A Spotlight on DCMS Member Dr. Reetu Grewal

Doctor Drawn to Extreme Hobbies

Black Sheep’s New Dessert Menu Wows
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Black Sheep’s New Dessert Menu Wows

Written and Photography by Jerry Watterson, jaxrestaurantreviews.com

We recently got invited out to Black Sheep located in the Five Points area of Riverside to try their new pastry menu from new pastry Chef Rebecca Reed formerly of Matthew’s.

**Thick Mint Cookie Wedge**
The first dessert we dove into was the Thick Mint Cookie Wedge (fudge sauce, Greek yogurt whip, cocoa nibs, mint powder). This definitely had the thin mint Girl Scout cookie sort of vibe. The texture of the Greek yogurt was thicker and a bit heavier than typical whip cream without having a heavy or overwhelming feel in your stomach. This dessert is something I think most people will enjoy whether they’re a chocolate lover or a cookie lover. It’s also much lighter than most chocolate desserts. Maybe the only small knock on it would be that the portion size feels a bit small.

**Sweet Corn Creme Brûlée**
All in all we walked away very impressed with the new dessert menu at Black Sheep. There’s an option for every palette. The sweet corn creme brûlée hits for the true sugar lovers. The brown butter pecan pie slab hits for those who love nutty desserts. The banana pudding hits for anyone who doesn’t hate bananas. Go try the new dessert menu! You’ll love it.

**Banana Pudding Fundae**
This dish was deceptive rich. It didn’t look rich but it definitely was a bit heavier than the other dishes we tried so far. If you enjoy nutty desserts you’ll have fun with this one. If like us, you’re into pickled tastes you’ll really enjoy the contrast between the tartness of the pickled peaches and the richness of the bourbon caramel. Next up was the Banana Pudding Fundae (nanner ice cream, candied peanuts, vanilla wafers, toffee sauce). If they served us nothing but this banana ice cream we’d have been in hog heaven. As a die-hard banana ice cream lover my standards for banana ice cream are stratospheric. With that said, this might be the best I’ve ever had. The dish as a whole was wonderful and gives you that child-like joy that whimsical desserts should. The last of the desserts we dove into was the S’mores Pop (torched marshmallow, milk chocolate truffle, honey grahams). My biggest pet peeve with S’mores desserts is they so rarely taste like S’mores. I give Chef Rebecca Reed credit in that this dish does actually have a S’mores taste and flavor profile. Beyond that I thought the dish wasn’t particularly memorable and reminded me most of a moon pie.

**Brown Butter Pecan Slab**
Note: From time to time we’re invited out to try a restaurant or to taste new menu items. This meal is usually comped, as this one was. We’re under no obligation to write a positive review or any review at all when we’re invited out to try a place. Every review you see on our site will be an honest review of the place whether or not the restaurant provided us with the meal at their cost.
Facial Recognition in My Own Practice?

By Hans Duvedfelt, MD, acountrydoctorwrites.wordpress.com

After a Harvard Endocrinology course several years ago, I walked out into the weak afternoon spring sunshine and crossed the street to the Boston Public Garden. Among the multitude of faces of the other flaneurs I was certain I saw scores of people suffering from endocrine diseases – probably undiagnosed, I thought to myself:

I saw tall men with big jaws, typical of acromegaly; stout women with skinny extremities and flushed, puffy cheeks so typical of Cushing’s syndrome; hirsute, heavy set younger women sure to have polycystic ovary syndrome; long-legged beardless men, who seemed classic for Klinefelter’s; and other people I suspected to have Graves’ disease, Turner syndrome, hyperaldosteronism, Addison’s disease, and, oh, so many other obvious endocrinopathies.

Then back home, as the months and years passed, and as the never ending presentations of Chief Complaints continued, my internal search for and classification of possible endocrine diagnoses began to take second place in my hierarchy of what I needed to do.

Yes, Ellen W. does look like she might have Cushing but she has so many issues that it feels a little esoteric to bring this up, too, when her diabetes and mood are out of control, her mother is dying and her husband is still unemployed and her insurance isn’t paying for any of her medicines.

And even if Doreen Fish has primary hyperaldosteronism, she’s already on spironolactone for her low potassium and her blood pressure is okay; a CT scan would cost her so much out of pocket, never mind surgery, and what are the odds she has surgical disease – an adenoma and not just adrenal hyperplasia?

But then I read the news and I get curious again: Artificial Intelligence and facial recognition are being used to diagnose or screen for genetic syndromes like DiGeorge and Williams; people are claiming to have identified facial features linked to autism spectrum disorders; psychiatry and general practice colleagues are sending out cheek swabs to help them prescribe psychiatric medications where I am “just” going by experience and intuition; and patients themselves are now looking into their own genetic profiles.
Assembly Line Medicine: What’s the Rush?

By Dr. Linda Girgis MD, FAAFP, drlinda-md.com

When we go to the deli, we expect to take a number and wait in-line. Accomplishing any task at the department of motor vehicles can be an ordeal of waiting and then being herded out the door. This is part of life in American society. However, it should not be part of your healthcare.

Patients need personalized attention and they need a healthcare team that listens to them, no matter who is telling them to step up the pace. Sure, if pushed I can see ten patients an hour. But, I don’t want to and no doctor should be forced to. For one thing, patients are living longer with more chronic diseases than ever before. And when we rush, that is when mistakes happen and when things get overlooked. It is OK if you forgot to get your cheese to take home from the deli. It is not OK if you had an abnormal mammogram that needs a biopsy but no one had time to read the actual report and it got missed.

As the healthcare system shifts to larger health care systems and hospitals owning medical practices, it shifts from being patient focused to be a corporation run for profits. We can never get away from the fact that people need to earn money from treating patients. However, that should not be the only focus. The main aim should always be patient care and ensuring optimal patient outcomes. Most companies make more profits based on volume and the same is true in medicine. But, it should never be done at the sacrifice of patient care. Cutting nursing staff to dangerously low levels to increase profits is not putting patients first. Anyone who has worked in a hospital or been a patient in one can tell you there is a shortage of nurses and the ones working are being squeezed. Nurses should be able to take their time and reassure patients who find themselves in a scary situation. However, because their numbers are cut to the bone, they are often left scrambling from call bell to call bell. Patients deserve better. And so do the nurses and other staff.

