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Contents
2     Artificial Intelligence in Medicine
4     A Spotlight on DCMS Member Dr. Steve Dorman
7     What Celine Dion Can Teach Us About Patient Care
8     The Best & Craziest Gadgets From the CES 2018
12   Wine Talk
14   Taking a Vacation as a Solo Practice Doctor
16   Amazing Spa and Wellness Resorts in the U.S.
18   Dr. Eliza Cheung on Providing Support to Refugees
20   Legal Tips for Physicians to Manage Pain Patients
22   The Best Restaurants to Get a Philly Cheesesteak
23   A view – Luxury Ski Lodge in Aspen

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Artificial Intelligence in Medicine: Hope or Hype?

By Brian Scogland

The application of artificial intelligence in the medical field holds great promise for improving patient health, but will doctors and patients feel comfortable using it?

The use of Artificial Intelligence (AI) is on the rise in the technology sector and has become a buzz-worthy topic in many corners of our digital world. The application of AI in the medical field holds great promise for improving patient health, but will doctors and patients feel comfortable using it? Young startups have begun leveraging this technology to prove better health outcomes, but there’s still a lot to do before we’ll see AI used pervasively in the clinic.

Current Landscape

To date, the sweet spot in healthcare AI has been pairing algorithms with structured exercises in reading patient data and medical images to train machines to detect abnormalities. This training is called “deep learning.” In the same way, algorithms are being used to sift through vast amounts of medical literature to inform treatment decisions where it would be too onerous a task to have a human read through the same journals.

Companies like MedyMatch and Viz are doing just that. They’re using proprietary algorithms and applying deep learning to aid physicians in making faster diagnoses of strokes in emergency treatment situations. Their algorithms produce an output by ingesting patient CT scans and using the programmed deep learning to aid in the diagnosis of a stroke. Advancement in this particular instance is especially significant because receiving appropriate treatment quickly has a big impact on patient outcomes.

The annual Radiological Society of North America (RSNA) conference was held in Chicago at the end of November, and overwhelmingly the topic of the week was the use of AI in radiology and medical images. I heard firsthand accounts that most scientific speaking sessions involving AI were standing room only and researchers presented on the many promising applications of AI in areas of care of stroke patients, finding and classifying the risk of lung nodules, and identifying imaging cases that need priority review by a radiologist.

While these technologies and approach to AI in the clinical setting hold promise, there has been a recent backlash in the marketplace from the failure to live up to the great hype of IBM’s Watson. Watson was to play a central role in establishing an Oncology clinical decision support system at the MD Anderson Cancer Center, but the well-publicized breakup of the partnership with IBM has given some in the industry pause about the great promise of AI in the healthcare setting.

Facing the Challenges

Companies developing AI and machine learning are forging ahead with the understanding that they face uncertainty as they navigate the FDA clearance or approval pathway needed to commercialize these quickly-changing technologies. Many of these technologies fall under the clinical decision support software classification with FDA. There is new guidance for those classifications, but a significant gray area remains in understanding how FDA is going to regulate AI offerings.

FDA has recognized that the existing commercialization paradigm quickly becomes too burdensome to continue to innovate at such a rapid pace. The agency has created the Digital Health Innovation Action Plan to address these concerns and create the new regulatory pathway for these emerging technologies. With this action plan, FDA is partnering with some of the world’s most innovative companies (Apple, J&J, Roche, Samsung, Verily) to create a new and tailored approach to regulating digital health technologies like AI. The proposed output will likely be a new way for FDA to collaborate with the industry and ensure that the focus is on clearing and approving the highest-risk technologies. Clinicians and regulators may find it difficult to trust a deep learning algorithm that doesn’t share any information about how it arrived at a certain diagnosis. This “black box” of information makes it difficult to provide transparency to regulators as well as the physicians relying on it. Where this black box exists, it is going to become ever more important that FDA is comfortable with the technology behind it as well as the company producing it.

The fact that many AI technologies leverage the cloud and are working with Protected Health Information (PHI) opens these technologies up to security concerns. Items that need to be addressed by manufacturers, like HIPAA regulations and cybersecurity measures, come into play. Both HIPAA compliance and cybersecurity come at a cost to manufacturers and require dedicated staff to attend to the myriad challenges.

Ultimately, what is driving the growth and adoption of AI is the desire to do things better than we can today. The success of AI relies on the understanding that humans are imperfect and the use of computers is a way to try to remove bias in healthcare. As software-based AI technologies and our reliance on them deepens, I believe there is valid hope being placed in these technologies beyond the hype.
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A Spotlight on DCMS Member  
**Dr. Steve Dorman**  
*By Erica Bunch, Duval County Medical Society*

By 8:00am, you’ll find Dr. Steve Dorman seeing patients at Family Allergy and Asthma Consultants on University Boulevard, but if you happen to be up before the sunrise, you may run into him on his surfboard off the coast of Mayport Beach.

Dorman grew up in Northeast Florida, where some of his favorite childhood memories were spent at the beach with his family. It wasn’t until age 12, however, that Dorman found his love for surfing. After borrowing a friend’s surfboard one day, Dorman knew he had found a new passion in life, and it wasn’t long until his dad bought him his first board.

“I always enjoyed being outdoors—specifically, doing activities related to water, especially involving the ocean,” Dorman said. “I went surfing every chance I got. I was hooked.”

As a teenager, Dorman and his family moved to central Texas, a lengthy drive from any major beach. But the young surfer didn’t let that stop him from hitting the waves every at chance he had. Throughout high school and college, he often took opportunities to surf on family vacations or while visiting friends back in Florida. Even while attending medical school at Texas A&M University, Dorman still took to the coasts when he wasn’t hitting the books or training.

“My parents moved back to Florida while I was attending college in Texas,” Dorman said. “I would surf as often as I could during school breaks throughout college and medical school.”

Dorman always knew he wanted to pursue science; his inspiration coming from his childhood soccer coach, who also worked as a physician. Dorman says the coach “opened [his] eyes to the world of medicine.” Years later as a teen, working in a research lab solidified Dorman’s goals.

“I always had an interest in science and in nature,” Dorman said. “Growing up I either wanted to be a doctor or a marine biologist.”

Ultimately, he chose medicine, earning both his undergraduate and medical degrees from Texas A&M. Noticing a growing number of physicians in the specialty of allergy and immunology, Dorman entered the field and found himself intrigued by the vast array of cases he saw.

