of healthcare can often be a deterrent for patients who are uninsured and underinsured, causing them to delay or completely put off well visits and life-saving screenings. Resources such as the Breast & Cervical Cancer Project (BCCP) and the Ohio University Heritage College of Osteopathic Medicine Medical Mobile Clinic are helping patients like Catherine Brock, 33, of Lancaster, receive the care they need without the financial burden.

"It's scary to think about not having these programs – I don't know what I would have done," said Catherine, a breast cancer patient who applied for BCCP funding at the encouragement of her care team at Fairfield Medical Center. "It's not worth it to be so scared of the financial stress when it comes to your health. There are always ways to get through it."

The BCCP is offered through the Ohio Department of Health and offers free breast and cervical cancer screenings and diagnostic testing to qualified participants. The Ohio University Heritage College of Osteopathic Medicine Medical Mobile Clinic, which visits FMC several times a year, offers women's cancer screenings, including pap tests, pelvic and breast examinations, same-day mammograms and breast health education and navigation to patients, regardless of whether they are insured (see box).

Catherine said when she discovered a lump in her breast during a regular self-exam, she immediately contacted her favorite doctor, Emily Burnette, DO, of Fairfield Healthcare Professionals Obstetrics & Gynecology. Dr. Burnette's office was able to quickly get Catherine in for an initial appointment, where they directed her to Women's Health at FMC River Valley Campus for a mammogram and an ultrasound. The following week, she met with Scott Johnson, MD, of FHP General Surgery River View, for her breast biopsy. Three days later, she received her breast cancer diagnosis.

Worried about how she would financially handle the cost of cancer treatment and surgery, Catherine shared her concerns with her FMC care team. With their help, she learned that financial assistance was available to her. After she completed the initial application with the help of her nurse navigator, Catherine was able to transition her insurance to the BCCP Ohio Medicaid plan that will cover her medical treatment and healthcare. Genetic testing, which will determine whether Catherine will have surgery to remove the cancer before or after a follow-up round of chemotherapy, is also covered by this plan.

"It was scary, but then after the initial shock of finding something that's not supposed to be there, I was just like, okay, this is the reality now. I've got to deal with it and move forward, and they helped me do that," Catherine said.

### Financial assistance for cancer patients

Patients who would like to apply for Breast & Cervical Cancer Project Funding (BCCP) can obtain an application through <https://lickingcohealth.org/breast-and-cervical-cancer/>.

The Ohio University Heritage College of Osteopathic Medicine Medical Mobile Clinic visits FMC several times a year, with the next visit scheduled for December.

**When:** Thursday, Dec. 7, 9 a.m.-3 p.m.

**Where:** FMC River Valley Campus, 2384 N. Memorial Drive, Lancaster

**Registration:** To schedule an appointment, call 800-844-2654 or 740-593-2432.

*Pictured: Breast cancer patient Catherine Brock*



## New Providers

**Collin Gabriel, DO**

FHP Family Medicine of Millersport  
12135 Lancaster St., Millersport

**Residency/Family Medicine:**

Fairfield Medical Center

**Medical School:** Ohio University  
Heritage College of Osteopathic  
Medicine - Dublin

### WE'VE MOVED

#### Office Relocations

The Fairfield Healthcare Professionals Hematology/Oncology office has moved from its current location in Suite 301 to its new location at 135 N. Ewing St., Suite 202. This transition means the practice will remain in the same building, but the office site will change. The office began seeing patients in the new space at the end of July 2023.



James Obney, MD



P. Aryeh Cohen, MD

## FHP Cardiothoracic Surgery welcomes James Obney, MD

James Obney, MD, joins Fairfield Healthcare Professionals Cardiothoracic Surgery alongside P. Aryeh Cohen, MD. With a collaborative focus on quality and expansion, Fairfield Medical Center's physicians and advanced practice providers are committed to excellence in patient care.

"Fairfield Medical Center offers a number of specialty services that you wouldn't necessarily expect from a hospital this size," Dr. Obney said. "From cardiology and cardiovascular surgery to pulmonary medicine and critical care, these are highly trained specialists that you would typically find in a regional referral center. It's exciting to be part of an organization that offers advanced medicine in a such unique and connected setting."