How assembly line medicine harms patients?

• Serious problems get overlooked like mentioned before. As a family doctor, I often have different test results as well as specialist’s notes that I need to review with a patient at the time of their visit. Everyone single one of those data points is just as important as the other. I can’t assume the specialist is on top of a patient’s lab results. As the primary care doctor, I am responsible for overseeing and coordinating a patient’s entire care. And I cannot do that when I am expected to rush patients in and out, either by an administrator or by dwindling reimbursements by insurance companies.

• Patients don’t get time to tell their story. Often, the key to a given diagnosis lies in what a patient is telling us. And they may not know. They will not come telling us they have colon cancer. Rather, they will tell us about a change in their bowel habits. They need to be able to tell their story and we need to be able to listen. If that doesn’t happen, we can be wrong and we all know what happens when a diagnosis is the wrong one.
• Trust doesn’t have time to develop. I know many of my patients for ten years or longer. I know their families and sports their kids play or where they go to college. I even know the grades many of my pediatric patients get in school. This doesn’t happen from taking a problem focused history and rushing the patient out the door. It takes time to forge a true bond with patients. And this is just as important as any medication I will ever prescribe them.

• Burn-out happens out high speeds. Doctors, like any other profession, can not operate at high rates of speed for long periods without breaking. Many people are addressing burn-out in physicians. But, mastering the downward dog pose in yoga classes is not the solution. We need to address the problem. Many doctors are pressured to operate at break-neck speeds. Have those doing the forcing stop these practices if you want to fix the problem. Telling us to suck it up and start exercising more will not.

• Patients give up and avoid healthcare altogether. Who wants to feel like a slice of peppered ham? Medical care is not a commodity like other goods. It is about humanity and a calling.

In private practice, I get to set my own pace that many of my employed colleagues do not. However, as reimbursements stay the same over years and years while overhead costs soar, the only way to maintain the same salary is to see more patients. We are bound by contracts with insurance companies and can charge only what they allow. And then we must fight to get what is allowed on many occasions. But, to protect the sacred doctor-patient relationship, we must resist the urge to assembly line medicine.
Dr. Duane “Dewey” Hanzel's hobbies, from playing rugby to rodeo roping, have always reflected his station in life.

The Montana native got his nickname from his football teammates in high school. Sporting a long pony tail at the time, his friends took to calling him "Dewey" -- a joking reference to the Dalai Lama. The ponytail has been gone for some time, and today, he is most recognizable in scrubs and a white coat. Hanzel grew up in Kalispell, Mont., a mountain valley city of just over 20,000, near Glacier National Park. There, outdoor activities, especially skiing and anything else snow-related, were king.

"It was an outdoor paradise," he said. "Anything you want to do outside, you can do there."

Hanzel was into all of it -- skiing, hunting, fishing, horseback riding, cycling -- anything that took him outside. He refers to his various hobbies as "binges," because he would become consumed with whatever drew his attention at the time.

"I rode bicycles, and then that became racing bicycles in criterion races," he said. "That was more like Indy car driving, a lot of wrecks."

Hanzel describes himself as the "kid that frustrated teachers" because, while he got good grades and graduated with distinction, he focused more on recreation than his studies.

The past-time that was most deeply ingrained in Hanzel's heritage was rodeo. Several family members in his lineage had competed. He grew up riding horses, but it wasn't until high school that he gave rodeo a shot.

"On weekends we would do green stock rodeos," he said. "You'd pay to ride. It would be like five bucks a head."

Hanzel went to college on an engineering scholarship, but a few years into his career, he realized he had made a mistake. "I just didn't like it," he said. "After three years, I decided to go back and get my degree in biomedical science."

While searching for a medical specialty, he happened to attend a podiatry conference. The mechanical workings of the lower extremities appealed to his engineering background, and he decided to focus on the feet.

He attended the University of Osteopathic Medicine and Health Sciences in Des Moines, Iowa -- now Des Moines University -- one of the only schools in the country to specialize in podiatry at that time.

All through medical school, his internship at Riverside Hospital and his residency at New Mexico Veterans Affairs Health Care System, Hanzel belonged to two professional rodeo associations -- the National Rodeo Association (NRA) and International Professional Rodeo Association (IPRA).

"Once you get into it, it's like anything else -- kind of addicting," he said of his rodeo days.

The first time he met Margaret -- the woman he has now been married to for 25 years -- during residency orientation, he entered the elevator she was riding on crutches from a rodeo injury. His preferences for more extreme activities have led to broken fingers and ribs; he has broken his nose on at least five occasions and received countless cuts and bruises.

Margaret liked horses, which gave the couple a common passion. When their son Lane and daughter Olivia were old enough, they too began riding and caring for the horses and traveling to rodeos on the weekends.

"It was a family deal," he said. "It takes so much time that, if your family isn't doing it with you, you just won't see them. We weren't going to do that."

The family moved from Montana to Quincy in 2001. The weather on the early-February move kept the trip interesting. Constant snowstorms over the five-day trip dropped snow in front of the family's path and just behind them, but they remained in a clear patch the entire time.

"We had four horses, three grown dogs, one puppy, two kids and two crew-cab pickups," he said. "It was an adventure."

Hanzel gave up the rodeo in residency, and he gave up roping once the kids grew older, preferring instead to focus on coaching his son's baseball team. He is now the assistant coach, while his son coaches the same team on which he once played.

"I have zero desire to ride a horse now, and even less desire to get on something that is bucking, but I have no regrets of doing that. The things I've done all had their time, but I'm not lost without them, and they're not my identity," he said. "Everything I've done was always about taking advantage of where I was in life."

