



ISSUE 3 / 2025

Stay Healthy

YOUR RESOURCE
FOR HEALTHY LIVING
AND WELLNESS

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Your partner in care

From diagnosis to recovery

At UHS, we understand that a cancer diagnosis represents one of life's most profound challenges. As your trusted healthcare partner, we remain steadfast in our commitment to providing exceptional



oncology care that addresses not only the medical complexities of cancer treatment, but the human experience at its center.

This issue of *Stay Healthy* magazine showcases the comprehensive scope of our UHS oncology services and the remarkable people who make our mission possible. You'll be inspired by the story of Laura Cleary, a testament to resilience and the power of expert care. When Ms. Cleary received her cancer diagnosis while pursuing her nursing degree, our team provided specialized treatment and support that enabled her to not only overcome her illness, but to join our own UHS Emergency Department Nurse Residency program. Her journey from patient to caregiver exemplifies healing that extends far beyond treatment.

Within these pages, you'll discover the advanced capabilities that set our oncology program apart. Our state-of-the-art laboratory services ensure precise diagnostics and personalized treatment planning, while our UHS Specialty Pharmacy team works tirelessly to coordinate complex medication regimens and remove barriers to essential therapies.

We're particularly excited to share news of our expanded partnership with Broome Oncology, which will further enhance the specialized care available through UHS Medical Oncology. This collaboration represents our ongoing commitment to bringing the most innovative treatments closer to home for our patients and families.

The stories and insights you'll find in this issue reflect our unwavering dedication to clinical excellence, compassionate care, and the belief that every patient deserves hope, dignity and the very best that UHS has to offer.

John M. Carrigg

PRESIDENT AND CEO OF UHS



SDI Productions via Getty Images

expanding OUR MEDICAL ONCOLOGY SERVICES

UHS Medical Oncology expands partnership with Broome Oncology

UHS is significantly improving the care and convenience we provide at UHS Medical Oncology through an enhanced partnership with Broome Oncology.

Broome Oncology will be relocating their Riverside Drive office to UHS Medical Oncology. This partnership represents a major milestone in our commitment to providing patients with exceptional, comprehensive healthcare right here in our community.

The UHS Medical Oncology team, along with Broome Oncology have been serving patients in the Greater Binghamton region for over two decades providing compassionate and innovative cancer care. With this expanded partnership, patients will continue to receive the same personalized attention that they have come to expect from UHS Medical Oncology.

Together we will serve patients at two convenient UHS locations including UHS Wilson Square at 30 Harrison Street, Johnson City, and UHS Binghamton General Hospital, Krembs 6 at 10-42 Mitchell Avenue, Binghamton. **Our Medical Oncology team is always welcoming new patients.** Both locations will offer patients complimentary valet parking to make appointments as convenient as possible.

HERE FOR YOU For comprehensive information about our enhanced services and amenities at UHS, please visit nyuhs.org/cancer.



CANCER DOES NOT *wait* – NEITHER SHOULD YOU

Early detection through preventive screenings can save lives

Cancer screenings are an incredibly valuable tool for early detection that can save lives. They are the biggest defender in the fight against cancer. While preventive screenings are the best line of defense, many people may avoid in-person doctor visits for a variety of reasons.

“The whole purpose of screening for any disease process is to find the disease in its earliest stage of progress when it’s easier to treat or easier to cure,” says Michael J. Farrell, MD, breast surgeon, UHS Breast Center.

While this is true of most diseases, it is particularly important for cancers such as breast, colorectal, lung and cervical cancer. With an estimated 123,430 new cancer cases expected in New York State in 2025, staying informed about the benefits and timing of these screenings is more crucial than ever. Delaying screenings means people with cancer may not be diagnosed at an earlier stage when it is more treatable.

Regular screenings can detect cancer before symptoms appear, increasing the chances of successful treatment and survival. It is vitally important to stay up to date with your screenings to help protect your health and mitigate cancer risk. If you think you might be due for a screening, now is the time to talk to your provider. 🌱

RECOMMENDED SCREENINGS FOR WOMEN

Cervical Cancer	Start at age 21 with a Pap test every three years. After 30, switch to an HPV test every five years.
Breast Cancer	Begin annual mammograms at age 40. Start earlier if there is a family history.
Colon Cancer	Begin screening at age 45 with a colonoscopy every 10 years or yearly stool tests. Start earlier if at higher risk.
Lung Cancer	Ages 50 to 80 with a history of heavy smoking should get annual low-dose CT scans.
Skin Cancer	Perform monthly self-checks.



UHS CHENANGO MEMORIAL HOSPITAL OPENS NEW WOMEN'S DIAGNOSTIC IMAGING CENTER

UHS continues to expand access to essential screening services. The newly opened Women's Diagnostic Imaging Center at UHS Chenango Memorial Hospital offers a safe, welcoming environment for women's health needs.

Located on the hospital's first floor, the center doubles mammogram capacity and features advanced 3D mammography, bone density scans and ultrasound services.

This new suite highlights UHS Chenango Memorial's ongoing commitment to delivering compassionate and innovative care for women in Chenango County and surrounding communities.

