

SPECIALIST



10

NYCBS EARNS TOP MARKS

NYCBS has achieved a perfect 100 out of 100 score in the Centers for Medicare & Medicaid Services'.

28

NYCBS PARTNERS WITH ONECOVERYCARE

To treat the chronic and late effects of cancer treatment and provide comprehensive cancer follow-up care for NYCBS patients.

34

STACI'S JOURNEY

An employee of NYCBS, was diagnosed with stage four breast cancer.

OUR MISSION

Is to deliver world-class, patient-centered and accessible care for those facing cancer and blood disorders in their own communities, close to the support of family and friends.

A MESSAGE FROM THE CEO



Dear Friends,

This month's issue of The Specialist is a reflection of both growth and purpose at New York Cancer & Blood Specialists (NYCBS). We are proud to welcome an exceptional group of new physicians to our practice. Each brings unique expertise and a shared commitment to delivering world-class, compassionate care close to home. Their arrival strengthens our mission to provide every patient with the highest quality of care, tailored to their individual needs.

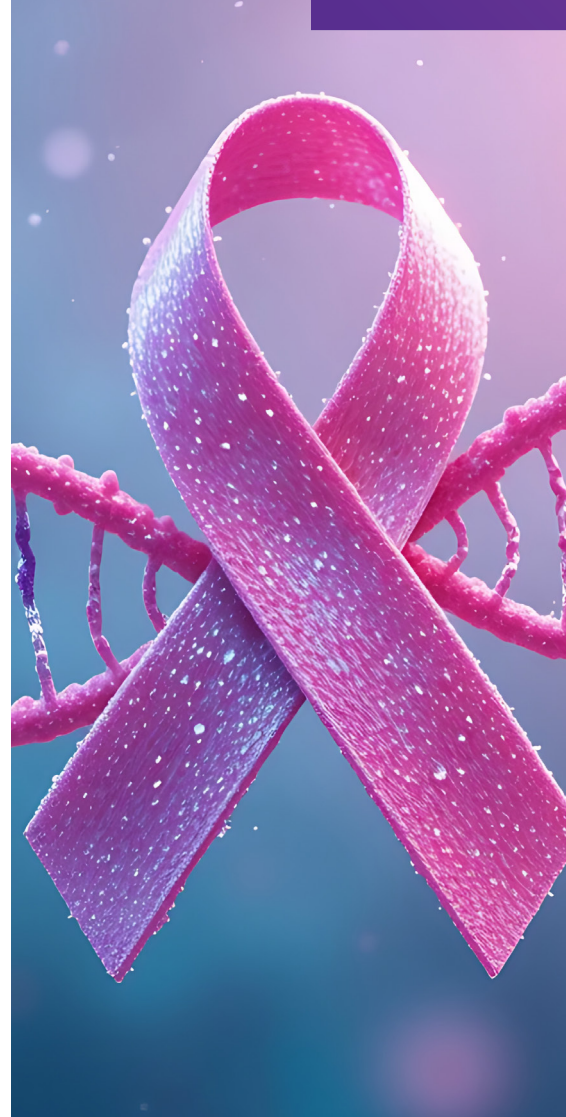
October also marks Breast Cancer Awareness Month—a time to honor survivors, support those in treatment, and remember those we have lost. At NYCBS, we are committed not only to advancing cancer treatments but also to ensuring prevention, early detection, and survivorship care are at the forefront of what we do. Our breast cancer team and our partners at NY Breast Imaging exemplify this dedication, offering leading-edge technology, innovative therapies, and a holistic approach to care.

As research continues to redefine cancer care—from targeted therapies to supportive services that improve quality of life—we remain steadfast in our mission: to stand by our patients at every stage of their journey. Together, with our patients, families, and community, we continue to make strides toward a future where cancer is not only treatable but preventable.

Thank you for being part of this journey with us.
Warm regards,

Dr. Jeff Vacirca

CEO, New York Cancer & Blood Specialists



6	Welcome to our Practice!	8	Breast Cancer Treatment: One Size Does not Fit all	10	NYCBS Earns Top Marks for Excellence in Patient Care	12	Mammography at NY Breast Imaging	14	NYCBS Expands: Access to Cancer Care Close to Home with new Washington Heights Center
16	Breast Cancer: Prevention & Early Detection	18	The importance of Further Breast Cancer Screenings for Women	20	Breast Self-Exam Techniques	22	NYCBS Announces: Opening of New Cancer Care Center in East Islip	24	Types of Exercise for Breast Cancer Patients
26	Breast Cancer Infographic	28	NYCBS Partners with OncoveryCare to Launch Cancer Survivorship Care	30	Breast Cancer, Psychological Well-Being, & the Importance of Supportive Care	34	Staci's Journey: A Story of Strength and positivity	36	Rediscover Life without Pain
37	A Journey Throughout the year	38	Join NYCBS in the Fight Against Breast Cancer						

We're excited to welcome the following new providers to NYCBS! These dedicated medical professionals continue to increase the standards for our practice, as we continue providing world-class, compassionate care close to home for our patients.



Dr. Hira Chaudhary is a board-certified hematologist-oncologist dedicated to advancing cancer care through innovative research and compassionate patient treatment. She earned her Medical Doctor degree from St. George's University and completed her Internal Medicine Residency at SUNY Downstate Medical Center, followed by her Hematology-Oncology Fellowship at Northwell Health.



Dr. Nyembezi Dhlwayo is a well-trained, highly skilled Medical Oncologist, Hematologist, and Internist also with expertise in Hospice and Palliative Care. Dr. Dhlwayo treats a wide range of adult complex oncological diseases, while focusing on breast cancer, lung cancer, melanoma, head and neck cancers, and genitourinary cancers including prostate cancer, bladder cancer and kidney cancers. She also treats benign and malignant hematological disorders including chronic myeloid and lymphoid leukemia, Multiple myeloma, sickle cell anemia and platelet disorders.