Hanzel's newest "binge" is golf, a pastime he took up two years ago. Since he came out of private practice to join Blessing Physician Services five years ago, his life has become more relaxed. That stress relief does not mean his life has slowed down any, though. He still sees 55 patients a day.
As any reader of this blog knows, I am a frequent traveler and spend a lot of time in a number of different cities. The one I’ve currently been spending the most time in is a place, quite frankly, I’m crazy about—New York City! Anyone who writes a lot is usually also by default, a keen observer of people, and there’s no place better to do this than a busy crowded city. There’s an interesting habit that I’ve noticed most people have developed in the age of smartphones. You may have noticed it too. Having these devices in our pockets often means that we are physically incapable of just standing still without reaching for them! It’s quickly become our default when we have even the slightest moment of time to ourselves. Next time you are in any public place—it could be waiting at a traffic light or on an elevator, watch what happens the second people realize they are left standing still—they inevitably grab their phone immediately to start staring, scrolling and clicking. I’m not anti-technology by any means, and think that the positives of this new digital age outweigh the negatives, but I do find the above phenomenon quite funny to watch. I’m all for smartphones as a boredom-buster when you have a long wait somewhere, and of course we need our smartphones to do so many everyday tasks—but do we really have to grab for them at every free 10 second interval?! Is anything that important that it can’t wait for you to sit down or stand somewhere for a dedicated “time out” to batch all your tasks together?!

If you are in healthcare, you can probably watch this in your hospital elevator tomorrow. Have we completely lost the human art of stopping, staring, and just taking a few deep breaths? Whatever happened to just being able to stand still for a few seconds in quiet thinking mode? Or heaven forbid we talk to the people in the elevator around us!

So let me stop right there and confess, I was becoming just as guilty as the next person of this behavior and suddenly realized how crazy it was! So I decided a couple months ago that I’d make a change. Here’s what I did:

1.The traffic light
When I’m waiting to cross the street in a busy city and it’s likely to be a 15-30 second wait, I no longer get out my phone. I make it a point to take a few deep breaths, look around, and notice something about the people around me or one new thing about the beautiful architecture I’m usually surrounded by.

2.The elevator ride
I will not get my phone out for an elevator ride which only takes a few seconds! If other people are with me, I’ll often briefly converse with them. Okay, not everyone wants to talk in an elevator (and sometimes I don’t either), but I find two times when people always do are: (i) at work and (ii) in a vacation spot (I would say elderly people have the most sense in this regards, and always love a chat about the weather or anything else!).

3.The restaurant
I’m sure I’m not the only one to cringe when I’m out and see whole families at dinner tables glued to their smart devices instead of engaging in healthy conversations. I go one step further, and refuse to get out my phone for the whole dinner, unless there’s a compelling reason—such as wanting to take a picture or retrieving some information that is a part of the conversation. If I’m with a friend, family member, or on a date, and the other person leaves to go to the bathroom—I have stopped getting out my phone to quickly catch up on news, emails or anything else silly—for those few minutes they step away. Nothing is that important. I’d rather continue savoring my food, the ambience, and be fully present.

Since I adopted these 3 disciplines several weeks ago, I’d say my life has become just a little bit better. I could go on, about longer periods of time where I just switch off my phone or put it in another room—but the above 3 just detach me from a bit of the craziness and “constant connectivity” of smart phone addictions that is becoming so widespread. So maybe if I ever bump into anyone reading this article at a traffic light or on an elevator—you’ll see me looking straight up and engaging with the world around me!
The initial doubts first surfaced mid-way through our flight bound for Montego Bay, Jamaica. In fact, we were not entirely sure that this trip was such a good idea after all. Our eldest son, 13 and in eighth grade, was already complaining about how much school he was missing and how much homework he had been assigned. Our daughter, a sixth-grader prone to procrastination, had her nose buried deep within a book. Ordinarily, this is not a bad thing. But when language arts and social studies assignments were beckoning, reading a stock, contrived, YA book for pleasure was not exactly what I hoped she would be doing. Our daughter, a sixth-grader prone to procrastination, had her nose buried deep within a book. Ordinarily, this is not a bad thing. But when language arts and social studies assignments were beckoning, reading a stock, contrived, YA book for pleasure was not exactly what I hoped she would be doing. The first-grader, as most last-born children will do when not being listened to, was whining about something, and demanding to play on my phone — “or else!” While our week in Jamaica on a medical mission with all three school-age children in tow did not seem to have the most auspicious start, we had committed to helping out my friend and colleague’s non-profit group, and we were well on our way.

This particular non-profit was founded by a travel medicine specialist and an acupuncturist. Long drawn to the West Indian isle of Jamaica for its cultural richness and musical heritage, they felt it was an appropriate location to give back to their global health care community at-large. The Falmouth Medical Clinic, where their non-profit is based, during its two one-week missions every year, is run almost like a continuity clinic. The providers change, and the clinic is not always staffed. But the surrounding community knows when the doctors are in town. The church personnel line the patients up themselves and count them among their neighbors,
families and friends. Because the church’s presence and direction are constant, there is actually quite a lot of order and stability to both the patients’ and the providers’ experiences.

As in all developing countries, the pervasiveness and degree of poverty in Jamaica is staggering. Ramshackle huts with an obvious lack of modern utilities line the same stretch of highway that leads to opulent foreign-owned resorts. Stray dogs that clearly share the same gene pool run alongside the roads, while small goats scattered up and down the hillsides keep the lush foliage somewhat in-check.

Despite the hardship of life on this island oasis, there is both a great happiness and a contagious element of forced relaxation that even the most harried visitor can feel and appreciate. Our family of five — although encumbered with the typical societal afflictions that ail most Westerners (e.g., impatience, short attention span, an unhealthy reliance on technology) — was able to partake of these “irie” vibes while also offering up some of our own talents and resources.

I am a family physician by training, an urgent care provider by serendipity. My husband is an oral surgeon busy in private practice. Our three children are now proficient vitamin-counters and willing distributors of healthy living promotional material. Though initially shy about lending a helping hand, they discovered that the easy camaraderie of health care providers — in a setting other than our usual staid and sterile clinical domain — made it actually fun to participate in our workday, particularly when there was reggae music on the speakers and Jamaican patties for lunch.