“Ultimately, I became interested in allergy and immunology because you can help individuals, but also really have a big impact on public health,” he said. “Allergies are on the rise in developed countries, such as ours, magnifying the importance of a specialty in allergy and immunology.”
Even though Dorman chose the path of medicine on a professional level, his passion for nature never died out. Not only does he enjoy immersing himself in the local marine environment, but he's travelled to many surfing hot spots abroad. He says the best place he's ever surfed was Bathsheba, Barbados, but he has also enjoyed the waves in Costa Rica and southern California.

When asked where he would surf if he could choose anywhere in the world, Dorman had a difficult time narrowing down his choices.

"I'd love to go to Australia. There's a couple places there I'd love to go," he said. "I think it'd be really interesting to go the British Isles as well. And the western coast of France is supposed to be a nice spot."

He also mentioned South Africa, and says he plans to hit up Nicaragua for his next international surf trip.

But for Dorman, there is more to the ocean than just surfing. As the marine environment remains threatened by pollution, he has taken a stand alongside other surfers and environmentalists to protect beaches worldwide.

After moving back to Florida last year, Dorman joined the Surfrider Foundation - a grassroots organization dedicated to preserving beaches and oceans. The 33-year-old foundation currently has over 50,000 members around the globe, including legendary surfing champions like Kelly Slater and Shaun Tomson, and regularly carries out beach cleanup efforts and political pursuits to ensure the coasts remain healthy and accessible. Dorman says these matters are extremely important to him, and encourages everyone - surfer or not - to take care of their planet.

"We only have one Earth," Dorman said. "Our kids, our grandkids, and hopefully many more generations after that, are going to live here. So, we need to do what we can to try and conserve every part of our natural resources now."

In addition to caring for the environment, Dorman has made strides to improve people's lives even outside of his practice. He's embarked on medical mission trips to Mexico along the U.S.-Mexico border, to aid with diagnosis and treatment in an area where resources are scarce. Not only was he able to help those in need, but Dorman says the experience acted as a personal challenge because the cases he handled required faster, narrowed-in treatment as well as different approaches to diagnosis than he was used to. He is grateful for the challenging opportunity, however, as he believes it made him a better physician.

"Serving people from a variety of backgrounds is extremely gratifying for me," he said, adding that his experiences gave him "an important set of skills that helped to deal with a variety of people from many different situations."

Dorman has also participated in urban free clinics and efforts to assist those who may not otherwise have access to medical care. He says a lack of resources for diagnosis and treatment surrounding these populations presented challenges similar to what he faced in Mexico. However, he believes the obstacles are minor when considering how greatly people have benefitted from free clinics.

Despite his various volunteer and environmental pursuits, Dorman finds time to participate in organized medicine as well. He is a member of the Duval County Medical Society's Journal and Communications Committee, which oversees production of the Northeast Florida Medicine journal. He also serves as one of the Society's delegates to the Florida Medical Association (FMA) House of Delegates, where he helps review resolutions and set policy for the FMA. Dorman is also a member of The American Academy of Allergy, Asthma & Immunology and the Florida Medical Association.

Above all else, Dorman credits his family as being his biggest role models and inspirations behind his accomplishments. He says his wife Julie is his better half, describing her as "a loving, gracious person and a great friend," while his two-year-old son Trip "has a vibrancy and enjoyment for life that makes everyone's day." He also says his parents' wisdom has influenced his being open-minded and gracious towards others.

"Appreciating the strengths of those around you and those different from you has always been something that I've tried to do," he said. "Whether it be friends, professors, colleagues - people I meet anywhere."
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RUTH’S CHRIS. STEAK HOUSE
During a recent Las Vegas performance, an intoxicated concertgoer got on the stage and stood next to singer Celine Dion. This situation could have been handled in multiple ways, but Ms. Dion never lost her composure and handled the situation with grace and kindness. She brilliantly was able to diffuse the situation without anger while maintaining her dignity and that of the fan. The way she handled the situation and what she said to the audience afterwards can help each one of us manage challenging patient situations.

Ms. Dion did not react with irritation; she reacted with compassion. Security guards immediately tried to remove the fan, but Ms. Dion asked to speak with her admirer. Ms. Dion stated to the woman, “Let me tell you something. I’m glad you came on the stage tonight. I know you wanted to come closer to me. But you know what, I’m glad you came closer.”

Yes, I’m aware that in healthcare we don’t have a group of security guards surrounding us. Like myself, many of us have had to deal with unruly patients who could pose a physical threat. However, this woman did not appear dangerous. Could she have been dangerous? Yes. That was a very real risk. In healthcare, we must make snap decisions on our own safety with patients. Will Ms. Dion’s approach always work with every disorderly patient? No. However, in many cases, it works.

When the security guards came to help Ms. Dion, the intoxicated woman stated, “Don’t touch me.” Ms. Dion asked the woman if she could touch her; she touched the fan’s face. Ms. Dion stated, “You know what? We’ve got babies that we love, and we’re going to fight for them. And we’re wearing gold, that’s a sign.”

She told the fan that the security guards are her friends and that it is OK to go with them. The fan was gently taken off the stage.

After the intoxicated fan was escorted off the stage, Ms. Dion thanked the audience for their patience and used the experience as an example of compassion. Ms. Dion stated, “Some people go through a lot. And some people need to talk. And I want to say thank you to all of you. Because for maybe five minutes we have given this lady a moment to talk. And we heard you. And gentlemen thank you. You’ve done what you were supposed to do. I appreciate it very, very much. Thank you so much for your patience tonight.”

**Learning points**

*Avoid being angry.* Ms. Dion never lost her temper, and we should follow her lead when working with patients. Over the years, I have worked with many angry patients, but I always stayed calm. Also, I never made the big mistake of saying, “Calm down.” Not one person in the world has ever calmed down after someone told them to calm down! I simply let them talk and share their stories. I have done deep breathing with patients to help them deescalate and focus on the situation.

*Find commonalities.* Ms. Dion found experiences that the two shared, such as both being mothers. She even noticed they were both wearing gold-colored clothes. Pointing out the similarities helped create a bond with the fan and keep her calm. Find commonalities with patients and point them out as a bonding experience. If your patient is wearing a t-shirt that says, “I Love Beagles,” and you have a Beagle, say something!