Dr. Alec Goldenberg is a board-certified medical oncologist and hematologist with over 40 years of experience in cancer care and research. He earned his Bachelor of Arts in Mathematics, Magna Cum Laude with High Honors, from Brandeis University, followed by his medical degree from The Johns Hopkins University School of Medicine. Dr. Goldenberg completed his internal medicine residency and served as Chief Medical Resident at Bellevue-University Hospitals. He then pursued fellowship training in Medical Oncology-Hematology at Memorial Sloan Kettering Cancer Center, where he also completed research fellowships as both a Dana Foundation Fellow and National Research Service Award recipient.



Dr. Junjing (J.J.) Guo is a well-trained highly skilled Medical Oncologist, Hematologist and Internist. Dr. Guo treats a wide range of adult complex oncological diseases, while focusing on gastrointestinal cancers, pancreatic and hepatobiliary cancers, breast cancer, prostate tumor and lung cancers; She also treats hematological disorders including Multiple myeloma, lymphoma, chronic myeloid and lymphoid leukemia, Myelodysplastic Syndrome, anemia and platelet disorders.



Dr. Gardith Joseph is a board-certified Medical Oncologist and Internist with over 25 years of experience providing expert cancer care, advancing clinical research, and mentoring the next generation of physicians. She completed her medical degree at the University of Seville School of Medicine in Spain. Subsequently, she trained extensively in General Pathology at the State University of New York at Brooklyn/Kings County Hospital, as well as in Internal Medicine and Hematology/Oncology at Long Island Jewish Medical Center/ Northwell Health System.



Dr. Fauzia Paracha -With over 20 years of experience treating cancer patients, Dr. Paracha is dedicated to providing compassionate, personalized care for each of her patients while also helping them navigate their treatment journey. Dr. Paracha provides comprehensive cancer care including administering chemotherapy, performing specialized procedures, and helping manage symptoms to improve her patients' quality of life.



Dr. Hitendra Rambhia is a board-certified hematologist-oncologist with over three decades of experience. He currently serves as Hematology/Oncology Faculty at One Brooklyn Health, encompassing Interfaith, Brookdale, and Kingsbrook Jewish Medical Centers in Brooklyn, New York. Dr. Rambhia earned his MBBS from G.S. Medical College, University of Bombay, before completing his internal medicine residency at Catholic Medical Center in New York.



Dr. Samridhi Sinha is passionate about providing excellent care to all patients. She earned her medical degree from the New York Institute of Technology College of Osteopathic Medicine and completed her training in residency in Internal Medicine and fellowship in Hematology/Oncology at The Brooklyn Hospital Centre, where she also served as Chief Resident.



Dr. Jung-In Yang received his medical degree in South Korea and completed his training in Internal Medicine at Jacobi Medical Center in the Bronx, followed by specialized training in cancer care at Northwell Health Cancer Institute on Long Island. Dr. Yang's research centers on finding better treatments for pancreatic and colon cancers by helping the body's immune system fight these diseases more effectively.



BREAST CANCER TREATMENT

One Size Does Not Fit All

Today, the conversation around breast cancer is shifting toward personalized, patient-centered care. Rather than a “one size fits all” approach, new research emphasizes tailoring treatments to individual needs, particularly in early-stage breast cancer, where outcomes can be most favorable.

One of the most significant developments is the introduction of newer, targeted therapies for high-risk early breast cancer. CDK4/6 inhibitors, including ribociclib and abemaciclib, are now also available for patients with earlier-stage diagnoses, despite having been previously used only in metastatic disease. These advances give women powerful treatment options that can reduce the risk of recurrence. Raising awareness of these breakthroughs will empower patients to ask their oncologists whether these therapies may be suitable for them.

Another key trend is the de-escalation of treatment to minimize toxicity without compromising effectiveness. De-escalation can significantly help reduce the side effects of certain chemotherapy drugs. Historically, providers prescribed chemotherapy agents like carboplatin, even though not all patients needed them. Recent studies now show that for certain early-stage, HER2-positive breast cancers, providers can safely omit carboplatin, which spares patients unnecessary side effects. This shift reflects a broader movement toward precision medicine, which delivers the proper treatment.

Additionally, Dr. Yelda Nouri, a medical oncologist & hematologist at New York Cancer & Blood Specialists (NYCBS), explains the critical importance of supportive care. “Patients today are encouraged to explore strategies such as scalp cooling (“cold



THE GOAL IS TO HELP PATIENTS NOT ONLY SURVIVE BUT ALSO MAINTAIN THEIR STRENGTH AND WELL-BEING DURING AND AFTER THERAPY.

capping”), acupuncture, physical therapy, and other approaches to manage side effects and improve quality of life throughout treatment,” said Dr. Nouri. “The goal is to help patients not only survive but also maintain their strength and well-being during and after therapy.”

Lifestyle interventions are also gaining recognition. The BWEL Trial (Breast Cancer Weight Loss Trial) has shown promising results linking physical activity and weight management programs to improved outcomes. Women

who engaged in structured exercise and received coaching achieved better weight loss and may reduce their risk of recurrence. While not all programs are available in clinical settings, these findings underscore the importance of incorporating physical activity into survivorship care.

Ultimately, breast cancer care in 2025 is about empowerment, precision, and transformation. As Dr. Nouri notes, “Patients may never return to being exactly who they were before their diagnosis, but they transform as a new

version of themselves, having conquered one of life’s greatest challenges.”

At NYCBS, their breast cancer care team ensures that you receive compassionate, personalized treatment, always tailored to your specific conditions or ailments, close to home.

To schedule an appointment at NYCBS, please call 1 (833) CANCER9.