Our motley crew of health practitioners saw many patients who presented with bread-and-butter chief complaints and left with diagnoses such as hypertension, diabetes and treated dental abscesses. On this particular trip were family medicine physicians, dentists, and even a physical therapist. In addition to attendings, residents and medical students, even ambitious under-graduates worked with us to diagnose and manage the patients’ illnesses. And although we came from a variety of professional and cultural backgrounds, we all shared a certain wanderlust and the belief that travel and exposure to other cultures can be both educational and, in fact, life-sustaining. While all of us participated in the day-to-day work of seeing and treating patients, we also enjoyed a good amount of free time to enjoy the local beaches or to go further afield and play tourist. Our family decided to spend most of our time at the beach taking the warm Caribbean waters, although we were also able to visit Rose Hall Great House (purportedly haunted by several long-deceased spirits) and ride horses on the shore (we even swam with them into the ocean).

The week, however, was not entirely bereft of familial strife. At various points in our trip, we encountered teenage ennui, pre-teen eye-rolling, and the occasional tantrum. The eighth-grader promptly declared his boredom at the beach after the lifeguard asked him to stop throwing sand at his little brother. The sixth-grader judged my appeals to get some of her homework done as ridiculously unfair. And the first-grader squealed in disgust at dinner when he came to the realization that chicken nuggets were not on the menu. But all of that would have happened at home anyway, and we would not have had the calming Caribbean Sea, the relaxing calls of tropical birds or the awe-inspiring display of an afternoon thunderstorm to placate us.

Despite the predictable challenges we faced as a family of five traveling during the school year, I would (and probably will) absolutely do it again. As with medical decisions in general, when the benefits outweigh the risks, therapy should be initiated. In this case, the therapy was a medical mission in Falmouth, Jamaica and the benefits are memories that will last a lifetime — for ourselves and our children.

Belen Gallarza-Wilson is a family physician.
While I’m a financial advisor by trade, that doesn’t mean I’m always perfect.

The life I live with my family is a lot like anyone else’s — rewarding and amazing but also flawed and even stressful at times. And yes, I’ve made my share of financial mistakes both big and small.

For example, this one time I decided to dive into the world of rental real estate with my father-in-law. Basically, we tried to purchase a rental property and ran into all sorts of problems until the deal finally fell through. By that point, I was actually relieved because the process taught me I had no idea what I was doing!

Another time I fell for a Solo 401(k)-related business scam. It all started after I bought into a bunch of hype after receiving some marketing emails from a company that wanted to help me set up a Solo 401(k) business to accompany my financial planning practice. This company promised me the world; they would set up my Solo 401(k) and help me set up a business that would help others do the same.

The catch? I had to purchase their program within the next 24 hours to secure a discounted $8,000 price.

After talking it over with my wife, Mandy, we decided to go for it. After all, we were investing in our business. At least, that’s what I thought at the time.

Unfortunately, it was all a sham. Once I started the training, I found out there were a ton of extra (and expensive) steps to the process that would make this new business venture cost a lot more than the initial $8,000 that I planned. Second, the business was actually pretty shady. For example, the company that sold me the program wanted me to pay them $100 per lead!

Worse, I later found out the Solo 401(k) they set up for me wasn’t even set up the right way. I then had to pay another company to fix it. Long story short, I was sold a pack of lies and lost $8,000 as a result.

And yes, my wife still gives me a hard time about it!

6 Ways to Get Over Financial Mistakes

But, did I let those mistakes ruin my life? Obviously not. If I had let either one of those mistakes get me down, I probably wouldn’t be where I am today.

Over the years, I’ve learned that you really do have to get over past financial mistakes if you want to build a wealthier, more prosperous future. You live and you learn, and we all make mistakes. It’s how you recover from those mistakes that determines whether you win or lose in the long run.

If you’ve screwed up, you should know that you’re not alone. We all make poor decisions sometimes, whether we want to admit it or not. In terms of how to recover, here are six ways to get over your mistakes and end up better off in the long run:

#1: Learn from your mistakes.

Albert Einstein once said that “insanity is doing the same thing, over and over again, but expecting different results.” This quote is painfully true, especially when it comes to financial matters.

Plenty of people rack up debt, spend years paying it off, then end up in the same position years later because they never change their ways or fix the core source of their problem. Other people never reach their savings goals because they just “wing” their finances and never use a budget. Yet, they still act confused when, year after year, they can’t get ahead.

The bottom line: Learning from your mistakes is the best way to achieve better results. Think of your mistakes as learning opportunities instead of blunders, and you’ll be a lot better off. Hands down, the best way to avoid repeating a mistake is finding out how and why it happened in the first place.
#2: Set up safeguards so mistakes don't happen again.
In addition to learning from your mistakes, you can also set up safeguards or rules that can prevent the same type of thing from happening.

Case in point: After I got scammed out of $8,000 for a 24-hour deal on a Solo 401(k) business, I immediately made up the rule that I had to think over something for more than 24 hours and up to a week before I could decide.

That way, I would never fall victim to a similar “today only” sales tactic again. I also have a one-page checklist I complete named the "Impact Filter" which helps me more clearly identify what my success criteria is on this great idea.

Whatever your financial transgressions are, look for systems you can set up that will help prevent a repeat. This will help you prevent some financial mistakes from happening in the first place.

#3: Create a plan to remedy your mistakes.
While some mistakes can't really be “fixed” (i.e. getting scammed out of $8,000 for a business idea), others can be remedied. If you racked up credit card debt, quit paying your bills, and ruined your credit score, for example, there are ways to bring your score back into good graces over time.

With a wrecked credit score, your plan of attack would include paying your bills to get your accounts out of default, coming up with a plan to repay your debt over time, and using credit responsibly. If you made an impulse purchase with a credit card you regret, on the other hand, your plan to fix the issue might be keeping credit cards at home when you shop.

If your financial mistakes can be fixed, take steps to start fixing them right away. Not only will this help you “get over” your mistakes, but it will help you get back on solid financial footing.

#4: Educate yourself.
Another smart strategy to recover from financial mistakes is educating yourself. By learning all you can about personal finance, credit, and other money-related issues, you can discover the many ways you can succeed and which pitfalls to avoid.

If your credit is ruined, for example, taking some time to learn how to improve your credit score would be a smart way to invest your time. If you dug yourself into debt, learning about different debt payoff strategies and debt consolidation loans could be a solid move.