*Express thanks.* When the fan came to the stage instead of immediately calling security, she thanked her for wanting to be closer. She thanked her for being so interested in meeting that she came on stage. One patient I worked with carefully typed and printed her medical situation with clearly-written details. I thanked her for taking the time to organize the information. When patients take steps to improve their health, such as by eating a healthier diet or joining a gym, thank them for taking an active role in their well-being. Ms. Dion also expressed thanks to the people who work for her, the security team. We must also thank the wonderful people we work with in our medical facilities.

*Be empathic.* Ms. Dion talked about “people going through a lot” and having the “need to talk.” Patients are going through a lot, and we must allow them the opportunity to talk. I am not saying we need to give them an hour, but giving them a few minutes can make a big difference. Start with empathy; connect with patients on an emotional level and then move on the medical information. First, show you care. Once patients know we care, they will more freely talk about their medical issues.

One of Ms. Dion’s most famous songs is *The Power of Love.* When working with patients, we must focus on the power of providing loving care.

Edward Leigh is founder and director, Center for Healthcare Communication
Consumer Electronics Show 2018: The Best—and the Craziest—Gadgets

By Stephen Cass

Some people like to sneer at gadgets as the trivial amusements of a decadent society. But many technologies that later came to be considered essential parts of modern life began their life as unnecessary technical baubles. For example, in 1970, the first consumer VCR prototype was unveiled at CES, a technology previously only needed by television studios. The home VCR then started the home-viewing and -recording revolution, leading to a critical U.S. Supreme Court decision regarding copyright, and laying the groundwork for YouTube and Netflix. Even when a technology goes nowhere—3D TV glasses anyone?—looking at widgets, gizmos, and novelties can still provide a unique window into larger technological and cultural trends.

So, I defend the gadget as a worthy object of inquiry, and consequently have spent the last week at CES scouring the halls looking for interesting examples, particularly from smaller companies and startups. CES is so big that no such survey could hope to be comprehensive. Even so, here are my personal nominations for this year’s weird and wonderful, in no particular order.

Hushme
Winner of the “gadget that looks most like a prop from a dystopian science fiction movie” award, the Hushme is designed to solve a problem endemic to today’s crowded spaces and open offices—having to listen to people’s phone conversations (or conversely, having other people eavesdropping on your private conversation). The HushMe is an ear-phone-equipped mask that you snap around your mouth. A microphone inside the mask transmits your voice to your phone, while the mask blocks the sound of your voice from being overheard by those nearby. It’s going into mass production in April, but you can preorder it now for $179.

Somnox
For better sleep, take a robot to bed. That’s the pitch made by the makers of the Somnox, a bean-shaped pillow. The Somnox pulses gently, as if it was slowly breathing, and the makers claim this movement encourages users to relax and slow their own breathing. The Somnox can also play music or an audio book, automatically turning off when it detects their user has fallen asleep. The $500 robot is expected to start shipping in September.

Gemini PDA
This product from Planet Computers should never exist, according to conventional wisdom. It has two strikes against it: First, it is a PDA, a product category long since swallowed up by smartphones. Second, it has a clamshell design, an approach largely discarded in the touchscreen era. But the Gemini has proved surprisingly popular among a certain set of techies who like it for two main reasons: they want to be able to use a real keyboard without having to carry a separate item, and they also appreciate that the PDA can dual boot into either Android or Linux, which lets them use it as an actual computer, not just a locked-down interface for apps or websites. The Gemini was wildly popular when it launched on Indiegogo, and it will go on sale to the general public early this year at $500 for a Wi-Fi only version and $600 for a 4G-enabled version.

Forward CX-1
One of the most-loved characters from Terry Pratchett’s satirical Discworld novels is The Luggage, a sentient magical chest that follows and protects its owner with homicidal devotion. Forward X Robotics hasn’t done the lethal protector part, but they’ve got the following-the-owner bit down pat with their CX-1 autonomous carry-on luggage. (It’s a carry-on because you can’t put something with big lithium batteries in the cargo compartment of plane.) The CX-1 has motorized wheels, and uses a camera to recognize you and avoid obstacles (a wristband helps with tracking if you go out of view, and can alert you if someone tries to make off with your traveling companion behind your back). Currently, it’s only available in prototype form with a price to be determined, but hopefully will be released sometime in the next 12 months.
Hip’Air
This is definitely a product that sounds absolutely crazy at first blush, but then it turns out it embodies some worthy goals. The Hip’Air from Helite is a belt equipped with airbags that inflate if the wearer falls. It’s intended to protect seniors from broken hips, an injury that significantly increases their mortality rate and is expensive to treat. Will the Hip’Air really be the answer to this problem? We’ll start finding out in Europe, where the belt will go on sale in March for $800.

FoldiMat
The FoldiMate is a refrigerator-sized machine that folds clothes. And that’s it. But it was enough to make it—by far—the most popular item I tweeted about at CES, with opinion running toward the “shut up and take my money” point of view, although a significant fraction of responders thought rather that it represented the ultimate in laziness. The version demoed at the show was a partially-working prototype, but the FoldiMate crew hopes to start shipping units in late 2019 for $980.

DroneHunter
Most of us don’t have to really worry about being dogged by drones, but it’s a burgeoning problem for people running, say sports stadiums, or airports. One potential solution is to train eagles to take out the intruders. Another is Fortem’s DroneHunter system. This is an anti-drone drone that uses a radar module to autonomously spot and pursue aerial invaders. Once it closes in on its target, the DroneHunter fires a net to enmesh the luckless drone—the DroneHunter can then either release its prey to fall to the ground (with a parachute to slow its descent) or tow the netted drone home. It costs around $20,000, depending on various options.

Percept and Me.mum
There were a number of fertility-related products at the show, of which two caught my eye in particular. Percept from Earlysense is a $200 contact-free fertility monitor. You stick it under your mattress and it detects the motions and vibrations produced by a sleeping body—it’s sensitive enough to pick up your heartbeat and breathing rate. From this data, algorithmic magic can determine a six-day fertility window in each month.

Me.mum is a smartphone accessory that uses a more direct, but still non-invasive approach. You place a drop of saliva inside a lipstick-sized device that attaches to your phone’s camera. When the saliva dries, any luteinizing hormone—which is associated with ovulation—crystallizes out. Light is shone through the sample, and if the hormone is present, its unique diffraction pattern can be identified by the camera. Me.mum should be on the market in six months, priced somewhere between $80 and $100.

