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Physicians have a love-hate relationship with the electronic health record (EHR). On the one hand, doctors know they can’t provide the best possible medical care without them. And on the other, today’s EHR systems are cumbersome, clunky and slow physicians down.

Indeed, there’s much to love and much to hate about today’s EHRs, alongside a variety of ways to address the problems they create. One solution may lie in blockchain, the technology currently powering the cryptocurrency Bitcoin.

First, what’s to love about EHRs?
Information is power. Electronic health records give doctors (somewhat) fast, reliable and secure access to patient medical histories, prescription records and past test results. With this data, several integrated, multi-specialty medical groups like Mayo Clinic, Intermountain Healthcare and Kaiser Permanente have shown remarkable improvements in quality. Specifically, comprehensive EHRs have helped them reduce medical errors, shorten inpatient stays and produce better clinical outcomes.

Simply put, hundreds of thousands deaths from heart attack, stroke and cancer could be prevented each year if every American had access to the level of high-quality care these EHR systems enable.

What’s to hate (or strongly dislike) about EHRs?
The first “electronic medical records system” was introduced in 1972. In the decades since, they’ve been designed and used mainly for billing purposes. The structure and application flow of EHRs are far from intuitive or user-friendly. Essential information, sure, but dizzying to sort through. And because of the EHRs design shortcomings, it takes physicians much longer to enter and access patient data than during the era of paper medical records. Further, because most systems lack interoperability – an important function that connects one EHR to another – doctors have difficulty accessing patient information that comes from another office or hospital.

It doesn’t have to be this complicated. All around the world, app developers take complex databases and build easy-to-use consumer tools for mobile devices that simplify nearly every aspect of our lives. Medicine can and must be next.

How can we improve today’s EHR systems?

If your medical data is kept on your local physician’s office computer, the answer is that the doctor both owns and controls it. And in that case, none of your records are “comprehensive” or immediately accessible to providers outside of your doctor’s office.

Now, imagine you suffer a heart attack or stroke while visiting relatives out of town. Naturally, the hospital or emergency department (ED) caring for you will call your doctor to request your records because they don’t want to (a) give you a drug that will negatively interact with another medication you’re taking or (b) order a laboratory test you have already had, thus delaying treatment until the result comes back. What usually happens next is mind boggling: The life-saving information kept on your doctor’s computer will most likely be transmitted to the hospital via fax. (For readers born after 1980, here’s a Wikipedia entry that explains what a fax machine is.) So, even if your information is entered into an office EHR, it is usually printed and faxed when another doctor or ED needs it.

But what if you receive your care from a group of doctors – say, a multi-speciality medical group that shares a common EHR? In that case, your data is available to all the physicians in that group. But when you require care elsewhere, the same
problem surfaces. As strange as it sounds, even doctors in other hospitals and emergency departments using the same EHR system usually can't see your data without undergoing several time-consuming steps. There simply is no convenient way for you to "hand over" your records to other doctors who might be caring for you.

It's hard to imagine any consumer relinquishing this much control of their finances to a broker or banker. It's your money and you want to manage it as you see fit. But in medicine, even though it's your life and your health, your information belongs to (and is controlled by) your care provider. The structure and processes now governing EHR systems were created to benefit their manufacturers and purchasers, not patients like you. EHR vendors could easily open up their software, connect their systems (making them "comprehensive") and therefore make it easy for all your care providers to access your records. But they won't do so voluntarily. To explain their reluctance, allow me to include a paragraph from my 2017 book Mistreated:

The manufacturers of the large electronic health records don't want doctors using comprehensive systems, unless the only application used is theirs. They fear what interoperability between systems would mean for their businesses. If health-record vendors allowed third-party developers to access their application program interface (also known as an API, a set of protocols and tools used in new software development), all your medical information could be combined into a single, comprehensive system … This would be extremely beneficial for patients and physicians. But doing so would make it much easier for doctors and hospitals to switch from one manufacturer to another, therefore reducing what these powerful companies can charge for their software.

A possible solution: blockchain technology
To avoid medical errors and improve quality outcomes, all the physicians we see should have access to our medical information, provided that information is kept private and secure.

Blockchain technology can facilitate these requirements. The word "blockchain" combines the two key elements of its technology: A "block" is a record of a transaction or an interaction, secured using cryptography (similar to the code-based encryptions common in medical practice). This block might be the sale of cryptocurrency from one person to another at a given price, as with Bitcoin, or it might be the record of a doctor's office visit. The block is linked to all prior transactions or visits, thus forming a "chain."

To understand how blockchain technology might work in health care, it's helpful to understand how the technology has been used to simplify money transfer.

Work on blockchain technology began in the early '90s and was expanded upon by Satoshi Nakamoto in 2008 for the creation (and exchange) of what would become the popular cryptocurrency Bitcoin. At its core, Bitcoin was created to eliminate the expense of, reliance on, and delays caused by banks as intermediaries. Now, regardless of whether you believe Bitcoin is great investment or a Ponzi scheme, its underlying technology (blockchain) is private, secure and reliable. Its foundation is the equivalent of an electronic public ledger, with a date and timestamp to establish ownership without the need for an intermediary, such as a bank. So, rather than allowing a single institution to control your financial data, blockchain is an open-access system that can't be hacked, corrupted or erased.

Of course, caring for patients is different than transferring digital currency. There's a massive amount of personal health information involved. As such, patient chains might date back decades, involving hundreds of visits and tens of thousands of pieces of data. It would be impossible for doctors to search the full chain and access specific information in a timely fashion. But this is precisely where independent developers could create clinically oriented apps that make EHRs easy to use; even mobile friendly.

And because the protocols of blockchains are universal, the applications in health care would all be compatible, never distorting the data itself. Therefore, all providers could safely access the information, and you would be able to take it with you regardless of whether you change insurance carriers, doctors or health systems.

Remember, underlying blockchain technology keeps the information secure. Today, a hacker who breaks into a hospital's EHR can extract information on millions of individuals, including not just their medical data but also their social security numbers and private information.