Remember, anything you can learn about personal finance will leave you in a stronger position to build wealth and avoid problems in the future.

#5: Don't wallow in self-pity.
No matter what, don't wallow over your financial mistakes. Any problem you've created can be fixed, although it might take time to get there.

It's easy to get down on yourself, to stress over your mistakes, and to feel like it's the end of the world, but this is a waste of time! The best way to avoid self-loathing is to act. Instead of moping around, take steps to improve your situation and you'll start feeling better right away.

“Make Your Future Bigger Than Your Past”
#6: Create a long-term financial plan – and stick with it.
If there's one financial lesson I know for sure, it's this: Failing to plan is the same as planning to fail.

Without a short-term and long-term financial plan in place, you're less likely to achieve any of your financial goals. If you want to succeed, you need to plan for success, and that includes writing down your goals, creating a financial plan to get there, and sticking with that plan.

Your financial plan doesn't have to be time-consuming or overwhelming, either. Most people would benefit immensely from a few simple acts like:

- Writing out their five-year, 10-year, and 20-year goals
- Tracking their spending for a while,
- Building an emergency fund
- Using a very loose written budget that keeps their spending under control and helps them avoid debt.

If you're having trouble coming up with a financial plan, also keep in mind that you can hire a financial planner to help. You don't have to do this alone if you don't want to, and professional help is the best option for many people struggling to get started.

Blunders Don't Define You
While money blunders can be hard to endure and downright embarrassing, you don't have to let them wreck your financial future. Instead of letting your problems get you down, channel your energy into improving your finances instead.

While money issues may seem like the end of the world when you're going through them, anything can be overcome if you try hard enough.
From Her Parent’s Strong Influence to the Practice of Family Medicine

A Spotlight on DCMS Member
Dr. Reetu Grewal

Duval County Medical Society member Dr. Reetu Grewal has been with UF Health for nine years. Her first four years were at UF Health Blanding Family Medicine and she has been with UF Health Baymeadows Family Medicine for the past five years.

She grew up in Long Valley, a very small town in north-central New Jersey, with her parents and two sisters. “I miss the arts opportunities of the NYC area, so I like that Jacksonville has museums, an orchestra, and a variety of theaters and shows” say Dr. Grewal. They were one of only two Indian families in the town for many years, so their cultural identity came from their own home. “I am glad that Jacksonville is a diverse community and has a well-established Indian community with cultural events that let my kids connect with their heritage” she observes.

Dr. Grewal credits her parents, Kalwant (dad) and Harjeet (mom) Grewal as her biggest personal influences. “They instilled in me the values of hard work while also leading a well-rounded life. As parents, they were firm but fair, and I aspire to be like them when it comes to parenting”

Dr. Grewal attended UMDNJ-Robert Wood Johnson Medical School in New Brunswick, NJ. During medical school she decided that working during a snow storm was not for her “Actually, the worst part was shoveling the car out to get to work so I chose to do my family medicine residency in Spartanburg, South Carolina” says Dr. Grewal. It was there that she met her husband Patrick, who was doing his transitional year, in Spartanburg. He moved to Jacksonville to do his radiology residency at UF Health. So, after finishing her residency and getting married, Dr. Grewal completed a fellowship in hospice and palliative medicine at Mayo Clinic Florida. Palliative medicine was still a new field without many job options when she finished. At that point Dr. Grewal decided to go back to family medicine. She then joined the UF Health family medicine department.

Dr. Grewal explains her choice of specialization in her practice of medicine. “When I started my clinical rotations in the third year, I realized that I really liked every rotation I did for the first three weeks, and the next five weeks I felt bored doing the same thing again and again. When I did my family medicine and emergency medicine rotations I finally found a
fit that allowed me to see a variety of patients and conditions. I settled on family medicine because I enjoy the long-lasting relationships with my patients.”

“I never really saw myself doing hospice and palliative medicine until I was a resident having to cover codes at the hospital. I felt very awkward talking to families when their loved ones died, so I did a month-long rotation in palliative care to gain more experience. I enjoyed learning the active listening skills needed to be an effective palliative care clinician; and I believe those skills have made me a better family doctor. Since joining UF Health, I have served on the Honoring Choices steering committee, which has simplified advance care planning for people on the first coast and allowed me to integrate family medicine with palliative care in my practice” Dr. Grewal is enthusiastic about the emerging telemedicine trends in urgent and primary care. UF Health has started a telemedicine program in several departments, including primary care. “I am excited to offer my patients the option of having virtual visits with me, saving them time and bringing medicine to the forefront of technology. I’m currently the principal investigator on a CDC funded capacity-building grant which offers telemedicine to HIV patients. It is a joint project between the UF Health family medicine department and UF CARES. This is an exciting project for patients living with HIV in the Jacksonville area” says Dr. Grewal.

Dr. Grewal is pretty satisfied with her career thus far and would like to continue juggling family medicine and family raising. She reflects “When my kids are grown I would like to consider more administrative responsibilities, but for now my practice affords me the best of both worlds”

And what about her family life?

Her husband Patrick is still with UF Health. He finished his residency in diagnostic radiology and went to Vanderbilt for a year to complete a neuroradiology fellowship and has been back with UF Health since completing his fellowship. They have two “wonderful” children, Ashna (6) and Andrew (3), who keep them busy with their many activities. “My amazing parents recently relocated to St. Augustine, so I’m fortunate to have their help in raising my children” adds Dr. Grewal.

Asked about her hobbies, she says “I enjoy traveling and the outdoors. My favorite trip so far has been this past May with my dad, completing a four-day hike along the Inca Trail to Machu Picchu, to celebrate my dad’s seventieth birthday. I’m hoping my next adventure will be to explore Nepal, and hike to Mt. Everest, but just base camp, because I like my nose and fingers”
CREATE A BETTER TOMORROW FOR YOURSELF AND YOUR FAMILY

Free time? Not really.

So when it comes to making decisions about your financial future, it’s good to know you can slow down and turn to a trusted source for help.

Together, let’s create a plan that can help you meet your various financial goals.