NYCBS EARNS TOP MARKS

For Excellence In Patient Care

New York Cancer & Blood Specialists (NYCBS), one of the nation's leading oncology practices, has achieved a perfect 100 out of 100 score in the Centers for Medicare & Medicaid Services' (CMS) Merit-based Incentive Payment System (MIPS) for 2025 — a recognition that reflects its continued commitment to exceptional, patient-centered cancer care.

The MIPS program evaluates healthcare organizations on a national scale, measuring everything from the quality of care to patient access, technology, and cost management. Achieving a perfect score is no small feat — it requires consistent excellence across every area of patient care and operations. "This recognition is a testament to the dedication of every member of our team," said Dr. Jeff Vacrica,

ACHIEVING THIS PERFECT SCORE UNDERSCORES OUR MISSION TO PROVIDE WORLD-CLASS CARE CLOSE TO HOME.

CEO of NYCBS. "Our focus has always been on putting patients first — whether through advanced treatments, seamless care coordination, or strong data protections. Achieving this perfect score underscores our mission to provide world-class care close to home."

THE CMS MIPS PROGRAM SCORES PRACTICES ACROSS 4 MAIN CATEGORIES

1

Quality: Measures outcomes, patient care experience, and preventive services such as screenings, vaccinations, and care planning.

2

Improvement Activities: Recognizes clinical initiatives that improve patient care, including tumor registry participation, depression screening, and continuous quality improvement projects.

3

Promoting Interoperability: Rewards practices that leverage secure technology to improve communication and care coordination. NYCBS's CareSpace patient portal, for example, allows patients to easily access lab results, manage appointments, and stay engaged in their treatment.

4

Cost: Evaluates how effectively a practice delivers high-quality care while reducing unnecessary hospital visits and minimizing costs for patients. In addition to its perfect score, NYCBS received bonus points for managing complex patient cases and for its strong data security and privacy protections—further demonstrating its commitment to both safety and innovation.

For NYCBS, this recognition represents more than just a score. It affirms the organization's belief that exceptional cancer care comes from combining medical expertise, advanced technology, and compassion. Every physician, nurse, and staff member plays a role in ensuring that patients not only receive top-quality treatment but also feel supported every step of the way.

As NYCBS continues to expand its services across Long Island, New York City, and Upstate New York, this achievement underscores a guiding principle that has long defined the practice: world-class care, delivered close to home.

For more information, visit nycancer.com.

MAMMOGRAPHY AT NY Breast Imaging

NY Breast Imaging integrates advanced diagnostic imaging, cancer support services, and comprehensive women’s health. We are committed to preventing, detecting, and treating breast cancer using the most advanced technology available, including 3D mammography, breast ultrasound, and breast MRI. Our board-certified radiologists are leaders in the field and collaborate with a multidisciplinary team of specialists to provide the highest quality and most personalized care.

OUR SERVICES



Breast Biopsy is a procedure to remove a sample of breast tissue for testing, which is sent for testing to provide a diagnosis.



Breast MRI Magnetic resonance imaging (MRI) of the breast uses radio waves to produce detailed pictures of the structures within the breast. MRIs screen women at high risk for breast cancer, evaluate the extent of cancer following diagnosis or further evaluate abnormalities seen on mammography.



Breast Ultrasound uses sound waves and their echoes to make computer pictures of the inside of the breast.



3D Mammography are low-dose x-rays that can help find breast cancer. Our services include digital screening and diagnostic mammography. This state-of-art-technology will ensure that you receive the most effective imaging possible.



Dr. Corinne E. Tobin serves as Chief of Breast Imaging, and is a board-certified and fellowship-trained breast imager with over 25 years of experience in the field. Dr. Tobin has expertise in all aspects of breast imaging including interpretation of 3D mammography, breast ultrasound, breast MRI and the performance of all breast interventional procedures.



Dr. Stacey Gandhi is a board-certified breast imaging radiologist and serves as Breast Imaging Director. She is skilled in all aspects of breast imaging, including mammography, tomosynthesis, ultrasound, MRI, and interventional procedures.



Dr. Krystal Airola is a board-certified fellowship-trained radiologist who has devoted her training and career to serving patients and aims to provide personalized, quality care.



Dr. Julian Safir is a board-certified radiologist with over 27 years of experience. Dr. Safir received his Doctor of Medicine from the University of Maryland. He completed his diagnostic radiology residency at the Albert Einstein College of Medicine/Montefiore Medical Center and his fellowship in MRI at New York University Medical Center.



Dr. Jennifer Ripton-Snyder is a board-certified Breast Imager, specializing in Breast Imaging and Pediatric Radiology. Dr. Ripton-Snyder completed her Doctor of Medicine at Stony Brook University Medical Center (SBUMC).



Dr. Kristine Pysarenko is a fellowship-trained breast imager with experience in all aspects of breast imaging, including interpretation of 3D mammography, breast ultrasound, breast MRI and the performance of all breast interventional procedures.



Dr. Tiffany Newman is a board-certified breast radiologist specializing in all aspects of women’s imaging. She interprets all breast imaging studies and performs breast biopsies in all modalities (ultrasound, mammography, MRI).



Dr. Cathleen Heffernan is a fellowship-trained breast imaging radiologist, who currently practices at East End Health & Imaging Center. She earned her Bachelor of Arts in Biology with departmental honors from Hamilton College and her MD from New York University Grossman School of Medicine.

NYCBS EXPANDS

Access to Cancer Care Close to Home with New Washington Heights Center

On June 2, 2025, we proudly opened our new cancer treatment center in Washington Heights, continuing our mission to bring compassionate, high quality care close to where patients live and work. Located at 500 W 181st Street on the 9th Floor, this modern facility brings high quality cancer care to one of Manhattan's most vibrant and diverse neighborhoods.