Blockchain data points are protected at the individual patient level with a numeric public key, and/or a more complex privacy key. Therefore, if someone were to hack into an EHR system powered by blockchain technology, they wouldn't be able to ascertain whose data it was or manipulate the information as they can today. Similarly, a physician with access to your medical record couldn't look at another patient's record within the same health system or hospital without his or her permission.

This sophisticated and intuitive technology could ultimately be used to replace all current EHR systems.

Why blockchain technology might replace today's EHRs
A single, national blockchain-based approach would allow patients to become the owners of their data. It would allow the information to travel with them – to every new ED, physician's office and hospital – both safely and securely. It could be updated as soon as new data is entered, anywhere in the country. And it could connect all of our medical information for the rest of their lives.
Of course, nothing like this is commercially available at the moment. It’s the old chicken and egg problem: Developers are unlikely to create solutions without data already entered into a blockchain format, and no one will want to capture the information in that form unless it can be used for clinical practice.

But the important thing is that it could happen. After all, much of the impetus for cryptocurrency was born out of the desire to move money around the globe safely and privately (and, occasionally, for reasons of questionable legitimacy). Today, cryptocurrencies are becoming increasingly mainstream and their uses more mundane. The same gradual expansion in utility could happen in health care, though exactly how remains to be seen.

At some point, patients and doctors will no longer tolerate the shortcomings of today’s EHRs. And when they demand change, third parties will be eager and available to come to the rescue. They’ll need their applications to connect with comprehensive patient information in a form that’s safe and secure. And when they have it, they will develop an electronic health record worthy of 21st-century patient care.

As patients, we deserve to have our medical information available wherever we go for our care. And it can be done, whether by forcing today’s EHR vendors to open their Application Processing Interfaces (APIs) to developers or by requiring all systems to adhere to identical design standards. Blockchain technology could be the catalyst that, someday, accelerates a massive change process in American health care. For the health of our nation, I hope that day comes soon.

Robert Pearl is a physician and CEO, Permanente Medical Groups. He is the author of Mistreated: Why We Think We’re Getting Good Health Care—And Why We’re Usually Wrong and can be reached on Twitter @RobertPearlMD. This article originally appeared in Forbes.
Few people can argue that healthcare is a business these days. Medical services are attached a price tag and patients are now customers. However, intrinsic to healthcare is a very high ethical code that doesn’t exist in other sectors. For example, if a patient shows up in the ER, they cannot be denied service, whether they are wearing shoes or not. While McDonald’s and other top companies are driven for profits, there are lessons the healthcare industry should avoid taking from them.

What practices should be avoided in medicine?

- High volume earns more money no matter what industry you are in. However, numbers of treated patients should never be driven up just to increase revenue. Patients need a certain amount of time in order for doctors to reach accurate diagnoses and treatment plans. A doctor-patient relationship can not be forged on a medical assembly line and without that relationship, there is no trust. Mistakes happen when the flow is too fast. However, in medicine, that can result in a patient’s death and not being stuck with a cheeseburger instead of the McChicken sandwich you ordered.

- Supersizing it may be a good thing if you like french fries, but more medications can be harmful. Our society has fallen into the mindset that many things can be fixed with a little pill. If you can't sleep, there is a medication for that. If you need to lose weight, there are medications and even surgery for that. But, the best fix for many problems is often the least complicated of all: a healthy lifestyle. Relying on more pills increases the chance of medication interactions that can be deadly. No drug comes without side effects. Patients often do need multiple medications but we should try to use the least possible to treat the patient.

- The customer is not always right in healthcare. As physicians, we need to include patients’ wants in any treatment decision. However, we possess the higher degree of medical knowledge and sometimes we need to steer them away from decisions that may harm them. For example, if a patient requests a medication that is contraindicated in their diagnosis or with other medications they take, we have to tell them no. As doctors, we must avoid doing any harm. If you go to the fast food counter and you want to eat ten cheeseburgers, they are going to give you ten cheeseburgers. If it will make you happy to have the tomatoes removed from all of them, they will do it. They want to make you happy. In contrast, your doctor wants to keep you alive and healthy. Hopefully, we can make you happy as well. But that is secondary to your health.

- While the drive-thru may be convenient when you want to pick up a combo, it doesn’t work in healthcare. Patients bring many issues when they come to the doctor and we can’t just push them in and out.

- Coupons may attract you to one fast food joint over the next but is that something you should use in choosing a doctor? Doctors are using advertising more and more these days with some even offering free consultations and coupons. While I see nothing wrong with doing this, I don’t think this is the only reason you should choose a specific doctor. The best way to know is to ask people. Word of mouth is the best advertising. If people say he/she is good, I would trust that more than a buy one get one free deal.

While healthcare evolves further into being a business, we all need to evolve with it. However, we must make sure that basic standards and ethics are not lost. Doctors took an oath to do no harm and that must be the first tenant of any healthcare business model. The patient must always be the center of the plan and all goals should include optimal clinical outcomes. Patients need a voice in the new world business medical economy and they should not be pushed aside for profits. The purpose of medicine is, always has been and always should be for saving lives and helping patients live healthy. Anything short of that aim is simply unethical.
The UF College of Medicine – Jacksonville was pleased to welcome their friends and colleagues from Chengdu, China in March to educate physicians and nurses and share research to enhance our patient care. A Group of 17 nurses and physicians visited from Chengdu, for a week and presented their research on their newest techniques and findings. This was the 3rd annual China US Peds and Ob forum. In addition to the forum, nurses, medical students and residents from China have visited to learn more about western medicine. This exchange will help foster research and new ideas which will lead to better care and outcomes for our patients.
I've read more than 1,000 profiles since I started writing The Profile, a weekly newsletter featuring the best long-form articles of interesting people and companies. The stories have included high-profile figures like Elon Musk, Sheryl Sandberg, Jay-Z, and Harrison Ford. But they've also included some not-so-high profile people like the man who deactivated Donald Trump's Twitter account and the woman who brought Uber to its knees.

Here are the 11 lessons I've learned thanks to the most successful people in the world.