FHP Cardiothoracic Surgery offers access to complex procedures, including:

- CABG
- Mitral and aortic valve replacement, including TAVR
- Robotic-assisted thoracic procedures
- ECMO placement



**For more information, or to refer a patient to FHP Cardiothoracic Surgery, contact 740-681-9020.**

*Do you have a patient who is recovering from a stroke or other neurological disorder or injury?*

## Neuro Support Group

*For patients, family members and caregivers, this support group is designed to provide connections and motivation to individuals who are going through the recovery process or rehabilitation, with a focus on improving communication and access to community resources.*

**NEW  
DATE**

**4:45-5:45 p.m.**

**3<sup>rd</sup> Wednesday of each month**

Outpatient Therapy Services – River Valley Campus  
2384 N. Memorial Drive, Lancaster, OH

*Meetings are held in the Conference Rooms (Columbus Street side). For questions, please call 740-689-6328.*



## Patient Experience

The following comments were submitted by FMC patients and compiled through Press Ganey.



### **Megan Brown, CNP, FHP Hematology/Oncology**

*"This is the first time I've seen Megan Brown, and she was awesome! Megan is knowledgeable and went over my cancer questions. She was just awesome!"*



### **Evin Jerkins, DO, FHP Sleep Medicine**

*"Dr. Jerkins has an easy, professional manner that inspires confidence. I am frustrated with my inability to use the breathing machines in the past; he made me feel like together, we could do this."*



### **Alyson Adams, CNP, FHP Cardiology**

*"Alyson listens and considers the whole person when giving advice. She makes you feel as if she really cares. She also helps you weigh your options. I feel in charge of my own health with expert guidance. Alyson is wonderful!"*



### **Sheryl Mascarenhas, MD, FHP Rheumatology**

*"Dr. Mascarenhas is an awesome physician! Very few exhibit the care and concern that she exhibits for her patients. She is the best I've ever had!"*



### **Jonathan Forquer, DO & Jeremy Buckley, MD, FHP Cardiology**

*"Dr. Forquer and Dr. Buckley are top of my list as the best in this town, and I've told many friends and family to get an appointment with them."*



### **Christian Tencza, MD & Ashley Wilkett, CNP, FHP Pulmonology & Critical Care**

*"Dr. Tencza and Ashley Wilkett have been fantastic. Couldn't ask for any better. They went above and beyond to help me after hours to keep me out of the ER."*

## Quick Reference



### **Fairfield Medical Center**

401 N. Ewing St., Lancaster, Ohio

740-687-8000

[fmchealth.org](http://fmchealth.org)



We are a nonprofit organization that provides full-service, general acute health services to more than 250,000 residents in Fairfield, Pickaway, Perry, Hocking and Athens counties.



In addition to our Main and River Valley campuses, we have more than a dozen satellite locations specializing in primary care, specialty care, urgent care, lab and imaging.



Fairfield Healthcare Professionals (FHP) is a multispecialty medical group of more than 90 providers owned and operated by FMC.

*Clinical Connections* is designed to share information about Fairfield Medical Center's medical staff, services and capabilities with healthcare providers in Southeastern Ohio.

If there is anything you would like to learn more about, or if you would like to be removed from our mailing list, please call 740-687-6929.





401 N. Ewing St.  
Lancaster, OH 43130-3371  
[fmchealth.org](http://fmchealth.org)

**Attn: Advanced Practice Nurses & PAs**

# Advanced Practice Provider *Symposium*

**Friday, Sept. 22, 2023**

Fairfield Medical Center River Valley Campus  
2384 N. Memorial Dr., Lancaster

**Cost:** In-person - \$110; Students - \$85  
(includes continental breakfast, lunch and  
refreshment station); Virtual - \$150



**6.5**  
contact hours  
available

Scan the QR code or visit  
[fmchealth.org/appeducation](http://fmchealth.org/appeducation)  
to register.

The Fairfield Medical Center is accredited by the Ohio State Medical Association (OSMA) to provide continuing medical education for physicians.

The FAIRFIELD MEDICAL CENTER designates this Hybrid activity for a maximum of 6.5 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