M1 Fetus Camera
If the Percept or Me.mum helped you conceive, perhaps you might be interested in the M1 for Marvoto. It’s a home ultrasound scanner that can display 2D or 3D images of a fetus on your smartphone (from where you can instantly share it, of course). Marvoto hopes to launch the $2,000 device in March or April in Hong Kong, and then try a U.S. launch later. The scanner’s resolution is good enough to determine gender, so I asked the company if they were worried about contributing to the problem of skewed birth sex ratios in favor of males in several Asian countries. The company said they would not pursue sales in problematic countries, and believed it wouldn’t be an issue in places like Hong Kong, Europe, or the United States.

Prosthesis
Okay, this last one is stretching the definition of gadget to the breaking point, but it is still a device intended to be used by an individual, and it was on the CES showfloor—albeit looming down over us. Prosthesis is a real-life mech or mecha, a type of giant piloted robot that dominates an entire sub-genre of science fiction. The lithium-battery-powered Prosthesis was built by the robotics division of Furrion and is intended to explore the potential of exoskeleton technology (think the power loader seen in Aliens). Furrion hopes that Prosthesis could be used as the basis for a mech racing league, which will sound either utterly awesome or utterly insane to you, depending on your taste in science fiction. So this last entry is up to you—do you think this was the best gadget at CES, or the craziest?
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Although I do not often write about the topic in detail, wine producers are a leader in the global goal of lowering carbon emissions and reducing man’s impact on the land through the use of chemicals. Unlike many field crops, where farmers have a short window to raise their crops, wineries get to take a much longer view, often stretching across multiple generations. While this is much more common in Europe, outside of our purview for this club, this month we will look at two wineries who are completely invested in producing great wines with a minimal impact on the environment. There is a lot of misinformation about wines made with organically-grown grapes, so this month I hope to set the record straight. The first thing to understand is that there is a difference between USDA certified organic wine, those made using organically-grown grapes, and versions produced using biodynamic and sustainable farming practices. This is a huge topic, but I am going to boil it down as succinctly as possible. First, it is important to understand that conventional farming focuses on maximizing crop yield through a prescribed process of vine nutrition via fertilizer and avoiding issues for the vines with fungicides, pesticides and herbicides. Most treatments are applied prophylactically, meaning in advance of any issues. For example, if it rains in July, the farmer would spray a commercial fungicide to prevent rot on the vines. This would be done regardless of whether any rot is detected. This is far-away the most common type of farming done, representing roughly 90% of all grapes grown in the US. According to the Organic Vineyard Alliance (www.organicvineyardalliance.com) a USDA certified organic wine must be made with grapes grown following certified organic practices, which involves annual inspection. This means the grapes are grown without the use of any synthetic fertilizers, herbicides, fungicides or pesticides. It does not prohibit versions that are natural/organic. In the cellar, the winery may use cultured yeast, but they are not allowed to use sulfur at any stage of the production. This differs from a natural wine where they cannot use anything other than indigenous, also known as wild, yeast. A wine made using organically-grown grapes, such as our Bousquet Gaia, follows the same farming practices as certified organic wine, but they are allowed to use up to 100 ppm of sulfur in the production. Most red wines have between 30-50 ppm of sulfur, and dry white wines tend to be slightly higher, 50-70 ppm. Sweet wines, and those with very low pH, do require more sulfur to remain shelf stable. While we are on the topic of sulfur, it is should be noted that there has never been a study that conclusively links low levels of sulfur ingestion to any problem other than triggering an attack in asthmatics. Biodynamic farming is a process of grape-growing that incorporates the writings of Dr. Rudolf Steiner, an Austrian philosopher/social reformer from the mid-19th century. Among many other things, Steiner was a harsh critic of the effect of the industrial revolution on society. Biodynamic farming applies his writings to assume that the vineyard begins at the core of the earth, extends to the stars, and encompasses all the living things within the “biosphere” of the farm. What is most important to know is that biodynamics does not allow any man-made chemicals on the vine, but does allow sulfur up to 100 ppm. Most biodynamic producers only apply sulfur at bottling, if at all. Finally, sustainable farming, which is the process used by Left Coast Cellars, allows for man-made chemicals, but only in response to problems, not preventatively. Certified Sustainable farming involves an inspection process and incorporates practices to limit the use of man-made chemicals, the winery carbon footprint and often local environmental threats, such as being “salmon safe” for producers in the Pacific Northwest. There is no restriction on the use of sulfur in these wines up to 300 ppm. While this may seem a somewhat vague designation, sustainability allows wineries in marginal growing regions to demonstrate they are consciously trying to minimize their impact on their environment.

2015 Domaine Bousquet Gaia is owned by a French family that arrived from Argentina from Carcassonne, France, in 1990. They wanted to grow grapes using only organic protocols, and they identified the dry climate of the Valle de Uco in Argentina as the perfect place. Since then, they built a modern winery and are now producing some of the most award-winning wines, made from organic grapes, in the world. As you can imagine, with such a huge commitment to organic farming, the Bousquet family feels a great connection to the earth. All of their vineyards lie in the Tupungato region of the Valle de Uco, roughly 3 hours south of the city of Mendoza. At nearly 4000 feet above sea level, the climate is very dry and the soil is primarily sand, weathered
They name their reserve wine “Gaia,” after the Greek mythology personification of earth. The grapes for this wine also come from their Tupungato vineyards, but the blend is 50% Malbec, 45% Syrah and 5% Cabernet Sauvignon. The grapes are all picked and fermented separately, then aged in neutral French oak barrels for 10 months. The final blend is made right before bottling. When you open this wine you will also want to give it a few minutes in the decanter before serving. Once you do, it offers you a complex nose of fresh red cherries, dried dates, cooked currants, subtle burnt caramel and vanilla pastry cream. On the palate it is quite dense, with the fruit moving across the palate in a thick wave, framed by sweet notes of oak and spice. This wine has an impressively long finish for $20, and will cellar nicely for up to five years. Drink this wine with braised beef dishes or a slow-roasted pork shoulder.