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The Ultimate Summer 2018 Reading List
G.G. Andrew, Bookhub.com

Eager for summer — and summertime reading? We got you covered! Whether you love thrillers, historical fiction, romance, science fiction, or literary novels, there is something for every type of reader on our summer reading 2018 list! Check out the books below, along with their publishers’ descriptions and release dates. Your next favorite beach read awaits!

**Love and Ruin by Paula McLain**
The bestselling author of *The Paris Wife* returns to the subject of Ernest Hemingway in a novel about his passionate, stormy marriage to Martha Gellhorn — a fiercely independent, ambitious young woman who would become one of the greatest war correspondents of the twentieth century. In 1937, twenty-eight-year-old Martha Gellhorn travels alone to Madrid to report on the atrocities of the Spanish Civil War and becomes drawn to the stories of ordinary people caught in the devastating conflict. It’s the adventure she’s been looking for and her chance to prove herself a worthy journalist in a field dominated by men. But she also finds herself unexpectedly — and uncontrollably — falling in love with Hemingway, a man on his way to becoming a legend.

In the shadow of the impending Second World War, and set against the turbulent backdrops of Madrid and Cuba, Martha and Ernest’s relationship and their professional careers ignite. But when Ernest publishes the biggest literary success of his career, *For Whom the Bell Tolls*, they are no longer equals, and Martha must make a choice: surrender to the confining demands of being a famous man’s wife or risk losing Ernest by forging a path as her own woman and writer. It is a dilemma that could force her to break his heart, and hers. Heralded by Ann Patchett as “the new star of historical fiction,” Paula McLain brings Gellhorn’s story richly to life and captures her as a heroine for the ages: a woman who will risk absolutely everything to find her own voice.

**The Perfect Mother by Aimee Molloy**
THE MOST ANTICIPATED BOOK OF THE SUMMER—SOON TO BE A MAJOR MOTION PICTURE STARRING SCANDAL’S KERRY WASHINGTON
An addictive psychological thriller about a group of women whose lives become unexpectedly connected when one of their newborns goes missing.

**Warlight by Michael Ondaatje**
From the internationally acclaimed, best-selling author of *The English Patient*: a mesmerizing new novel that tells a dramatic story set in the decade after World War II through the lives of a small group of unexpected characters and two teenagers whose lives are indelibly shaped by their unwitting involvement.

**The Ensemble by Aja Gabel**
“A riveting look inside the world of classical musicians and an intimate study of friendships.” — Marie Claire
The addictive novel about four young friends navigating the cutthroat world of classical music and their complex relationships with each other, as ambition, passion, and love intertwine over the course of their lives.

Jana. Brit. Daniel. Henry. They would never have been friends if they hadn’t needed each other. They would never have found each other except for the art which drew them together. They would never have become family without their love for the music, for each other.

Brit is the second violinist, a beautiful and quiet orphan; on the viola is Henry, a prodigy who’s always had it easy; the cellist is Daniel, the oldest and an angry skeptic who sleeps around; and on first violin is Jana, their flinty, resilient leader. Together, they are the Van Ness Quartet. After the group’s youthful, rocky start, they experience devastating failure and wild success, heartbreak and marriage, triumph and loss, betrayal and enduring loyalty. They are always tied to each other — by career, by the intensity of their art, by the secrets they carry, by choosing each other over and over again.

Following these four unforgettable characters, Aja Gabel’s debut novel gives a riveting look into the high-stakes, cutthroat world of musicians, and of lives made in concert. The story of Brit and Henry and Daniel and Jana, The Ensemble is a heart-skipping portrait of ambition, friendship, and the tenderness of youth.

How to Walk Away by Katherine Center
From the author of Happiness for Beginners comes an unforgettable love story about finding joy even in the darkest of circumstances.

Margaret Jacobsen is just about to step into the bright future she’s worked for so hard and so long: a new dream job, a fiancé she adores, and the promise of a picture-perfect life just around the corner. Then, suddenly, on what should have been one of the happiest days of her life, everything she worked for is taken away in a brief, tumultuous moment.

In the hospital and forced to face the possibility that nothing will ever be the same again, Maggie must confront the unthinkable. First there is her fiancé, Chip, who wallows in self-pity while simultaneously expecting to be forgiven. Then, there’s her sister Kit, who shows up after pulling a three-year vanishing act. Finally, there’s Ian, her physical therapist, the one the nurses said was too tough for her. Ian, who won’t let her give in to her pity, and who sees her like no one has seen her before. Sometimes the last thing you want is the one thing you need. Sometimes we all need someone to catch us when we fall. And sometimes love can find us in the least likely place we would ever expect.

How to Walk Away is Katherine Center at her very best — a masterpiece of a novel that is both hopeful and hilarious; truthful and wise; tender and brave.

Jane Seymour, The Haunted Queen by Alison Weir
Acclaimed author and historian Alison Weir continues her epic Six Tudor Queens series with this third captivating novel, which brings to life Jane Seymour, King Henry VIII’s most cherished bride and mother of his only legitimate male heir.

Ever since she was a child, Jane has longed for a cloistered life as a nun. But her large noble family has other plans, and as an adult, Jane is invited to the King’s court to serve as lady-in-waiting to Queen Katherine of Aragon. The devout Katherine shows kindness to all her ladies, almost like a second mother, which makes rumors of Henry’s lustful pursuit of Anne Boleyn — also lady-in-waiting to the queen — all the more shocking. For Jane, the betrayal triggers memories of a haunting incident that shaped her beliefs about marriage. But once Henry disavows Katherine and secures Anne as his new queen — forever altering the religious landscape of England — he turns his eye to another: Jane herself. Urged to return the King’s affection and earn favor for her family, Jane is drawn into a dangerous political game that pits her conscience against her desires. Can Jane be the one to give the King his long-sought-after son, or will she be cast aside like the women who came before her?

Bringing new insight to this compelling story, Alison Weir marries meticulous research with gripping historical fiction to re-create the dramas and intrigues of the most renowned court in English history. At its center is a loving and compassionate woman who captures the heart of a king, and whose life will hang in the balance for it.

War Storm by Victoria Aveyard
The #1 New York Times bestselling Red Queen series comes to a stunning conclusion in War Storm.