1. Surround yourself with the people you want to become. There's a saying that goes, "Show me your closest friends, and I'll show you the future." No one knows this better than basketball star Kevin Durant. While he was winning NBA championships, he was also quietly becoming one of the most active angel investors in the league. He has surrounded himself with some of Silicon Valley's elite: Ron Conway, Chamath Palihapitiya & Ben Horowitz. There's no better way to learn than to befriend the people whose path you admire. "I started to read, to really read, about all these successful men who hadn't played basketball," Durant remembers. He devoured books on Jeff Bezos and Steve Jobs—"I went all the way back to [Nikola] Tesla and [Cornelius] Vanderbilt."

2. You can be more than one thing in life. Charlene de Carvalho was a 47-year-old stay-at-home mother of five when her father died and left her the family business. Not a big deal until you realize the family business means running Heineken, which employs more than 73,000 people. Carvalho had 10 days to make a choice: continue living comfortably as a housewife or run the world's №3 brewer with no prior business experience. She chose the latter, and she's now one of the world's wealthiest women.

3. Commit to the process. Results take care of themselves. A wise person once told me that persistence is the #1 indicator of success. You have to commit to something and then refine the process over & over again. The results will follow. Alabama football coach Nick Saban has a vision he literally calls "the process"—a philosophy that emphasizes preparation and hard work over results. It's about constantly examining weak spots and gradually improving. If you fall short, you work to meet the standard of excellence next time. And if you win, you work to fight off complacency. The process, then, is never over.


The quote below made me realize something important: We are all Musk, Pitt, and Clooney—just with a lot less fame and money. If you don't feel satisfied with yourself now, what makes you think that *insert the thing you want most here* will solve your problems? That's not how life works.

"It is lonely at the top. But not for everyone. It's lonely at the top for those who were lonely at the bottom."

5. It's hard, but necessary, to be honest with yourself. Many of us are unaware, or perhaps unwilling, to recognize what it is we're fighting for. Basketball sensation Allen Iverson was in court to finalize his divorce, and the magnitude of the situation hit him when he saw "Iverson vs. Iverson" written on the divorce document. "You look across that courtroom and see the person you love more than life itself, and you get the picture. As strong as I am, that was my vulnerable moment," he said. This moment caused Iverson to re-focus on being a better father and partner.

So how can we make sure that it's not too late before we snap back into reality? It comes through self-reflection and transparency. In one of my favorite profiles of the year, Jay-Z producer, he puts on his suit jacket, heads to his makeshift studio, sits on a toilet seat, and looks into the camera to discuss the latest news event.

It's never too late to reinvent yourself.

"The fear for being exposed is that they’ll say, 'He's just a sandwich guy. How does he talk about these big issues?'" said Mr. El-Gamasy, 48. "But I'm also an educated guy and being a sandwich guy is not against the law."

By Polina Marinova
opens up about everything from his marital troubles to his time in therapy. The most difficult thing, he says, is to be honest with yourself.

“You know, most people walk away, and like divorce rate is like 50 percent or something ‘cause most people can’t see themselves. The hardest thing is seeing pain on someone’s face that you caused, and then have to deal with yourself.”

6. One voice can be more powerful than all the money in the world.

How many times have you had an opinion that was squarely in opposition with the crowd? Probably a lot. But many of us have believe consensus is good and challenging the status quo is bad, so we keep our mouths shut. Allow me to introduce you to Susan Fowler, the 26-year-old whistleblower who brought the world’s most valuable private tech company (Uber) to its knees. One voice versus billions of dollars. It was obviously hard, but she did it anyway because it was the right thing to do.

Here’s another example: In one of the most spectacular flameouts in recent years, Elizabeth Holmes’ blood testing company Theranos went from a $9 billion Silicon Valley unicorn to a uncorpse after a Wall Street Journal reporter brought down the house of cards.

The most powerful people are those armed with facts, data, and ethics.

“Silicon Valley, which is 50 square miles, has created more wealth than any place in human history. In the end, it isn’t in anyone’s interest to call bull###.”

7. Pain and reflection lead to progress.
Almost all of us expect honesty in our personal and professional relationships. Very few of us demand it. Ray Dalio, the man who built the world’s most successful hedge fund, encourages radical transparency and organizational dissent. Bridgewater employees grade each other on criteria like assertiveness and open-mindedness, and critique their colleagues and managers regardless of rank. The hope is that if you’re transparent with your ideas and reasoning, then the best ones can win out in an idea meritocracy. The Dalio machine runs on one equation: Pain + Reflection = Progress. Not a bad thing to try out in 2018.

“I believe that the biggest problem that humanity faces is an ego sensitivity to finding out whether one is right or wrong and identifying what one’s strengths and weaknesses are.”

8. The biggest successes can come from the most devastating failures.
Russian chess expert Lev Alburt has played chess with some of the highest-profile figures in finance, including Carl Icahn & Stephen Friedman. The financiers took lessons with Alburt to get “frustrated, intimidated, and demoralized.” Why?

To grow. When you grow, you get better. And if you get better, you eventually win. That’s why most of our biggest successes often come after our most devastating failures.

Another story that stuck with me was that of retired NFL player Ryan Leaf. While in the league, he valued only three things—money, power, and prestige. After getting released from several teams, Leaf developed a painkiller addiction, attempted suicide, and committed burglary. What saved his life? A 32-month prison sentence. It wasn’t until his cellmate told him to go to the prison library and teach inmates to read that he woke up from his haze. “You’ll feel like for the first time in your life that you’re doing something for somebody else,” he writes. “That it’s not all about you. And your narcissism will start to wane.”

Life will smack you around once or twice or ten times, but nothing will change until you turn your mistakes into lessons and start growing in a different direction.

“You’ll retire, thinking it’s over and that you won’t have to deal with the pain of being a failure anymore. You’ll just walk away from the game.”

9. Reality is all about perspective.
This is a tough lesson because you can’t truly understand it until you’re faced with unimaginable grief. One story we can all relate to is the loss of a loved one. Sheryl Sandberg’s husband died suddenly two years ago. After his death, Sandberg texted Facebook CEO Mark Zuckerberg saying, “Urgent, Please call.” Zuck thought it was a work issue even though she was on vacation. “A lot of things used to be ‘Urgent, please call,’” he says. “These days they’re not.”

All it takes is one moment to make you identify the true “urgents” in your life.

“Expressing emotion when you’ve gone through extreme pain is not weakness. It is humanity.”