2015 Left Coast Cellars Pinot Noir “Cali’s Cuvee” is from a Willamette Valley, Oregon producer totally focused on minimizing their impact on the environment. The winery was established by the Pfaff family in 2003, on what were former apple groves. This is one of the largest contiguous estates in Oregon, and this allows them to create a unique biosphere where they also produce honey. Bees are particularly sensitive to chemicals in their environment and are the symbol of natural farming. Their estate lies relatively far south in the upper Willamette Valley, which is important because they lie within the Van Duzer corridor. This is a divide in the coastal mountain range that imparts a greater impact of ocean breezes on the area. As a result, their vineyards are cooler and windier than their neighbors to the north. The vineyards are farmed using LIVE certification practices (Low Impact Viticulture and Enology), the estate is certified Salmon Safe and they participate in the new SALUD program which provides healthcare to their farm workers. In addition, they are the recipient of the second largest grant in Oregon for solar power, which runs 90% of their electric needs. They also only use irrigation water from their high-elevation retention ponds. The winemaking, directed by Joe Wright, accentuates the quality of the fruit with minimal producer fingerprints. Cali’s Cuvee, which is named for the owner’s daughter, is a Pinot Noir made from selections from all of their six vineyards, and a mix of eight different clones. Grapes are fermented in open-top, stainless steel fermentors and the wine is aged for nine months in French oak barrels, with about 10% being new. When you are ready to drink this wine, give it a splash in the decanter for a few minutes to release the bouquet and allow the acids to soften. Once you do, this wine reveals the relatively savory, cool climate driven side of Pinot Noir, with aromas of tart cherry, underripe strawberry, rhubarb, rooibos tea and toasted walnuts. On the palate, it shows good concentration but a bit of restraint, as the moderate acidity and tannins pull on the fruit. This wine is a lovely example of the true nature of Willamette Pinot Noir, and one that works great with salmon patties, pork tenderloin or an Alsatian bacon tart.
It's hard enough for any of us to consider taking a vacation in the current economic climate, let alone those of us responsible for the health of others. If you're anything like the doctors I spoke with, you might actually be afraid to take a vacation. So, how do you do it, especially if you work alone?

1. Walk Before You Run
When you're going solo, it can take a few years before you're able to plan a big trip, but that doesn't mean you can't take a vacation. Instead of aiming for two weeks off, start small and perhaps give yourself a Friday off every other week.

Dr. Debra Jaliman, a New York City-based dermatologist and author of Skin Rules: Trade Secrets From a Top New York Dermatologist, didn't take a vacation for the first two years after she set up her practice 27 years ago.

“If you're afraid to take a whole week off because you'll lose patients, you could take long weekends,” Dr. Jaliman says. “That's a way you don't really lose patients, I find, because they can get you during the week.”

2. Call in Reinforcements
You might be concerned that if you call in a covering physician, some patients will leave your care for theirs. There's of course a chance of that, but don't let that stop you. It will be better for all of your patients—not to mention your own well being—if you take time off and don't get burned out.

As Dr. Jaliman explains, solo-practitioners need to “take their vacation, because you're of no use to anybody if you overwork. I think you need to come back refreshed; it's good to take time off.”

Dr. Jaliman leaves her full staff of 10 in the office when she's vacationing, staying on call to back them up, with a registered covering physician as a last resort.

Dr. Travis Dierenfeldt is a GI doctor who lives in a small community in Kansas where he has solo-practiced for 12 years. He was able to vacation in his first year—but found himself fielding phone calls in airports.

His patients know when he goes on vacation—the office sends out a letter informing them ahead of time—and he has developed a kind of “informal cross-coverage” with the other GI specialist in town. (He concedes that this approach might not work as well in a larger community, however.) He also has a physician's assistant, and the State of Kansas requires a registered covering doctor to be on record for his patients when he leaves.

Dr. Joshua Charles, a solo-practice chiropractor based in Toronto, is three years out of school and into his practice, and has only taken one vacation during that time. He hopes to hire a physician's assistant as his practice grows, but in the meantime has two full-time receptionists in his office to field calls and schedule appointments while he's away.

Choose the option that works best for your particular practice, your patients, and your personality.

3. Establish Boundaries with Patients
You're either going to have to work to set boundaries with your patients or end up never being able to feel like you're fully away from work. Implementing this rule will vary, depending on what branch of medicine you're in and on your personality.

Dr. Jaliman admits that she has probably made herself too available to her patients:

“A lot of people have my cell phone number and they text me, they email me; people have access to me. I never really have a full vacation where I can say, ‘I'm totally away from it all.’ Even when I was having my daughter, people were calling me in labor. From the time I became a dermatologist, I've always had some interaction with my office or my practice or my patients.”
Dr. Dierenfeldt, in addition to informing his patients ahead of time about his vacations, chooses vacations that tend to render him unavailable—such as on cruise ships don’t get great wireless reception.

However as technology advances, there's soon to be no place that you're completely out of contact with the world. So with medicine as your calling you've got to decide: are you willing to be unavailable for someone's inevitable emergency?

4. Plan for the Financial Impact
Dr. Charles took his first vacation this year: a 20-day trip to South America. But it did sting a little. As he explains:

"Because I'm in private practice I only get paid when I treat a patient, so I found that not only did I lose 20 days of potential earning income where I literally made $0, but I found that it was also slow one week before I left, and when I came back things were slow for about 5-10 days. So, really, my income was essentially decreased for about 30 days."

When planning to take a trip, you need to factor in the cost of the trip, the loss in income while you're away, the cost of paying your staff and ongoing practice expenses in your absence, and the chance of things being slow to pick up again once you return.

Until he hires assistants, Dr. Charles has a new strategy for future trips: long weekends. He plans to “take three days off, maybe add another two days and go somewhere not too far, versus taking 20 days off—that was really tough.”

5. Unplug Yourself
If you really want to get away from it all and relax, you're going to have to be at least partially disconnected from technology when on vacation.

Dr. Dierenfeldt relates the story of a colleague who was "on his honeymoon on the beach in Australia answering his cell phone." With his physician assistant and covering physician, Dr. Dierenfeldt feels more comfortable leaving for vacation with the family now than when he first started.