NY IMAGING WASHINGTON HEIGHTS

STATE-OF-THE-ART RADIOLOGY CENTER
FULL RANGE OF DIAGNOSTIC IMAGING SERVICES

PET/CT • MRI • CT • MAMMO • US
BREAST BIOPSY • X-RAY

Services:

- Medical Oncology
- Hematology
- Radiology
- Clinical Trials





OCTOBER IS BREAST CANCER AWARENESS MONTH.

It is a time to sport your pink ribbons in support of all those who have fought, are fighting, or have lost their battle to breast cancer. However, though the most significant risk of breast cancer is female, it is not genderless cancer, and men are at risk too. When it comes to breast cancer, here's everything everyone should know to help aid in early prevention:

WHEN SHOULD SCREENING START?

It's estimated that women who get regular breast cancer screenings increase their chance of survival by around 47 percent. Yet, breast cancer is still the second leading cause of cancer death among women in the United States. When to screen will depend on your age and family history. The average year to start a yearly mammogram is between 40 and 44 and will decrease as you age.

FACTORS THAT INCREASE YOUR NEED FOR SCREENING

Average risk is defined as those who have no symptoms, no history of breast cancer (personally or in your family history), or those who have no history of mantle radiation. However, if you have any of the above, you may be at an above-average risk for breast cancer.

SOME OTHER REASONS THAT CAN INCREASE YOUR RISK INCLUDE:

- History of atypical hyperplasia
- History of lobular carcinoma in situ
- Genetic predisposition such as a BRCA mutation

Depending on your risk factors, mammograms might begin earlier than 40 years of age, while others might require breast MRI or ultrasound if dense breast tissue is present. For those who have a strong family history of this disease, genetic testing may help you better understand your risk factors; high-risk patients may start mammograms as early as 25 years of age. However, no matter your genetic makeup, at-home checks should occur monthly about 3 to 5 days after your period — but are not limited to just women.

THE IMPORTANCE OF AT HOME CHECKS FOR ALL

Before screenings even begin, it's important to do monthly at-home checks. Though this is often educated and pushed to females, men should often do them as well. Beyond feeling for lumps and or any changes, you'll also want to look for signs of fluid coming from the nipples, changes in the skin such as dimpling or pucker, redness, rash, or swelling.

Men should often check by placing their fingers flat against the breast to push firmly in a small, clockwise circle, starting at the outermost top edge and working towards the nipple, and ideally looking for any lumps, bumps, or changes in the skin. Finally, check both nipples for discharge or change of appearance.

If anything feels off or different, contact your doctor for a more detailed examination.



THE IMPORTANCE

Of Further Breast Cancer Screenings For Women

Breast Cancer Awareness Month helps women prioritize their annual mammograms for early breast cancer detection. The American College of Radiology recommends that women at average risk start scheduling yearly mammograms at age 40. Additionally, women at greater risk should be aware that further screening beyond mammography may be needed, and should begin screening between 25 and 30 depending on their individual risk.

It is important for those with certain risk factors including genetic predispositions, strong family history, dense breasts, and prior chest radiation exposure to inquire about obtaining additional breast screening.

"Women should empower themselves to be in control of their own health care, and know what questions to ask their physicians" said Dr. Corinne Tobin, Chief of Breast Imaging at New York Breast Health. She continued, "They should, with their physicians, go through their medical profiles and see if they are a candidate for supplemental breast cancer screening." These supplemental breast screening modalities include breast MRI and breast ultrasound.

The two types of risk assessment tools most often used to determine if a woman is a candidate for supplemental breast imaging are



the Gail Model and the Tyrer Cuzick Model. These tools ask women crucial questions including family history, reproductive history, breast biopsy history, etc., with the Tyrer Cuzick Model additionally asking for history of genetic mutations and second degree relatives who have breast cancer. While these assessment tools are available online, it is recommended that patients complete these with their provider who is most familiar with their health history.

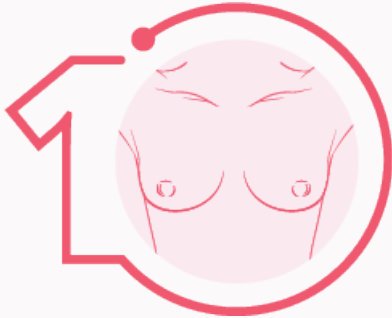
"These tests would typically be done with a patient's doctor," said Dr. Yelda Nouri, medical oncologist and hematologist at New York Cancer & Blood Specialists (NYCBS). She continued, "It's important for these doctors to know that these tools are available which can help bring awareness to the patients." Currently, the only general recommended guidelines for women are to do a breast self-exam and an annual digital mammography beginning at age 40.

Dr. Nouri notes a few different specific risk factors to be mindful of which may indicate the need for screening for a woman before age 40: Those who have a lifetime risk of 20% or greater due to family history, genetic predisposition including BRCA 1 and BRCA 2 genes or PAL B2, patients with a known diagnosis of Atypical lobular hyperplasia (ALH), prior radiation therapy, and a five-year risk of invasive breast cancer based on the Gail Model.

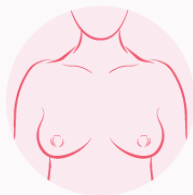
To make an appointment at NYCBS, please call 1-833-CANCER-9.



VISUAL EVALUATION



EVALUATE SIZE & BALANCE

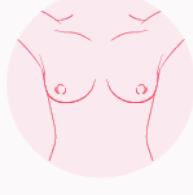


Look at your breasts in the mirror with your shoulders straight and your hands on your hips.



Note if they are:

- An unusual size, shape or color
- Nipple that has changed position
- Rash, or any redness, soreness, swelling or discharge
- Dimpling, puckering or bulging of skin



Now, do the same thing with your arms raised.