10. Your personal life is ‘nobody’s business.’
I’m a big subscriber to the notion that your personal life should be exactly that—personal. No one needs to know intimate details about it unless you choose to share them. Harrison Ford reaffirmed my view. Ford rarely does interviews. And when he does, he has a repertoire of stories that he repeats to the media over and over again. When he strays from his script, he gets physically uncomfortable. It’s not that he cares about what people think, it’s that his most intimate thoughts are “nobody’s business.” Don’t talk about it. Instead, do it and then let others do the talking.

“It’s always better not to talk about it, I think. Just do it. Don’t ’splain it. Especially if you’re getting away with it.”
11. It’s your responsibility to pay it forward.
The biggest lesson I learned from 1,000+ profiles is that we have
a responsibility to pay it forward. I see it constantly. I see LeB-
ron James and his wife Savannah working with low-income, at-
risk students in their hometown. I see Priscilla Chan and Mark
Zuckerberg running one of the most ambitious philanthropies
in the world. I see Chobani CEO Hamdi Ulukaya giving jobs to
immigrants and refugees at a time when they need them most.
This one hit home for me because when I was little, my parents
were working up to 3 to 4 jobs and money dictated every deci-
sion. It wasn’t easy to see a way out. But even during the most
grueling times, I will never forget the teachers, tutors, mentors,
and kind strangers who gave me something money could never
buy: hope.
Garlicky Shrimp Skewers

**Ingredients**
- 1 pound medium (25 per count) shrimp, shelled and deveined
- 8 large cloves garlic, thinly sliced
- ¼ cup extra-virgin olive oil
- 1 tablespoon finely chopped Italian parsley leaves
- 1 teaspoon sweet Spanish paprika
- 6 (6-inch) bamboo skewers, pre-soaked 30 minutes
- 1 lemon, halved

**Directions**
1. Place the shrimp, garlic, oil, parsley, paprika, and salt into a resealable plastic bag. Mix thoroughly to coat the shrimp. Place the bag in a bowl and refrigerate for 2 hours.
2. Prepare the grill for direct cooking over high heat.
3. Remove the shrimp from the marinade and discard the marinade. Thread the shrimp on the skewers.
4. Grill the shrimp over direct high heat until just cooked through, turning once, about 4 minutes. Remove from the heat and arrange on a platter. Squeeze the lemon over the shrimp and serve immediately.

**Wine Pairings**
Flint & Steel Napa Valley Sauvignon Blanc – A Patio Party Starter

A fantastic summer sipper, the Flint & Steel Napa Valley Sauvignon Blanc.

The 2016 Flint & Steel Napa Valley Sauvignon Blanc begins with a very pleasant aroma of grapefruit, lime and honeysuckle. True to its name it also features a bit of a flinty mineral note. Taking a sip launches a tropical fruit fiesta in your mouth. Crisp and tasty grapefruit, kiwi and lime with touches of honey all combine with good acidity and a comforting mouthfeel to make this wine a pleasure to drink. Add in great balance and you've got an extremely tasty Sauvignon Blanc. It ends with an easy, satisfying finish of good length and some lingering tart tropical fruit.
I've always been passionate about financial planning. I love using my knowledge and skills to craft plans that can work for others. As a financial planner, I've seen first-hand the benefits that a sound financial plan can bring. At the same time, I've also witnessed the problems that can occur due to bad advice or inadequate planning.

In fact, when I was younger, I set up college accounts for my children. But I didn't realize that these financial plans would become inadequate with the changing times. In order to keep any financial plan current, there is plenty of follow-through needed. In situations such as these, it is essential to read as much as you can and stay updated with current trends. For more information on the different stages of financial planning, take a look at the infographic below.

Here are useful financial planning tips to help you start the year on a good note. They will help you create a roadmap to balance your current expenses and plan your economic future.

1. Assess Purchases by Cost Per Use
You may think that you're saving money by buying a trendy low-priced t-shirt, rather than a more expensive, basic shirt. But by doing this, you may be forgetting the quality aspect. A good thing to ask yourself when deciding whether to purchase an item of clothing, tech toy or kitchen gadget is how many times you're likely to wear it or use it. You could even take this a step further when it comes to experiences by considering cost per hour.

I prefer a capsule wardrobe with a limited number of core, high-quality pieces. This way I can mix and match these quickly to put together outfits.

2. Manage Your Debt
It is necessary to have a strategic debt management plan to put an end to accruing debt that you can't get out of. One strategic approach to debt management is paying off the most expensive debt first. Get rid of any credit card debt first and then begin paying off your personal loans, student loan debt, and housing debt. In order to avoid future liabilities, look for areas to cut back on spending and learn to spend smarter.
I used to find myself ordering in for dinner or buying a coffee every day. I put an end to this cycle by buying a coffee machine or cooking more often at home. Doing this helped me save tons of money in the long run.

3. Save In Tax-Efficient Ways
The money you save is more important than the money you earn. Whether you’re saving for retirement or to withdraw the money at a later date form your accounts, always opt for tax-efficient ways of saving. With the help of a financial planner, determine how to save to meet your various objectives. Given all the different types of investments, products, and accounts you can use, it is important to choose the right saving methods.

4. Try Not to Tap into Your Retirement Account Early
Unless you absolutely must, do not dip into your retirement funds. Doing this will affect your financial standing dramatically. You will negate all the hard work you’ve done saving so far and prevent the money from being invested. Secondly, you’ll be charged a substantial penalty for early withdrawal. Additionally, you’ll have a tax bill to deal with for the money you take out. Keep all these factors in mind and make cashing out early your last option.

Only dip into your savings if you have one of the following emergencies occur: you lose your job, your car needs repairs, you have medical bills, your home requires emergency repairs, or you have unexpected funeral expenses. Otherwise, just say no, if you can’t afford it.

5. Have an Emergency Fund
You’ve probably heard this one many times before. But it’s wise to keep this in mind. No matter how much debt you’ve built up in the form of student loans or credit card bills, it is important to put some money aside every month. This could be a small amount, but it will serve as your emergency fund. It can get you out of any financial tight spots and keep you out of trouble. You will also be able to sleep better at night, knowing that you have a backup plan. To get into the habit of saving money, start treating it as a non-negotiable monthly expense. By doing this, you’ll soon have enough money saved up and may even be able to take that long-overdue vacation. I didn’t just hide my emergency fund under my mattress. I put it away in a high-interest online savings account to ensure that inflation didn’t erode the value of my savings.