“I think it depends on your personality, on how much you're able to let go. But for me, now that I've got a little bit of a back-up when I'm gone, it's made it easier,” Dr. Dierenfeldt says. Create policies for yourself on how often and under what circumstances you'll stay connected. For instance, you might commit to checking email and voicemail only in the mornings. Tell your staff or patients to text you only in the case of an emergency that you'll be capable of addressing long-distance. Then turn off your phone, or leave it in the room. And go have a drink on the beach.
Vacations come in all shapes and sizes – some fast-paced and others a little slower. If you always feel like you need a vacation when you get back from vacation, perhaps a spa and wellness resort is exactly what you need. These types of resorts cater to a range of budgets and offer spa packages, soothing treatments, all-inclusive accommodations, classes, lectures, fitness facilities, and meals. Since there are so many luxurious health and fitness retreats scattered across the U.S., you probably don't even need to travel far to rejuvenate your mind, body, and spirit. These are some of the best spa and wellness resorts in the U.S. to escape the stresses of daily life and experience pure relaxation in a beautiful setting.

**Red Mountain Spa**
**St. George, Utah**
Visit the Red Mountain Spa in St. George, Utah if you're a nature lover looking to get in shape and rejuvenate your mind. There are lots of outdoor destinations in the area of the spa. Make sure to check out Zion National Park, Bryce Canyon National Park, and Snow Canyon State Park while you're in the area. You can indulge in some of the many treatment offerings and enjoy healthy, wholesome meals during your stay. This is also a pet-friendly resort, so you won't even have to leave your favorite four-legged friend at home.

**La Quinta Resort & Club**
**La Quinta, California**
You can find rare and decadent spa treatments at La Quinta Resort & Club in California, including body wraps with wine grapes, and massages with sacred stones. During your stay, you can play a game of golf or tennis, and check out one of the many swimming pools on site. There's even a pet spa here, as well as a junior spa for families with kids. Take your pick between resort casitas, starlight casitas, executive suites, and hideaway suites.

**Peaks Resort & Spa**
**Telluride, Colorado**
Tucked into the majestic Rocky Mountains, Peaks Resort & Spa in Telluride offers plenty of relaxation, adventure, and natural beauty. Here you can hike, bike, fish, ski, golf, rock climb, and explore to your heart's content. Then head back to the resort to take advantage of the amenities at this massive 42,000-square-foot spa, with a full-service salon, a multi-level fitness center, indoor water slide, tennis courts, and ski-in/ski-out privileges. This resort is dog-friendly and kid-friendly, so it's a great destination for the whole family.

**Lake Austin Spa Resort**
**Austin, Texas**
Lake Austin spa is located on 19 acres of land in a beautiful landscape along the scenic lakefront. The facilities are cozy and stylish, and the resort offers classes for fitness, yoga, and meditation. There are many luxurious spa treatments to choose from, and many visitors choose to stay here because of the delicious cuisine. Stephanie Beaucamp is the Executive Chef at the Lake Austin Spa Resort and he serves up delicious and nutritious meals three times a day. Check the resort's calendar of events to see what weekly programs are taking place during your visit. Vacation packages include three meals, unlimited fitness activities and classes, and a selection of luxurious spa treatments.

**Spa Internazionale at Fisher Island Club**
**Fisher Island, Florida**
If you're planning a trip to visit Miami's South Beach, then Spa Internazionale at Fisher Island is one of the most beautiful and relaxing resorts you can find in the area. Take a seven-minute ferry ride across Biscayne Bay to reach this secluded island resort. Plenty of celebrities and political figures have frequented this resort over the years, and you very well could bump into someone famous during your morning jog. You can stay in a historic cottage, courtyard villa, or guest house suite during your visit. The most popular spa treatments here are massage, exfoliating body treatments, and facials.
“I better not eat this...”

...Said no dog ever.

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Dr. Eliza Cheung, Clinical Psychologist of Hong Kong Red Cross, has been deployed to Bangladesh on 23 September. To get the latest updates on this critical situation, we speak to her over the phone in this ‘3 Questions’ interview series.

MIMS: Can you describe your work at Cox’s Bazar, Bangladesh?

Cheung: My primary mission is to coordinate and provide psychosocial and emotional support service to those in urgent need. Since the new round of violence broke out in the Rakhine State of Myanmar at the end of August this year, a large number of people has been fleeing from Myanmar to Bangladesh’s border area Cox’s Bazar. Because of the urgency of the move and the long journey of crossing the border, these people could not bring much materials from their home. Hence, they are in urgent need of basic necessities.

Red Cross is distributing dry food, blanket, and water for 1000 families. Photo credit: Hong Kong Red Cross

Apart from physical needs, they also suffer from huge emotional burden. Many of them have lost contacts with their families during the chaos. More unfortunately, some of them had lost their family members before they successfully made it to Bangladesh.

Besides providing psychosocial and emotional support directly to those in need, we also have to think of how we can incorporate these support to each of our other stations. For instance, we have set up child-friendly spaces at our mobile health clinics to offer children the emotional support they need to deal with grief and loss. At stations where we distribute emergency items (e.g. dry food and blankets), we also offer emotional support to take care of the psychosocial needs of the impacted individuals.

A 7-year old girl from Myanmar teaches Dr. Eliza Cheung, Clinical Psychologist of HKRC a game from home.
Since many of the volunteers we work with are of a younger demographic who had never dealt with these scenarios prior – I would also need to provide training for these relief workers. Without training, inappropriate psychosocial interventions can easily do harm on the affected people – even our intention is to help them.

Dr. Eliza Cheung, Clinical Psychologist of Hong Kong Red Cross, provides training on psychological and emotional support during emergency for relief workers at Bangladesh. Photo credit: Hong Kong Red Cross

The relief workers also have to understand how to follow-up with different types of cases. For instance, if people lost contact with their family members, we might refer them to our "Restoring Family Links" service. If we identify individuals who suffer from gender and sexual violence, we might refer them to our field hospital for further treatment and support.

MIMS: Can you elaborate on the psychosocial needs of these affected individuals? How do you help them overcome the crisis?

Cheung: Many of them have witnessed some violent scenes previously before they made it to Bangladesh. When we speak to them, they are more than willing to share with us what they have gone through, and what are their worries and concerns right now.

I remember one case, in particular, whereby a woman proactively approached us for help. She, along with her two children, have come to Bangladesh around half-a-month ago. However, she has lost contact with her husband. She knew her brother had died in Myanmar, but she wasn't sure if her husband had survived.