PHYSICAL EVALUATION



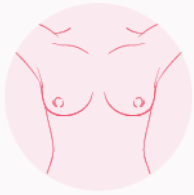
OR



EVALUATE WHILE LAYING DOWN



Use your right hand to feel your left breast and then your left hand to feel your right breast. Use a firm touch with the first few fingers of your hand, keeping the fingers flat and together.



Examine the entire breast With your arm raised, move from top to bottom, side to side, from your collarbone to the top of your abdomen, and from your armpit to your cleavage.

Follow the patterns below:



Move in a circle Begin at the nipple, moving in larger and larger circles until you reach the outer edge of the breast.



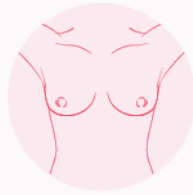
Or move vertically Move your fingertips up and down vertically, in rows, as if you were mowing a lawn.

EVALUATE WHILE IN THE SHOWER



Use your right hand to feel your left breast and then your left hand to feel your right breast. Use a firm touch with the first few fingers of your hand, keeping the fingers flat and together.

Lather with soap.



Examine the entire breast With your arm raised, move from top to bottom, side to side, from your collarbone to the top of your abdomen, and from your armpit to your cleavage.

Follow the patterns below:



Move in a circle Begin at the nipple, moving in larger and larger circles until you reach the outer edge of the breast.



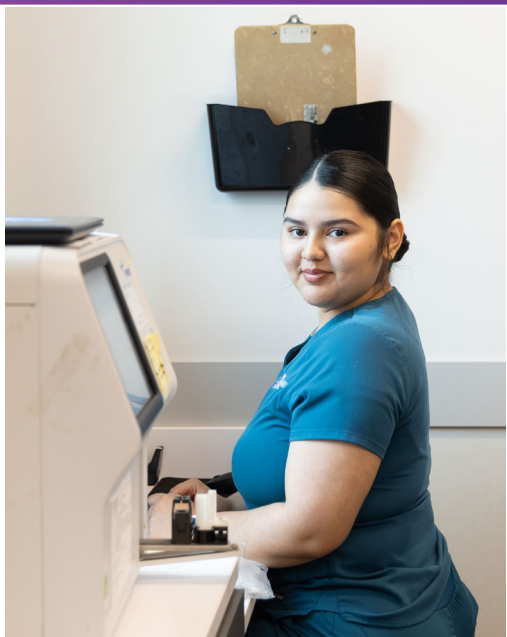
Or move vertically Move your fingertips up and down vertically, in rows, as if you were mowing a lawn.



NYCBS ANNOUNCES

Opening Of New Cancer Care Center In East Islip

New York Cancer & Blood Specialists proudly announced the opening of its newest cancer care center in East Islip on May 1st, bringing advanced treatment, expert care, and expanded services to the community. Located at 136 E Main Street, the new center offers a modern, welcoming environment designed for comfort and care. Beginning May 19, patients who were seen at our Bay Shore office will now receive treatment at the East Islip location.



TYPES OF EXERCISES

For Breast Cancer Patients

Breast cancer is a life-changing diagnosis that can take a significant toll on a person's physical and emotional health. While undergoing treatment, it's important for breast cancer patients to maintain a healthy lifestyle, including regular exercise. Exercise can help reduce the risk of cancer recurrence, improve cardiovascular health, increase energy levels, and reduce anxiety and depression.

Finding the right workout routine can be challenging for breast cancer patients. Some may experience physical limitations due to treatment side effects, while others may have limited time and energy to devote to exercise. But once you find the right exercise routine for you it can help improve your quality of life.



Although exercise can be pushed down to the bottom of your to-do list after being diagnosed with breast cancer, it is actually one of the most crucial things you can do to maintain good health. This is because exercise has been shown to enhance overall health and wellness, improve mood, reduce fatigue, and increase stamina.

While exercise offers many benefits for individuals with breast cancer, it is most important to exercise safely. Make sure that you are listening to your body and allowing your body to rest when you need to. When you are going through treatment for breast cancer it can make you feel very tired or unwell. If this is how you're feeling at the moment, don't worry about how much exercise you do because even a small amount of activity will have benefits.

The best types of exercise to do are aerobic and resistance. Aerobic exercise helps strengthen the heart and lungs, while resistance training strengthens the muscles. When combined, these exercises can effectively help individuals diagnosed with cancer to maintain their overall health and well-being.

When starting an exercise program, it's important for breast cancer patients to work with a healthcare provider or a certified fitness professional to ensure that the exercise program is safe and appropriate for their individual needs and abilities. It's also important to start slowly and gradually increase the intensity and duration of exercise as tolerated.

Even getting ten minutes of exercise a day can help your body. If it may seem like the last thing you want to do, prioritizing your body and exercise can help you in many ways. Exercise can be a valuable tool for breast cancer patients during and after treatment. By incorporating a variety of exercises into their workout routine, breast cancer patients can improve their physical and emotional health and enhance their overall quality of life.