6. Direct Deposit to See Your Money Grow
If the money you set aside for your savings, never comes to your checking account, you probably won’t miss it. Even though you know the money is part of your paycheck, it will make you feel like it comes out of thin air. You may even be pleasantly surprised by how much your savings grow over time. This is also an excellent way to get your emergency fund started.

7. Don’t Forget Your Estate Planning
Estate planning for families is an important aspect of comprehensive financial planning. In the case of premature death, there must be enough assets to take care of expenses and family needs. The amount of money necessary and the amount that needs to be liquid will be determined by the time frame of these requirements. To provide for the needs of your family, there are different types of savings you can consider such as life insurance policies, personal savings and employee benefits. Your will, beneficiary designations and individual assets must be reviewed periodically to ensure that your family needs will be matched by the funds available.

8. Discuss Money with Your Loved Ones
Couples sometimes hide their finances from their partners, and this can have a negative impact on their relationships. Take the time to talk to your partner about your plans for the future and financial goals. Come up with a shared vision of what you want your future to look like. If you’re a parent, spend time teaching your children about money. They pick up on money messages based on how we handle money whether we teach them deliberately or not. Even a small conversation can go a long way.

9. Stay Motivated
Most of us experience some amount of stress when it comes to our financial situations. When this stress is money-related, it can feel overwhelming. Find ways to deal with these feeling and stay motivated no matter what. One way to do this is by writing down the various reason why you’re stressed out. Focus on the problems that are bothering you the most and try to find solutions for these. For instance, if you’re stressed out that you never pay your credit card bill on time, try setting a reminder on your phone or opt for automatic payments.

Conclusion
You don’t need a particular educational background or fancy degrees to be able to manage your finances well. Do your research, stay aware of changing trends and consult a financial planner if necessary. If you follow the tips mentioned in this article to manage your finances, you can find stability and prosperity. So, get started now to secure your future financial wellbeing.
A doctor is working down their long list of patients, powering through the day, striving to use their skills to get them better. Some of the patients will be follow-ups who they already know, others will be brand new patients, who they are meeting for the first time. Of course, the job of any doctor is first and foremost to heal their patient in whatever way they can. That's what all the medical school and residency training was all about: to get them to a position where they can safely and competently do this. But the crucial aspect of healthcare which is notoriously under taught, is how to communicate with your patients. That's most of what any doctor does, and a fundamental universal truth in healthcare.

We are slowly getting better at this, and it's being taught more in medical schools, but we still simply don't think about this anywhere near enough. After physicians graduate and are thrown out onto the medical floors, they quickly realize that it's the bulk of what practicing medicine is all about. That's what all the medical school and residency training was all about: to get them to a position where they can safely and competently do this. But the crucial aspect of healthcare which is notoriously under taught, is how to communicate with your patients. That's most of what any doctor does, and a fundamental universal truth in healthcare.

Speaking as somebody who regularly teaches communication skills and has coached a lot of physicians on this, even the most hardened physician is very responsive when they are told (diplomatically of course) that they can do better and improve their skills in this area. Nobody wants to hear that they come across badly when they meet new people!

So for any doctor, what types of things can you do in those first 7 seconds to make a better impression on your patient? Here are just 3:

**Facial expression**
This is obviously the first thing that someone will notice when they look at you. Few things could be better received than a genuine smile (known as a “Duchenne smile”) and a facial expression that conveys friendliness. Of course, smiling doesn't come naturally to everyone, but is the most simple thing you can do if you want to appear approachable or trustworthy. The opposite of this would be looking stern, closed off, or worst of all, uninterested in the person in front of you.

**Eye contact**
Maintain constant eye contact in those first few seconds. Don't glance at the patient and then look away instantly—whether it's to look at your chart, a medication hanging from the IV line, to find a chair—or anything else! Without getting into the psychological and scientific reasons why this is important, and I could talk for a very long time on this: just think of it as telling the patient they have your full undivided attention at this low point in their lives.

**Body posture and movements**
Does your body posture and the way you first greet the patient display an aura of calmness and competence, or does it do something quite opposite? If you are clearly in a rush, hurried or looking tense yourself—your patient will sense that in a second. Even the way you walk into the room, upright and confident versus slouching and hesitant (hopefully very few doctors do that) will get processed in an instant. Your goal is to radiate that you are calm and a good listener.

Whenever we meet someone for the first time, that judgement about the other person will be formed in only the first few seconds? Yes, about seven seconds to be precise. This happens with anyone, even a random person on the street, but is especially important for a doctor to keep in mind. In those first several seconds, we as humans are primed to judge the other person's friendliness, cooperation and competence. This happens at an entirely subconscious level, and is believed to go back to caveman dies, even before speech started, when we had to make snap judgements about the other person very quickly. We can debate whether those first impressions are always right or not, but they do get imprinted in our minds, and we all know from our own experiences that it's very difficult to come back from a bad first impression.

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These are just 3 brief things you can do to make a great first impression that says you are a friendly, caring and competent physician. Even for a highly educated professional like a doctor, you cannot escape the laws of human nature and behavior, and you can have a list of publications as long as your arm—but it will come to naught if you don’t understand how to communicate!

Let’s be realistic, there’s unlikely any amount of teaching or coaching that can make somebody who is a terrible communicator into an outstanding one, or somebody who is un-genuine, more genuine (fortunately this applies to very few people in healthcare). But you can take things up several notches if you want to. My latest teaching series that I am in the process of finalizing is called: “Mastering people and interpersonal skills”. These seminars, also a shortened keynote version, are designed for physicians and medical students, but would actually be the same learning points for any customer service facing professional. The communication skills are applicable everywhere. The reason why I feel so passionately about this topic is that I am somebody who has worked in healthcare systems in 3 different countries (England, Australia and the United States) and have also seen healthcare when relatives have been unwell in a 3rd world country too (India).