A mother of two who fled Myanmar 2 weeks ago with her children and her mother safely, despite suffering from some physical illness since arrival, including fever and weight loss. However, she is not sure about her husband's situation at Myanmar. Red Cross Restore Family Link team collects her information and follow up the case. Photo credit: Hong Kong Red Cross

What I did was carrying out Psychosocial First Aid for this woman. And, since she has lost contact with her husband, we recorded her personal information and referred this case to our "Restoring Family Links" service – in hope to help her locate her husband, utilizing our global network. Although the woman has yet to locate her husband, at the very least, she knows we are here for her – and we have listened to her worries, and that we have provided practical assistance to address her concerns.

MIMS: Can you give us some updates on the upcoming plans of how Red Cross continue to support these affected individuals?

Cheung: Red Cross has been closely monitoring the situation in Bangladesh, even before the outbreak of violence in Myanmar. As of today, we are still one of the very few organizations that provide humanitarian services in both Bangladesh and Myanmar. Regarding our upcoming plans, we will continue to distribute emergency items. These include food, water, kitchen set and other daily necessities.

Another action is to ensure proper sanitation, including water sanitation. We have been conducting water tests to check if the water quality is fine and not contaminated. We are also building toilets and water facilities, since women rarely have chance to bathe due to the lack of facilities.

We are also working with the local healthcare professionals to build a field hospital. This hospital is equipped with X-Ray equipment, as well as having the capacity to carry out surgical operations. Along with this hospital, our medical teams will continue to provide services at our mobile health clinics. We observe there are signs of malnutrition among the children who just came to Bangladesh, so we will put more time on this too.

Dr. Eliza Cheung, Clinical Psychologist of Hong Kong Red Cross visited a family of 11 people who fled from Myanmar and has been suffered from nightmares, insomnia, and constant fear. Photo credit: Hong Kong Red Cross

Providing psychosocial and emotional support remains one of our most important missions. We conduct community education to inform the public that they can come to us if they encounter any situations. Also, we will continue to provide our "Restoring Family Links service, with higher priority in helping children who lost contact with their family members.
I have represented a number of physicians who have been accused of "overprescribing." Some of these were criminal investigations by local law enforcement authorities, such as a county sheriff’s office. Some were investigations by the Drug Enforcement Administration (DEA). Some were investigations by the state licensing agency (in this case, the Florida Department of Health).

In almost every one of these cases, either the DEA, the Department of Health or the local law enforcement authority used undercover agents posing as patients to make appointments with the physician, agents usually wore a wire device, and gave the physician false information.

In several cases the investigation began when the patient died of a drug overdose (in several of these cases it was unclear whether it was a suicide by the patient or an accidental overdose). In each of these cases, there was an angry, upset family member who blamed the physicians for the patient’s death. In each case, the physician I represented had no idea what the patient was going to do and did not know the patient was receiving drugs from another physician.

Anytime there is a death that may have been drug related, local law enforcement authorities will usually do a thorough investigation and will usually seize any prescription medications for the patient that they can find. This may result in the prescribing physician becoming the target of a homicide investigation.

Here are some ideas on how physicians might protect themselves from drug-seeking patients. These are tips I give to physicians I advise on this issue. Use the ones you want to and feel free to pare it down.

(Note: The following tips are not applicable to physicians who treat cancer or hospice patients.)

1. Follow all appropriate pain management guidelines, such as those available from the Agency for Healthcare Research and Quality (AHRQ) National Guideline Clearing House. See: http://www.guideline.gov/


4. Avoid working for practices or clinics that have a reputation as a "pill mill."

5. Most physicians who are the subjects of investigations for overprescribing tend to be sole practitioners or the only physician working in the clinic. Avoid this. If you are going to practice any pain management, it is recommended that you do so in a group practice or institutional setting.

6. Patients who are clearly addicted to opiates should be referred a physician specializing in addiction medicine for rehabilitation. Do not accept this patient back until the patient does this.

7. Excellent documentation is a must. Make sure your records meet all requirements of state laws and regulations.

8. If you are not a certified specialist in pain medicine, refer pain management patients out to one who is.

9. If you get any information that the patient has been "doctor shopping" or obtaining similar medications from more than one physician, immediately terminate the relationship and notify local law enforcement personnel. In many states, "doctor shopping" by patients is now a crime, and the physician is required to report the patient to law enforcement.

10. Be sure of the patient's identity. Require valid, government issued identification, preferably two, and ask the patient a few background questions that can be verified. Identity theft is common among drug abusers seeking prescription medications.

11. Require that prior medical records, especially diagnostic reports such as MRI and x-ray reports be received by your office directly from the other physicians or the radiology facility. Forgery of radiology reports and the sale of false reports is notorious among drug seekers.

12. Be leery of treating out-of-state patients and families of patients seeking opiates and other controlled substances.

13. If prescribing opiates for more than a short, chronic episode, require a pain management contract be signed by the patient in which the patient acknowledges your guidelines and requirements. These will include a number of provisions...
that are for the protection of the physician as well as the protection of the patient who may be tempted to over-use prescribed medication.

14. Require a urinalysis test before every visit. Wait and review the report prior to prescribing. An absence of the medications the patient is supposed to be taking is just as informative as the presence of medications you have not prescribed.

15. Establish and maintain a good relationship with the pharmacists at the local pharmacies around your practice, especially the independents.

16. Don’t be tempted to deviate from your practice standards and procedures by the fact that the patient is a celebrity or wealthy person. Do not deviate from your standards and procedures for anyone.

17. If the patient demonstrates drug seeking behavior (asking for certain medications by brand name and dosage, becoming angry and upset if the physician doesn’t prescribe what the patient wants, etc.), terminate the patient immediately.

18. Make sure you know what is going on outside your own office. Make sure you have loyal, trustworthy staff, especially your receptionist and medical assistants, who will advise you of any unusual behavior or comments of patients, attempts to bribe staff, etc. Train your staff to report such matters to you in person, immediately. Have a zero tolerance for this.

19. Be a good diagnostician. Read the patient history. Listen to what your clients say. Examine them appropriately. Do not prescribe pain medications for those who have no signs or symptoms of pain.

20. Require current x-rays, MRI’s and diagnostic tests. Do not treat based on old x-rays and diagnostic test reports.

21. If you are not board certified in the subspecialty of pain medicine, and you are not part of a large, institutional of pain management clinics, then you should only have a few pain management patients in your practice. The majority of your patients should not be pain management patients.