EXAMPLES OF AEROBIC EXERCISE

- Walking
- Jogging or running
- Bicycling
- Swimming
- Using a treadmill

EXAMPLES OF AEROBIC RESISTANCE TRAINING

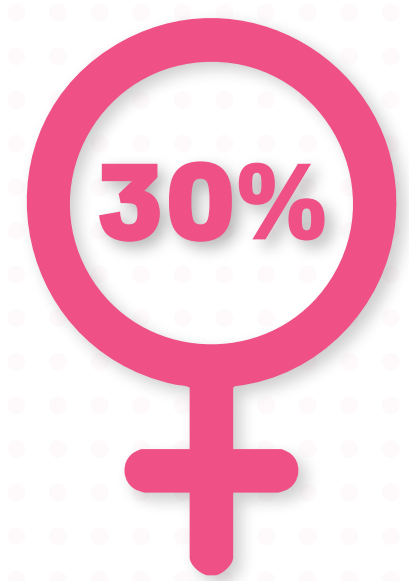
- Sit ups
- Squats
- Push ups
- Leg raises
- Planks

INFOGRAPHIC

Source: cancer.org/cancer/types/breast-cancer/about.html



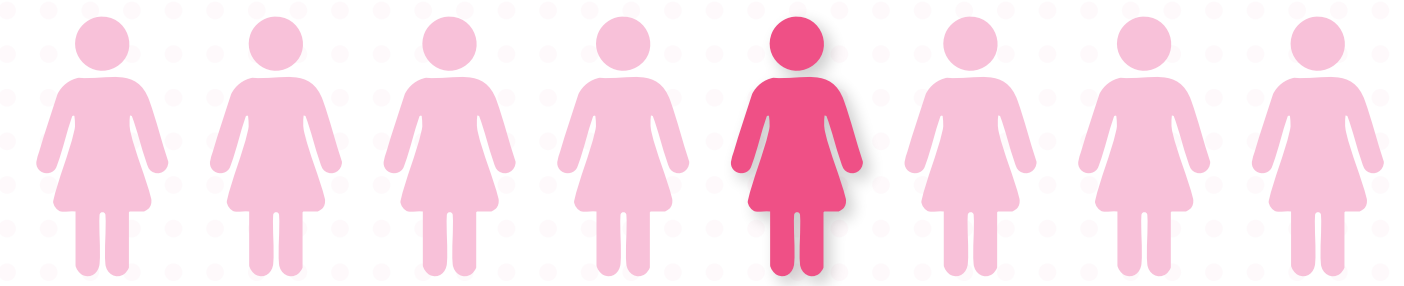
Breast cancer is the **#1** most common **cancer in women**.



It accounts for about **30%** of all new female cancers each year.

316,950

New cases of invasive breast cancer will be **diagnosed in women** every year.



The average risk of a woman in the United States developing breast cancer sometime in her life is about 13%. This means there is a **1 in 8** chance she will develop breast cancer.

62

Is the **median age** at the time of breast cancer diagnosis.



there are more than **4 million** breast cancer survivors in the United States.

What Causes **BREAST CANCER?**

We don't know what causes each case of breast cancer. But we do know many of the risk factors for these cancers. We also know that normal breast cells can become cancer because of changes or mutations in genes. Hormones also seem to play a role in many cases of breast cancer, but just how this happens is not fully understood.



LIFESTYLE-RELATED
RISK FACTORS



HORMONES



GENE
MUTATIONS

NYCBS PARTNERS

With Oncoverycare To Launch Cancer Survivorship Care

About NYCBS

New York Cancer & Blood Specialists is a leading oncology practice dedicated to providing world class, patient-centered, and affordable care to individuals with cancer and blood disorders throughout New York State. With locations across Long Island, New York City, and Upstate New York, our mission is to bring world-class cancer care close to home, where patients can heal with the support of family and community.

OncoveryCare's survivorship-trained clinicians will treat the chronic and late-effects of cancer treatment to help bring comprehensive care to New York Cancer & Blood Specialists' cancer survivor population.

RIDGE, NY – 9/24/25 – New York Cancer & Blood Specialists (NYCBS), one of the nation's leading community oncology practices, today announced a partnership with OncoveryCare to provide personalized, ongoing care to the NYCBS survivor population. Beginning today, OncoveryCare will work alongside NYCBS oncologists to treat the chronic and late effects of cancer treatment and provide comprehensive cancer follow-up care for NYCBS patients.

As cancer diagnoses increase and mortality rates fall with improvements in treatment, survivorship has become one of cancer care's most urgent priorities. By 2040, the number of cancer survivors in the United States is expected to reach 26 million—up from 18 million in 2022. At the same time, cancer is increasingly diagnosed at younger ages, leaving survivors to manage its effects for decades. Survivorship care addresses the full spectrum of needs beyond treatment—including managing treatment toxicities, chronic co-morbidities, and mental health. Integrating survivorship into oncology ensures patients receive continuous, comprehensive care.

Through this collaboration, OncoveryCare will deliver comprehensive survivorship care, including integrated medical and behavioral healthcare, to help cancer survivors fully engage in life after cancer. OncoveryCare's clinical team comprises survivorship-trained Advanced Practice Providers and Licensed Clinical Social Workers with extensive experience in medical oncology, who treat survivorship-related conditions such as fatigue, joint pain, sexual dysfunction, insomnia, anxiety, and more. OncoveryCare clinicians are integrated as part of the broader oncology team—working in close collaboration with the patient's existing care team.

Dr. Jeff Vacirca, CEO of NYCBS and Co-founder of OneOncology, said "Cancer survivorship is one of the most important frontiers in oncology. Our partnership with OncoveryCare ensures that our patients don't just survive cancer, but truly thrive in life after treatment. Together, we are setting a new standard for comprehensive survivorship care that addresses every aspect of a patient's well-being."

"Cancer doesn't end when treatment does, and neither should care," said Dr. MaryAnn Fragola, Chief of Wellness Services at NYCBS. "Through our partnership with OncoveryCare, we are strengthening our commitment to whole-person, patient-centered care by addressing the long-term medical, emotional, and on-going needs of survivors and their loved ones."

Hil Moss, Co-Founder and CEO of OncoveryCare, said "New York Cancer & Blood Specialists is an innovative leader in oncology, and we're thrilled to launch a partnership that will transform care for survivors in New York." Dr. Justin Grischkan, Co-Founder and Chief Medical Officer at OncoveryCare, added, "We are inspired by NYCBS's commitment to providing comprehensive survivorship care to their patients."