I am convinced that a huge proportion of the everyday problems and frustrations we face in healthcare are simply due to poor communication. Competence and knowledge is something we are all good at and have reached a certain standard through rigorous training. It’s the so-called “soft skills” that we are not so good at (I’m not a particular fan of that term, because “soft” can also imply un-important). Whether it’s doctors with patients, amongst healthcare staff, or even how administrators communicate with their workforce—we too often forget the simple basics of communication. Ultimately, it’s probably the single most important skill you can have for both career and life success, and also your own personal happiness in whatever you are doing.
This is going to be a more unique travel recap than any of my others mostly because I relied HEAVILY on Jordan to help plan our recent trip to Cape Cod! In college, Jordan played summer baseball on the Cape and has always always talked about going back to see his old ball park and the town that he lived in with his host family. Keep in mind, this was way before I had even met Jordan, and in fact, I never actually saw him play college baseball. (I like to refer to it as his cool life before he went to law school and became a nerd.)

SO because I have gone on many adventures this year that he wasn't able to go on, I told him that we could go anywhere he wanted for our 4th of July trip – and he chose Cape Cod. And don’t get me wrong, it was definitely on my list of must-see places, I just didn’t know much about it at all. AND NOW, I’m trying to plan when I’m going back because oh-my-gosh I fell in love with summer in the Cape! I know my photos and recap won’t nearly do it justice, but today’s post is all about our stay!

Ps. I asked Jordan what a Kettleer was, and I’m not sure I got a straight answer on that…

Where We Stayed in Cape Cod
When it came to where to stay in the Cape, I literally had zero clue, but Jordan was pretty adamant about staying in Hyannis because of it’s centralized location. Although now I’m not sure whether or not it really had to do with being very very close to JFK’s former compound. More on that to come.

Turns out he was probably correct about us hunkering down in Hyannis for a home base as we were super close to the harbor and the ferry to Nantucket which we decided to do right when we got there. There are tons of little restaurants and shops along the harbor and about two blocks away on Main Street. We literally walked most places which was really enjoyable with the unbelievable weather. I don’t think I broke a sweat once while there!

Some of my favorite parts of Hyannis were Jordan circling the Kennedy Compound about 7 times in our rental car, visiting the JFK Museum, eating my heart out on Main Street including delicious ice cream (dairy-free) at Katie’s Ice Cream Shop and catching Jordan’s Cape team (Cotuit Kettlers) win their baseball game!

And if you’re wanting food suggestions, we visited the cutest little French patisserie called Pain D’Avignon. It was possibly the best meal that we had on the Cape – and Jordan is a bit of breakfast snob so that says a lot. He got some delicious feta omelette, and I got Nutella banana crepes and a mimosa. (Duh, vacation life.) Just thinking about those crepes makes me super happy. Highly recommend for your morning coffee and newspaper – and even a bit of people watching. Pain D’Avignon is very popular for people coming in and out for breakfast pick-ups.

Trust Me, Take the Ferry to Nantucket
We almost did not take the Nantucket ferry because of how
long it took us to get through 4th of July traffic to the Cape, and I would have missed out on my favorite part of the trip had we not gone! You guys, I fell in love with Nantucket and its hydrangeas and crazy rose bushes and tiny lighthouses.

I literally turned into some sort of horticulturist wandering into people’s yards to look at their flower boxes. We didn’t get much past the port area, but the shops and restaurants are the most charming I’ve ever seen. I told Jordan that spending summers in Nantucket was my brand new #lifegoals. If you make it to the Cape, you absolutely MUST take the ferry to Nantucket and give yourself enough time to explore! I would have loved to make it out Sconset Beach, but they said it was an 8 mile bike ride and well… I’m just not at all prepared for all that, haha.

Head North to Truro Vineyards!
Legit one of my favorite things that we did on the trip! (I know I keep saying that. But this was SO fun.) On our way to Provincetown, we stopped in Truro to visit the town’s local wine vineyard and gin distillery (South Hollow Spirits). Not only do they have wine and gin tastings, but they also have a food truck with the most amazing lunch options! Jordan ordered the Sweet Potato tacos which were apparently so good that he conveniently ate them all before I got to try them, and I ordered the goat cheese and paté over salad. We washed it down with two delicious specialty drinks. (Please note that I took a photo of the drink menu, so that I could somehow try to recreate them.)

We also got a tour of the gin distillery and had a wine tasting where we tried 10 different wines – no surprise, rosé was my faves. I could have stayed all day under the umbrella tables with light bites, wine and yummy drinks. The reality is that we did stay there most of the day… which gave us less time at our next stop – Provincetown. (But in my opinion, I’d rather have stayed all day at Truro Vineyards.)

On to Provincetown
Provincetown is the most northern tip of the Cape and is known for Commerce Street which actually kind of reminded me of Bourbon Street and the French Quarter. All sorts of restaurants, little touristy shops – and all kinds of interesting characters walking around! I do wish that we would have been there on a normal weekend instead of 4th of July weekend, because it was a bit congested with people. We weren’t really able of doing some of the things that we might have otherwise been able to, but it’s defi-
As Michigan State University College of Osteopathic Medicine graduate Stacey Pierce-Talsma, DO, was finishing up her residency in neuromusculoskeletal medicine and osteopathic manipulative medicine (NMM/OMM), she found herself drawn back to academia.

In fact, she was so inspired by her medical school instructors that she decided to forge a career in academic medicine.

Dr. Pierce-Talsma began her career at the University of New England College of Osteopathic Medicine (UNECOM), where she was a full-time assistant professor and program director of the NMM/OMM residency program.

“I chose a position in academic medicine immediately upon finishing residency,” says Dr. Pierce-Talsma, who is now chair of the OMM department at Touro University California College of Osteopathic Medicine (TUCOM). “I admired my teachers and mentors so much that I wanted to work to inspire others as they had inspired me.”

In this edited interview, she reflects on her move to academic medicine and gives us a look at this career path.

Can you explain a bit about your former and current work schedules?

When I first began in academic medicine I saw my own patients approximately 12 hours per week, precepted residents seeing patients about 8 hours per week, and the rest of my time was spent either with administrative duties or teaching students. I worked 40-60 hours per week, with a considerable amount of flexibility in the summer when there are no classes. At TUCOM, I’m a full-time associate professor and chair of the department, so my role is much more administrative.