22. Do not ever allow a lay person or non-physician to be in control of your office, patient records, billing, bank accounts or appointments and scheduling. You will be held accountable for these; you must ensure you control them.

23. You should consider reducing the amounts of narcotics at each patient visit. Gradually weaning the patient off of addictive medication should be a primary goal of the physician.

24. Be very wary of any patient presenting with no signs or symptoms of pain or who has inconsistent signs and symptoms of pain. These are patients who may be selling the medications or who may be undercover agents seek to entrap you.
The Best Restaurants to Get a Philly Cheesesteak in Jacksonville

Written By: Jerry Watterson
Photography By: Jerry Watterson, Lisa Watterson

The Philly Cheesesteak! It’s one of the great American foods. Traditionally a cheesesteak is frizzled beef, melted cheese, and onions on a hoagie roll. It originated when Pat and Harry Olivieri decided to try something new at their hot dog stand in Philadelphia with American (or if they didn’t have American then some other similar substitute). Without further adieu, here’s who has the Top 5 Cheesesteaks in Jacksonville, Florida:

#5 D&LP Subs
Neighborhood: Jax Beach
Address: 1409 3rd St S, Jacksonville Beach, FL 32250
Brothers Chris Lewis and Dan D’Ambrosio always dreamed of owning their own restaurant and D&LP is the fulfillment of their dream. D&LP is a tiny little sub shop tucked away in a strip mall on 3rd Street in Jax Beach. They serve pizza, pasta and subs. They offer cheesesteaks in 8, 12, and 18 inch varieties. The American cheese we ordered was distributed perfectly evenly throughout. The meat was flavorful and there was a good amount of it. We’re confident that if you bite into this cheesesteak you’ll be a fan.

#4 Surfwiches
Neighborhood: Jax Beach
Address: 1537 Penman Rd, Jacksonville Beach, FL 32250
When we walked into Surfwiches like every other order I placed I started by asking them to make me a cheesesteak with Whiz. The woman taking orders looked at me like I was crazy then went on a diatribe about how she thinks Whiz is something they do in northern Pennsylvania. “People in Philly don’t eat their cheesesteaks with Cheese Whiz.” All I could do was laugh. Surfwiches bills itself as North Florida’s only authentic steak and hoagie shop. Their cheesesteak checks in as the most expensive in town at $10.19. However, it’s also the largest in town. The meat is flavorful and their bread is filled with just the right amount of it. According to their website their giant rolls come from Cinotti’s and their meat comes from Orlando. They’ve been a perennial winner of ‘Best Sandwich in Jax’ from the Florida Times Union.

#3 Sub Cultured
Neighborhood: Mayport
Address: 10 Donner Rd, Atlantic Beach, FL 32233
Sub Cultured Sandwich Eatery is a fun little hole in the wall sub shop offering all manner of creative sandwiches and french fry creations. Like every place we went we attempted to order two cheesesteaks, one with whiz and one with white American cheese. Subcultured informed us they don’t offer American cheese at all and gave of 5 other choices. We opted for cheddar since it’s likely the closest cheese taste wise to American (we’re shooting for consistency in comparison). Subcultured has bread we really loved. If we’re honest we actually liked it even more than the vaunted Amoroso rolls. We’re told it is baked locally at Cinotti’s which may account for why we preferred it over Amoroso since the Amoroso rolls were all likely frozen at some point. The bread could stand up to the cheese and juices of a cheesesteak without becoming soggy. Subcultured offered the spiciest of any cheesesteak we tried which for me was a slight distraction and for my fellow on this journey was a bit of a plus. When we picked up our cheesesteaks one was labeled Whiz and the other Real Cheese...a little jab at our attempt to order American. We got a kick out of that. Subcultured puts the fun in subs.

#2 Bongiorno’s
Neighborhood: Mayport
Address: 2294 Mayport Rd, Atlantic Beach, FL 32233
Ask around town who has the best Cheesesteak in Jax and one of the names you’ll hear over and over is Bongiorno’s. Bongiorno’s started as a little hole in the wall cheesesteak shop on Mayport road. A couple of years ago they opened a pizzeria and then merged the two together so they have one good size pizza and cheesesteak shop. If you’re looking for Bongiorno’s look for the giant sign that just says Pizzeria. The owners Deanna and Jeff (who recently passed away) Bongiorno are originally from Philly and truly understand what a cheesesteak should be. Bongiorno’s has been my favorite cheesesteak in Jax for years. I had the good fortune to be introduced to Jeff while dining at the restaurant a couple of years ago. The passion he and his wife had for what they do was clearly evident and the pride they take in everything they serve is obvious. Many chefs will tell that the most important ingredient in a dish is love. That’s what I taste when I eat at Bongiorno’s. They get Amoroso rolls (again the gold standard in bread) from Cinotti’s.

#1 Philly’s Finest
Neighborhood: Jax Beach
Address: 1527 3rd St N, Jacksonville Beach, FL 32250
I walked into Philly’s Finest and headed up to the bar to place our order. I was immediately greeted by a gregarious guest with an empty beer glass and a wrapped cheesesteak sitting next to him. He proceeded to rave unprovoked that Philly’s Finest has the best cheesesteaks in Jacksonville. He had no clue who I was and I never volunteered that I was sampling cheesesteaks around town.
Today we’ll be inspired by a ski lodge in Aspen with interiors designed by Bonesteel Trout Hall. As I grow from and enjoy this second half of life, I am discovering the beauty of winter; so magically designed places like this luxury ski lodge in Aspen, Colorado, with its ruggedly chic charms tap into my sense of joy for the season.

What strikes me most about this stunning ski house a lucky family of eight enjoy, is how smartly the interiors were executed for real living which involves wear, tear, spills, fun, and relaxation.

What factored into the design team’s formula for rustic and restful?

- 21-foot ceiling heights
- Pennsylvania barn wood clad walls
- Reclaimed walnut hardwood floors
- Caramel-hued leather chairs
- Red accents in kitchen (inspired by Wolf range’s knobs)
- Plaid stone mosaic for kitchen walls
- Buffalo plaid upholstery and fabrics
- Pendleton blankets
- Planked walls with Chevron pattern
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