OncoveryCare is backed by leading investors and oncology stakeholders, including .406 Ventures, Tennessee Oncology's McKay Institute, F-Prime, and Oncology Ventures. Learn more at www.oncoverycare.com, and follow us on LinkedIn and Instagram @oncoverycare.

Media Contact

Chloe Baldwin
Senior Manager, Community & Marketing
chloe@oncoverycare.com

About OncoveryCare

OncoveryCare delivers comprehensive, whole-person care to cancer survivors. As the population of survivors grows rapidly alongside advances in medicine, OncoveryCare provides the personalized, longitudinal care that cancer survivors need to lead happier, healthier lives. Founded by a breast cancer survivor and a physician, OncoveryCare deploys a survivorship-trained clinical team to treat the chronic and late-effects of each survivor's cancer treatment and equip survivors with the tools they need to manage their survivorship journey.



BREAST CANCER,

Psychological Well-Being, & The Importance Of Supportive Care

MaryAnn Fragola, DNP, ANPC, ACHPN, Chief of Wellness Services, recently presented on her topic, “Breast Cancer and Psychological Well-Being,” at the Breast Cancer Summit in East Meadow. Her lecture focused on psychological well-being and the importance of supportive care during cancer treatment.

Breast cancer is the most common cancer among women worldwide, and survival rates have improved dramatically thanks to early detection and more effective treatments. Yet survival tells only part of the story. From the moment of diagnosis, patients often face fear, stress, and uncertainty that can be just as overwhelming as the physical illness itself. A truly patient-centered approach must recognize that breast cancer affects not only the body, but also the mind and spirit.

THE PSYCHOLOGICAL IMPACT OF BREAST CANCER

A breast cancer diagnosis extends far beyond physical disease. Patients frequently experience anxiety and fear, particularly regarding treatment and prognosis. Body image concerns, changes in relationships, and loss of self-esteem can take a heavy toll. Depression, fatigue, and cognitive challenges—sometimes referred to as “chemo brain”—further complicate the experience. Underlying all of these is the persistent uncertainty of “what comes next.” Recognizing and addressing these psychological challenges is essential to providing comprehensive care.

MENTAL HEALTH INTERVENTIONS

Fortunately, a range of mental health interventions can help patients navigate these emotional hurdles. Cognitive Behavioral Therapy is particularly effective in managing anxiety and depression. Mindfulness and meditation practices offer patients tools to cope with stress in the moment, while psychoeducation equips both patients and families with a better understanding of their experiences. In some cases, medication may also be necessary to address more severe symptoms. These interventions are not only about reducing distress; they give patients the strength to process what is happening and to move forward with resilience.



WHAT IS SUPPORTIVE CARE?

Supportive care represents a holistic approach to cancer treatment that prioritizes caring for the whole person — not just the disease. It integrates emotional, social, and spiritual support alongside physical care. This might include counseling, support groups, nutritional guidance, or survivorship programs. Supportive care improves outcomes by helping patients stay on track with treatment, manage side effects, and feel empowered at every stage of their cancer journey.

The importance of supportive care in breast cancer is clear. It helps patients manage emotional needs such as anxiety, depression, and fear of recurrence. It improves quality of life by addressing fatigue, pain, and body image challenges. It encourages social connection, reducing the isolation many patients experience. It also promotes treatment adherence and supports long-term survivorship by helping patients transition into life beyond treatment.

THE ROLE OF SUPPORT NETWORKS

No one should face breast cancer alone. Support networks provide emotional, social, and practical resources that enable patients to navigate the cancer journey with strength and hope. Family, friends, peer groups, patient navigators, and even online or faith-based communities all play vital roles. These networks help reduce stress, provide companionship, and offer practical support with daily tasks or medical appointments. Perhaps most importantly, they foster a sense of belonging and hope, which can positively influence both mental health and treatment outcomes.

BARRIERS TO SUPPORTIVE CARE

Unfortunately, supportive care is not always easy to access. Stigma surrounding mental health continues to discourage some patients from seeking help. Financial and insurance limitations, along with shortages of trained providers in rural or underserved areas, can create significant obstacles. Cultural differences and communication barriers may also affect whether patients feel comfortable engaging in supportive services. By acknowledging and addressing these barriers, healthcare systems can work toward more inclusive, accessible, and patient-centered care.



PALLIATIVE AND SUPPORTIVE CARE: LIVING BETTER WITH CANCER

Palliative and supportive care specialists work alongside oncologists to manage symptoms, reduce distress, and provide holistic support for patients and families. Their focus is not only on treating disease but also on improving daily life. Importantly, “living better” looks different for each patient. For one person, it may mean freedom from nausea or pain; for another, it may mean preserving a sense of normalcy in everyday activities. Regardless of the stage of disease or treatment goals, prioritizing quality of life honors the individual as more than just a diagnosis.

CONCLUSION

Breast cancer is a disease that affects both body and mind. To provide truly comprehensive care, the medical community must embrace supportive care as an essential component of treatment, not an optional extra. By addressing psychological well-being, strengthening support networks, and removing barriers to care, we empower patients to not only survive but to live fully after cancer. When we treat patients as whole people—physically, emotionally, socially, and spiritually—we do more than help them cope: we help them heal.

SURVIVORSHIP AND LONG-TERM WELL-BEING

Survivorship is more than simply completing treatment; it is about learning how to live well after cancer. Many survivors continue to deal with lingering physical effects such as fatigue, lymphedema, or cognitive changes. Emotionally, fear of recurrence and depression may remain long after treatment ends. Long-term well-being requires continued support through healthy lifestyle practices, access to mental health resources, and structured follow-up care. The goal is not merely to survive cancer but to live fully, finding new meaning and quality in life beyond illness.