Otherwise I am providing lectures, conducting research, teaching in the OMM lab, innovating curricular changes and completing committee tasks. It’s 40-60 hours per week, with about seven hours of direct patient care.

What made you decide to move away from a traditional work schedule? What have the benefits been both personally and professionally?
Though I spend less time providing patient care in academia, I contribute daily to the growth and development of 270 first- and second-year medical students. These students will go on to provide care and wellness for many more people than I could care for myself.

Each day is a different opportunity. I truly look forward to each clinic session, each OMM lab teaching session.

I’m constantly inspired by my colleagues, the research and scholarly activity. It’s engaging to work with a team of colleagues to advance the mission of the school, implement curricular changes and have the opportunity to innovate and improve learning methods and models.

Students keep you constantly on your toes, asking questions you don’t know the answer to, pushing you to keep up-to-date on the most current literature.

What advice would you offer to physicians interested in shifting to a part-time schedule? What types of positions should they look for?

You can start in academic medicine slowly. At Touro, we have adjunct professors who teach the doctoring skills and osteopathic medicine labs from a half day to several half days per week. You could also connect with a medical institution and volunteer to give a lecture or a series of lectures.

Some medical institutions, including residency programs and medical schools, have part-time positions where you may precept residents in clinic or spend time teaching on campus. The most important thing is to realize that teaching doesn’t mean just showing up. Working with students often means diving into the intricacies and details of a subject, and they love to hear about how things work in the real clinical world.

What should physicians consider regarding finances, malpractice insurance and career impact when making this switch?

For academic medicine this varies depending on how much time you spend at the institution. Our adjunct (part-time) faculty are paid hourly and receive CME time for many of the hours they spend teaching.

Full-time assistant and associate professors receive a salary and other benefits including CME stipends, malpractice insurance, licensing fees, professional memberships and board recertification costs.

What I most appreciate about being an academic physician is the focus on personal development. Through my institutions, I have completed a master’s degree in medical education and leadership as well as a health policy fellowship through the American Osteopathic Association. There are also stipends for travel for presentations or lectures. These opportunities have allowed me to develop as a physician, educator and role model to students.

From the outside looking in, sometimes it appears that anything less than 80-90 hours per week is frowned upon. Do you see a trend where physicians accepting part-time employment becomes more acceptable?

I see many physicians, who serve as our adjuncts, running their own practice and spending time with the students in lab. I think they do this for many of the same reasons as I do—to avoid burnout, stay inspired, and contribute to the future of medicine.

I think there is increasing awareness of physician burnout. Many of my physician friends have started to decrease their hours. This has made it more acceptable to move to a part-time position, where you can still be engaged with patient care and your own passion for the practice of medicine, while remaining cognizant of your own health and wellness needs.

Anything else you would like to add?

As an osteopathic physician, I’m committed to the mind, body, spirit connection, seeing each person as an individual and fostering connection through touch and the application of osteopathic manipulative treatment (OMT).

Having the ability to contribute and inspire future generations of osteopathic physicians who may one day change the health care landscape is what keeps me coming back to work each day. Being an academic physician isn’t what I had planned when I first started medical school, but I’m so grateful to have found this path.
If you are an avid golfer, you have surely had this fantasy – waking up on a Saturday morning and sitting out on your deck or patio with a nice warm cup of coffee, staring out over your backyard, and beyond the fence is a beautifully manicured fairway, dotted with trees and rough, and a green just a few houses down. Then, after your coffee, you hop into your comfortable, custom-enhanced golf cart with plush seats, Bluetooth speakers and a smooth ride, take a right out of your driveway and make the 60-second trip to the first tee. Well, such is (or can be) the reality when you live on a golf course or in a golf course community. That’s the dream, right? No fighting traffic to get to the club, no needing to carve out multiple hours or fill up the gas tank just to go hit balls, and if you get tired and want to quit mid-way through the round, just drive right up to your backyard and you are home. Your house is the envy of all your friends, its value is always high (because everyone deep down wants to live on a golf course, right?), and your backyard is a sight to be seen.

And it is all true. There are so many wonderful advantages to living on a golf course or in a golf course community – from the high property values and quality school districts that usually are nearby, to the other community amenities and golf at your fingertips, living on a golf course is living the dream. Of course, it isn’t always fun and games, especially when a stray golf ball comes crashing through your window, but the risks and liabilities are just something to consider when weighing the pros and cons of life on the golf course.

Quality of Living
Beyond the obvious point of living either on, near or adjacent to a golf course, living in a golf course community comes with some distinct advantages. Heightened and stable property values aside (which we will discuss later), golf course communities are often zones to highly rated school districts and located in close proximity to bustling restaurant/grocery/entertainment hubs.

Also, not surprisingly, are the extremely low levels of criminal activity in golf course communities. Those communities that are gated or feature a guarded entryway to monitor all traffic in and out.

Property Value, Quality and Demand
One of the top benefits (or detriments, depending on if you are the buyer or the seller) of living in a golfing community is the higher level of property value, property quality and demand.

Within a golf course community, certain homes may have a higher perceived value than others by perspective buyers as
well, as homeowners may prefer homes with certain views of the golf course or specific locations.

"Many buyers come to me looking for a golf course lot,” said Cindy O’Gorman, one of the nation’s top realtors. “Most are looking for an expansive view and not just an interior lot overlooking a fence. Of course, a view comes with a price premium. A home situated on a golf course lot with lake or multiple fairway views without looking at other homes on the other side are very hard to find and will sell at the highest premium. Tee box and green locations are also in demand.”

Golf Galore
This seems obvious, doesn't it? It does, but it's still true – living in a golf community puts you up close and personal to fantastic golf and golf-related amenities. For one, having a house directly on a golf course is like having a hole in your own backyard.

Safety & Privacy Concerns

Of course, living on a golf course isn't all beautiful sunrises over the 17th green and playing golf 24/7 and cruising in your supped-up golf cart; there are some real concerns that homeowners need to be aware of when buying (and living in) a house on a golf course.