VICTORY COMES AT A PRICE. Mare Barrow learned this all too well when Cal’s betrayal nearly destroyed her. Now determined to protect her heart — and secure freedom for Reds and newbloods like her — Mare resolves to overthrow the kingdom of Norta once and for all… starting with the crown on Maven’s head.

But no battle is won alone, and before the Reds may rise as one, Mare must side with the boy who broke her heart in order to defeat the boy who almost broke her. Cal’s powerful Silver allies, alongside Mare and the Scarlet Guard, prove a formidable force.
Mike O’Malley is the president of MD Preferred Services which specializes in assisting doctors with financial, insurance and real estate needs. This month we have a conversation with him about his business and his services to the medical community.

Can you describe what MD Preferred Services offers to the physician market?
We have one of, if not the largest, network of doctor mortgage lenders, realtors, financial advisors, and insurance providers available. Our network members are all well informed about the inner workings of being a physician or healthcare professional.

How does this benefit the doctors that use your service?
MD Preferred is 100% free to use and requires no registration. A visitor can browse the site, make contact with our members, or reach out to us, all without ever having to worry that they will suddenly be added to a mailing list or that they will miraculously start receiving phone or text solicitations. We already know how often, doctors especially, get bombarded with emails and phone calls, so we make using our site as stress free as possible. Our site offers a “one-stop” portal to know who to contact in the areas we specialize in. It saves the doctor time and connects them to experienced professionals who work in the physician market on a regular basis.

How did you decide to start this business?
All of the principals involved in MD Preferred started off in physician recruiting. Right around 2008, we decided that recruiting just wasn’t for us anymore. Taking what we knew from that industry - the things that would come up during interviews, doctor requests, etc – we came up with the idea of MD Preferred…a resource site that helped young doctors find services they would need over the course of their healthcare career.

Why did you decide to focus on the MD market for your services?
Initially we chose MDs simply because that was what we were most familiar with because of our recruiting background but our services also apply to nurses, DDS, physician assistants, healthcare executives, etc.

Why did you choose the specific individual services such as mortgage or Realtor assistance?
Relocation is one of the biggest events in a doctor’s (using doctors as an example) life and it happens more than it used to. I think on average a good portion of new doctors leave their first practice after 2-3 years…either to pursue a solo career or because they now have experience under their belt.
and they are off to better pastures. Regardless, relocating is a headache. Because of that, we chose lending and real estate as our first services offered. The doctor loan was relatively unknown when we first started (only a few banks really marketed it) but now it's exploded. It's an extremely viable alternative to traditional loans, with 0% down in most instances or 10% for larger amounts.

Financial and insurance followed shortly after. All new doctors are well versed in their craft but they are really no different than any other college graduate…they aren't taught how to manage their new six figure income or more importantly, how to deal with their mountain of student debt. Our financial advisors work to teach and to help secure for the future.

What are the biggest differences in using your service versus contacting the individual providers directly?
What we offer is a comprehensive list of healthcare friendly providers. Google (and Bing for that matter) are great tools but when someone types in doctor loan or doctor mortgage loan (using that as yet another example) you might only get one or two banks and then a few sites that act as lead generation tools, or blog articles that tells you what a doctor loan is. With us, you are able to see lenders in all 50 states, compare their offerings and make direct contact with an agent when you're ready. The same applies to all the services we offer.

What keeps your passion going in your business for do you see your business you?
The healthcare demographic is incredibly fun and rewarding to work in. We enjoy teaching the benefits of our services just as much as we like to learn about the experiences that these folks go through. Each time we speak with someone, their story (while similar to others) is unique. It's great to learn their goals and how we can help them achieve it.

How do you see your business evolving in the future?
Partnerships. One thing I know we're lacking is deeper market penetration. I want to start working more with health systems, job boards, etc. I know we can be doing better with that. Aside from that, we're going to be forced to do a ground up rebuild of our site in the next year or so thanks to Adobe ending support for the platform we currently use, but it will give us a chance to refocus our efforts and streamline everything.

What is life like for you away from your business?
Fairly uneventful. I'm into cars though I've sold off all of my fast toys for the time being – but I'll still go to the track to watch or to racing events when I can. I've recently taken up tennis and play at a child's level, but it's much needed exercise and it's a lot of fun. I actually don't take “time off” from work. I answer my emails pretty much 24/7. I like interacting with our members and potential members, along with the doctors and healthcare professionals that reach out.
Food & Wine Pairing food and wine can seem like a daunting task. You came into the wine store with one goal: to pick up a bottle for a backyard barbecue. Knowing which wine complements the flavor of a grilled sausage is tough, but you don't want to be the friend who shows up with a six-pack of Coors Light either. Luckily, matching food and wine doesn't have to be a Google-dependent endeavor and is easier than you might think.

“There’s a science to pairing wine and food. It has to do with the acid, tannins, alcohol and sweetness of the wines paired with the food,” says Adam Fleischer, co-founder and owner of The Wine Spot, a unique craft wine and beer store in Cleveland, Ohio. It’s all about balance according to Fleischer, who says, “The fattier the food, the higher acid you want in the wine since it counteracts the fat in foods.”

When it comes to selecting summer wines, Fleischer recommends keeping it light, refreshing and opting for something with a lower alcohol content (great for day-drinking). “Whites with little to no oak, bubbly and reds such as nebbiolo, Beaujolais, dry rosé, pinot noir, Lambruscos work nicely with most summer dishes like grilled foods, fish, veggies and pizza. I stay away from anything with too much alcohol or intense reds for the most part.”

At the end of the day, you should buy wines you enjoy drinking and don’t be afraid to experiment. Below are six easy summer pairings that will get you started. Bonus points for using the words “tannins” and “mouthfeel” when serving these to your friends and family.

**Lambrusco + burgers**

Lambrusco, a bubbly dry red, is a great accompaniment to a grilled burger, steak or BBQ pork sandwich. “The acid and

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6 Summer Food & Wine Pairings That Will Make You Look Like a Pro Foodie

by Kaila Stein

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Dry rosé + cheese
Rosé is like that friend who’s great at parties — she can hold her own in a crowd of strangers, chatting up your awkward office mate with ease. A dry rosé goes exceptionally well with appetizers and cheeses, Fleischer says. This herbed ricotta and tomato bruschetta would be perfect with a glass of rosé. A simple summer cheese board is another great option.