THE ROLE OF HEALTHCARE PROVIDERS

Healthcare providers play a critical role in addressing the psychological well-being of breast cancer patients. Oncologists, nurses, psychologists, and social workers must work together to ensure patients are treated as whole people, not just as cases. This involves screening for distress as routinely as checking vital signs, normalizing conversations about mental health, and making timely referrals to supportive resources. By fostering open communication, providing education, and connecting patients with counseling, support groups, or mind-body interventions, providers can help create a comprehensive, patient-centered approach to care.

STACI'S JOURNEY

A Story Of Strength And Positivity

Staci Snowden, an employee of New York Cancer & Blood Specialists (NYCBS), was diagnosed with stage four breast cancer in 2023, following a previous diagnosis of cervical cancer in 2009, which led to her undergoing a hysterectomy. Her journey into this latest battle began unexpectedly in June 2023 when her husband noticed a significant size difference in her breasts, despite having no other symptoms like lumps or discharge.

Concerned, Staci visited urgent care, where the doctor recommended a mammogram and ultrasound. These tests revealed abnormalities in her left breast, leading to a biopsy that confirmed stage four inflammatory breast cancer. A subsequent PET scan showed that the cancer had spread to her left pelvic bone, which was later confirmed through another biopsy.

Following her diagnosis, Staci began treatment under the care of her oncologist, Dr. Yelda Nouri. Staci's treatment plan included Kisqali, a chemotherapy pill taken daily at 600mg. The treatment came with side effects such as nausea, dizziness, headaches, and hair loss, but Staci remained positive as her body responded well to the medication.

On August 26, 2024, Staci underwent a single breast mastectomy to further remove cancer from her body. During the surgery, a tissue expander was placed, requiring weekly breast expansions. Despite this difficult journey, Staci returned to work while preparing to undergo 25 rounds of radiation therapy.

Reflecting on her experience, Staci emphasizes the importance of following your doctor's advice and keeping a positive outlook. "Make sure you stay focused, stay positive, and reach out to support teams," she advises. Working at NYCBS, surrounded by cancer patients, gives her a unique perspective, helping her see herself as just another patient navigating the challenges of treatment.

Staci credits her strength to her family and husband, adding, "When you have that good team, positive things are going to come out, and you're going to get better." She also found support in breast cancer groups, encouraging others to seek similar connections.

Throughout her treatment, Staci relied on Dr. Nouri and her team, who she describes as "the sweetest person in the world." Their care and compassion have been instrumental in her journey. Beyond her medical treatments, Staci focused on maintaining her physical health through exercise and meditation.

Recently, Staci's courage and determination were recognized when she received an award from Positive Queens, an organization dedicated to raising awareness about breast cancer and domestic violence. Though she still has radiation therapy ahead, Staci remains optimistic, saying, "I got through the worst part, and it brought me to this stage, and I'm going to continue to go further."

**When you have
that good team,
positive things
are going to
come out, and
you're going to
get better.**

REDISCOVER

Life Without Pain

Motion Renew at New York Cancer & Blood Specialists (NYCBS) offers a revolutionary, noninvasive solution for painful osteoarthritis and other joint conditions.

Osteoarthritis can make even the simplest tasks feel impossible, with symptoms like pain, stiffness, and reduced mobility. Our low-dose radiation therapy (LDRT) is a safe, painless, and effective treatment designed to reduce discomfort and restore movement.

WHY CHOOSE MOTION RENEW?

Noninvasive

No surgery, no downtime.

Fast, Painless Treatments

A simple process with big results.

Minimal Side Effects

Safe for most patients with great therapeutic outcomes.

Proven Results

Relief from pain, improved mobility, and a better quality of life.

CONDITIONS WE TREAT

- Knee Osteoarthritis
- Hip Osteoarthritis
- Hand Osteoarthritis
- Ankle Osteoarthritis
- Shoulder Osteoarthritis
- Plantar Fasciitis
- Elbow Syndrome
- Dupuytren's Contracture
- Ledderhose Disease

At NYCBS, we're committed to offering cutting-edge care that goes beyond expectations. Discover how Motion Renew can transform your life.

A JOURNEY THROUGH THE YEARS

Your Breast Health Screening Timeline



Every woman's Journey is Unique

Your personal screening plan may vary depending on your family history, breast density, or other factors. We'll work with you to create a timeline that suits you best.

JOIN NYCBS

In The Fight Against Breast Cancer

With Breast Cancer Awareness Month approaching, New York Cancer & Blood Specialists (NYCBS) is excited to participate once again in this year's American Cancer Society (ACS) Making Strides Against Breast Cancer Walks. These incredible events inspire hope for those affected by breast cancer and raise vital funds to find a cure.

Participants from all walks of life—including patients, providers, volunteers, and caregivers—come together, decked out in pink, to achieve one common goal: to end breast cancer. NYCBS will proudly participate in five Making Strides walks this year:



GET INVOLVED WITH NYCBS

Volunteer

We're looking for volunteers to hand out pink NYCBS swag to ACS participants. Volunteers will receive pink NYCBS-branded attire, beanies, and gloves. If you'd like to volunteer, please complete the designated form for that walk above.

Participate

Join Team NYCBS as we march in the fight against breast cancer! If you'd like to walk with us, please complete the corresponding form for that walk above. Once you sign up, you'll receive an email with details as far as what time to meet. As a reminder, friends and family are permitted to participate in the walk as well!

For more information, please reach out to Alyssa Kehr, Events & Sponsorship Coordinator, at akehr@nycancer.com.

We look forward to seeing you there and making strides together!

WALK WITH US!

MAKING STRIDES OF LONG ISLAND



MAKING STRIDES OF CENTRAL PARK



MAKING STRIDES OF BROOKLYN



MAKING STRIDES OF STATEN ISLAND

**BE THE FIRST
TO KNOW**