Safety is obviously one of the top priorities and concerns for anyone living in a golf course community, especially those who live on the course. And no, we aren't talking about rob-

berries, stolen identities or street crimes. We are talking about safety from flying projectiles, especially those of the round, white, dimpled variety. Depending on where you live on a golf course, your home can be at real risk of being pummeled with the occasional (or the consistent) wayward golf ball. Broken windows, dimpled roofs and battered windshields can be a regular occurrence for the golf course homeowner. Obviously, if you live behind a tee box, or in between two holes, you aren't going to have these types of issues, but if you live at the corner of a dogleg, or down the right side of a hole (hello, slice!), be prepared to see golf balls fly into your yard. While incidents of individuals being seriously injured by a wayward golf ball are extremely rare, broken windows and beat up grass is much more common.

Another big concern is privacy. To say it plainly – if you live on a golf course, you won't have any. During the day, there isn't much you can do to avoid golfers ogling your back yard.

Legal Liability, Responsibility and Protection

Unfortunately for homeowners, there isn't much, if any, in the way of legal precedent to protect you when your home is damaged by a flying golf ball. That is not to say that it is impossible to receive compensation for a broken window – we know of many instances where the golfer volunteers to replace or help pay for the replacement of broken windows or other damage – but there aren't any overarching statutes that place sole responsibility for damages to a home on a golfer or the golf course.
There's this mythical perfect restaurant, a place to meet, throw a beer or cocktail back, and unwind with friends after a day of work. Like a modern version of Cheers, except the food is good, the drinks are inspired, the space is bright, and it's all affordable. Peter Vorrias, co-owner of Greek Street Kitchen + Bar, saw that need in Jacksonville: not a bar, not a family restaurant, but something in between with a touch of each. Since opening Greek Street in 2014 he has been working toward that goal, building up each part of his restaurant. With Greek Street's new space and liquor license Peter is making that mythical place a reality one happy hour at a time.

Peter started by asking his sister, Eva, to join him in co-ownership of the restaurant. It turns out she didn't need much convincing. Chef Eva, working in corporate kitchens, decided it was time for her to get out of the corporate gig, spread her wings and cook her food her way. She called Peter to give him the news and as luck would have it, Chef Eva and Peter's life change happened to intersect with each other and Greek Street was born.

Chef Eva took great care in cultivating her menu, even in the little things. Her Tzatziki sauce is made from scratch daily, including the Greek yogurt used to make Tzatziki. The lamb used isn't the pre-processed "lamb-like planks" that are frozen and warmed up on the griddle. It's the real thing, rotating on a spit and cut to order. As Chef Eva looked to create an authentic Greek menu, Peter went to work on the bar, selecting and importing Greek beer and wine you won't find anywhere else in Jacksonville. His goal was a full bar, but he knew he had to take it step by step and let his restaurant grow into it. In the meantime Peter put together flights of Greek wine because he knew his customers would not be familiar with his offerings. The flights became wildly popular.

Greek Street Kitchen + Bar

Greek Street first found a space on St Johns Bluff at the Shoppes at East Pointe Landing. It seated about 50 people. Their reputation for wonderful, authentic Greek fare spread. About a year and a half after opening, they quickly outgrew the space and decided to move to their current location on University Blvd South. The new space seats over 100 and is beautifully decorated with pictures of the various streets and alleyways around Greece adorning the walls, keeping the theme of "Greek Street" Kitchen and Bar. It has a modern, industrial comfort feel to it. Peter and Eva never set out to make the Greek food of their grandparents’ age. They intended to offer modern Greek fare and pub fare with a Greek twist. That's just what they've done with their menu and their space.

In the back of the house, Chef Eva is completely at home, leading her cooks in the proper way to prepare signature dishes like pastitsio, souvlaki, and spanakopita. And like any chef, she loves to see the faces of those that eat her food, which she can do through the large window looking out into the dining room from the kitchen. For her, customers are in her home and she wants to make sure you’re enjoying the food she would serve her own family.

Peter and Eva recently reached a tremendous goal they had set for the restaurant since the beginning: expanding to a full liquor bar with a fun and inspired cocktail menu. Guests can enjoy such creations as the Greek Street Signature Cocktail, the Ouzotini (vodka, ouzo, peach schnapps, fresh lime juice, and mint leaves), or the Cretan Donkey (Greek Street's Moscow Mule), the Olympian (their cucumber and basil gin and tonic), and a variety of other fun, fresh, cocktails. Happy Hour really is legendary at Greek Street, with 2 for 1 and $2 off drink specials between 3-6pm every single day, plus small plate specials.
Family is an important element in the lives of Peter and Eva. They are both first generation, American-born Greeks with a strong love of family and extending that love to friends and customers. It’s not uncommon for Peter to host 50+ people at his home to enjoy a traditional Greek meal. This year Peter and Eva are inviting the community to join in their family tradition with the Greek Easter celebration they are hosting at Greek Street. There will be live music, singing, dancing, and a full traditional Greek Easter meal of lamb carved from the spit, roasted lemon potatoes, Greek salad, baklava, and your choice of Greek wine or draft beer. Lemon Chicken and Veggie Kfetides will be available as alternatives to lamb. Plus they will have drink specials and $2 Ouzo shots. Greek Street’s Greek Easter Celebration is a way to join in the Greek spirit of the day. Tickets are $25 in advance, available here at Greek Street Kitchen + Bar’s website.

It has been nothing but the challenge and daily stretching of a rapidly growing restaurant for Peter and Eva since they opened Greek Street. But they are operating at a nice hum now- a spacious and beautiful restaurant, a full bar, fully developed food and drink menus, and now special events sharing Greek culture with the greater community. No matter how much Greek Street grows, Peter and Eva are adamant that it will retain its ethos of a modern, family friendly restaurant with inspired food and drinks. It’s no wonder this Greek restaurant embodies that mythical place that’s perfect for families and for grabbing cocktails with friends. The Greeks are known for their mythology. Peter and Eva are just bringing it to life.

Greek Street Kitchen + Bar:
Charcoal BBQ Spit for Greek Easter Celebration

Greek Street Kitchen + Bar –
Choco-Kebab

Greek Street Kitchen + Bar –
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