More: 11 Common Foods That Can Turn Toxic During Cooking

Sparkling white + lemon pasta with tomatoes and basil
Prosecco, like rosé, is an easygoing wine. It pairs well with rich, salty foods like olives, aged cheeses or cured meats. Another sparkling white option Fleischer recommends is Ullacia Txakolina (pronounced chakolina). “It’s a wonderful, slightly fizzy white wine from the Basque region of Spain. Dry, light and super-fun for summer.” Try it with a summery pasta dish with tomatoes, lemon zest and fresh Parmesan. The wine’s acidity and freshness also complements a salad studded with summer fruits like peaches or nectarines.

Montepulciano D’Abruzzo + grilled pizza
Looking for a bang-for-your-buck red that over delivers? Montepulciano d’Abruzzo is the wine for you. This earthy red comes from the Abruzzi hills above the Adriatic coast of central Italy and pairs well with anything tomato based — an heirloom tomato salad or a grilled pizza would be perfect.

More: 7 Pro Grilling Tips to Up Your Summer BBQ Game

Spanish white blend + skirt steak tacos
While red meat is traditionally paired with a hearty red, Fleischer recommends serving a white instead. “Since we grill a lot in the summer, those foods tend to have some fat component, so go for the higher-acid refreshing wines with a little chill on them.” Fleischer recently enjoyed this white from Black Slate, which he served with grilled skirt steak.

Sauvignon blanc + roasted vegetable sandwiches with goat cheese
A bright, citrusy sauvignon blanc pairs well with a roasted vegetable and goat cheese sandwich — the perfect picnic food. The clean acidity in the wine balances the minerality of the goat cheese. This insulated wine tote will keep your bottle cool on a hot day.
Ooooh. The countdown to our babymoon in Boston is officially on! Six days and counting! With my second trip of the year coming up, I thought I’d let you in on a few little tips and tricks that I use to help pass the time if my flight is delayed. Being stuck in an airport and ultimately bored is not the best way to prepare for the holiday you have been dreaming about all year. Although you will be able to buy things at the airport, it is cheaper to bring your own things and you can never guarantee that the airport will have exactly what you are looking for anyway. Therefore it is worth bringing a selection of things with you so that you know that you will be able to pass the time easily.

My Sudio Headphones

Many people use their mobile device as a way of entertaining themselves and they can be great to use at airports. You do, however, need to make sure that they are not annoying, so take headphones to wear if you want the sound on or if you are listening to music. You also need to be aware of the cost of using them outside of the home and whether you need to switch off data and just use apps that do not need an Internet connection. Plan what you want before you go so that you can do any big downloads first (I always download Netflix box sets at home to my phone before I travel) or things like that to watch or listen to as these will take time. Even if the airport has wi-fi you may not be able to download things like this as it takes too much power from other users. A good Netflix series is a godsend when you are delayed and it stops you spending a ridiculous amount of money in Monsoon.

My Charger Pack

I don’t go anywhere without my charger pack and when I’m travelling I have two so that the person I’m travelling with can stay charged too. If you are using electronics then you will need to make sure that they stay charged. Obviously charging them before you leave is wise, but if you are delayed then they could still easily run out of charge before you get on the plane. I’ve spent so many holidays in the airport sat next to a bin trying to charge my phone when I should be on my second airport prosecco and it’s not the most glamourous start. A battery pack is ideal as you cannot guarantee that there will be free charging ports when you need them.

A Sophie Kinsella Novel

Having something to read can really help. It can help to pass the time and give you something different to think about to lower your stress levels too. You may want to download some ebooks to your mobile device, but this could run out of battery so it may be good to have a printed book as a backup. Find reading material that you know you will enjoy and that will keep you entertained for a nice long time. I always pick up a Sophie Kinsella novel in the airport.

Airport Snacks

If you are delayed then chances are that you will get thirsty and hungry. Sometimes airlines will provide you with compensation in the form of food and drink vouchers to spend at the airport, but you cannot rely on them doing this and the delay will have to be significant for you to get these and you may be hungry or thirsty earlier. Therefore it is good to have some snacks and drinks with you or even a small meal depending on what time of day it is and how long you expect to be delayed. It will save you money too as airport food and drink can be pricey. Do think carefully about the type of food and drink that you take. You want light things that will release energy slowly such as nuts but watch the salt as that will make you thirsty. Pret is always a good healthy option. I always stock up on Ginger shots to stop me picking up any bugs on the flight.

Pillow/blanket/eye mask/ear plugs/socks

Yep, I don’t travel light. It may be that you will want to nap when you are waiting for your flight and if so, you will need to be prepared for that. Think about what things you might need to help you to go to sleep. Some people may like a pillow,
although a bag or folded coat or jumper may work as well. Inflatable pillows can be a good way to take a pillow without it taking up too much room in your bag. Some may like a blanket and a coat or cardigan may work for this as well although you can get lightweight blankets. To shut out the light an eye mask may be required and possibly even earplugs to shut out the noise. Just make sure that there is someone available to wake you up if your flight gets called as you would not want to sleep through it.

Layers

You never know how cool it might be in an air-conditioned airport If you are sitting around or wanting to sleep then you may feel that you want to be warmer as well. As mentioned above you may want to make clothing into a pillow or blanket as well. If you have others with you, they might get chilly and you may be able to lend them something warm. It can be wise to light items which are thin but still warm such as thin cardigans as they will not take up too much room.
Trust Is About Perspective

“I have been serving affluent retirees and to-be retirees in North Florida for over 20 years. I love working with 3 and 4 generations of our clients’ families, while providing guidance about investments, tax-efficient strategies, estate strategies, social security and other custom planning needs. My father-in-law began our practice over 33 years ago and I am honored to carry on our tradition of serving some of the same families he began helping in 1984. We were both professional accountants before beginning in Wealth Management; so we bring a technical, professional and most importantly a personal approach to our advice and fiduciary responsibilities.”

Tom Forbes,
Senior Vice President - Investment Officer,
Senior Fundamental Choice Portfolio Manager

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