SCHEDULE an appointment with UHS Diagnostic Imaging Norwich.
Call 607-337-4149.



FINDING *strength* IN THE STORM

*Facing the challenge of
breast cancer and a new career*

When Laura Cleary turned 40 last November, she was focused on two things: finishing her final semester of nursing school and taking the first step in her journey to motherhood through in vitro fertilization (IVF).

Life, however, had other plans.

In early December, just before her final exams, Ms. Cleary had her second-ever mammogram. Her first had been the year before, prompted by her mother's history with breast cancer. This time, the scan revealed something suspicious. Days later, a biopsy confirmed it: breast cancer.

"It was scary," Ms. Cleary recalls. "I was about to start my last semester of nursing school. I had so many questions. What would treatment look like? Would I be able to finish school? And what about IVF? Everything was suddenly uncertain."

Her first appointment at the UHS Breast Center set the tone for her care. She and her husband sat down with Breast Surgeon Michael Farrell, MD, UHS Breast Center, who walked them through the diagnosis and the recommended treatment: a lumpectomy, followed by 26 rounds of radiation, and a five-year course of drug therapy.

"They explained everything clearly, gave me a folder to keep all my results and resources in one place, and answered every question. It made me feel like I had a plan and a whole team behind me," Ms. Cleary says.

That team included medical and radiation oncologists, nurses, radiation therapists, front desk staff and a dedicated social worker, Sarah Richer, LMSW, who specializes in breast cancer patients.



MEETING THE PATIENT'S NEEDS

Ms. Richer first met Ms. Cleary shortly after diagnosis. As an oncology social worker at UHS, Ms. Richer's role is to support patients through whatever their cancer journey looks like, even when it is as unique as Ms. Cleary's. "Sometimes that means talking about big feelings, other times connecting them to resources or handling practical needs," she explains.

For Ms. Cleary, support included all of this.

"Sarah was wonderful," Ms. Cleary says. "She helped me apply for grants and UHS patient financial assistance and connected me with local programs like Sock Out Cancer. She took away a lot of anxiety about how we'd manage bills while I was in school and not working full-time."

One of the most meaningful moments in Ms. Cleary's treatment came when discussing drug therapy with her medical oncologist, James Lee, MD, PhD, UHS Medical Oncology. "Because I'm 40 with no children, starting IVF was incredibly important to me," she says. "I was worried about how the medication would affect my hormones

"They didn't just treat my cancer—they cared about me as a whole person. I want people to read my story and think, 'I need to get my mammogram.' Early detection can save your life."

LAURA CLEARY, RN

THE IMPORTANCE OF EARLY DETECTION

Laura Cleary's case underscores the value of early screenings. Because her cancer was caught early, just one year after a clear mammogram, her prognosis was good, and treatment could be less invasive.

Oncology Social Worker Sarah Richer, LMSW, notes younger patients like Ms. Cleary are becoming more common, thanks in part to earlier and more frequent screenings. "It's so important to talk to your primary care provider about family history, any changes you notice and when to start screening," she says.

At UHS, oncology care is multidisciplinary, giving patients access to:



Breast surgery and medical/radiation oncology with coordinated treatment plans

Genetic counseling and testing to inform care and protect family members



Nurse navigation for seamless appointment scheduling and care coordination

On-site labs, pharmacy, and specialized radiation facilities for convenience and continuity



Dedicated oncology social workers for emotional support, resource navigation and practical assistance

and fertility. Instead of brushing it off, he really listened and worked with me to create a plan that supported both my health and my dream of becoming a mom."

Radiation therapy meant daily trips for several weeks, often squeezed in between nursing classes and clinical rotations. "Looking back, I don't know how I did it," she says. "There were days I was completely exhausted. But I had an incredible support system—my care team, my professors and my husband."

The exceptional experience she had with her care team shaped the kind of nurse she wants to be. "Going through this has made me more empathetic and compassionate. I understand now what it's like to be on the other side of the bed."

Today, Ms. Cleary is thriving in the UHS Emergency Department Nurse Residency program, rotating through different hospital units before returning to the ED where she worked for nine years as a nursing assistant. She plans to begin IVF in the coming months.

She is grateful for the comprehensive, compassionate care she received at UHS—and for the people who made it possible: Dr. Farrell; Dr. Lee; radiation oncologist Arif Rashid, MD; the Radiation Oncology team and her social worker, Ms. Richer. She also encourages everyone to speak with their doctor to determine the best time to get screened. "This can happen to anyone. You have to advocate for yourself and stay on top of your health," she says. 🌱

SCHEDULE your breast imaging appointment today at one of our convenient locations across the UHS System in Broome, Chenango and Delaware counties by scanning the QR code.



wonder WORKERS

UHS supports every step of the cancer journey

A cancer diagnosis can be overwhelming. Questions come quickly—What’s next? How soon will treatment start? Who’s helping me through this? At UHS, the answer is a team that works together from day one. Laboratory experts, specialty pharmacists and the oncology care team collaborate closely to support patients at every stage.

LABORATORY SERVICES: FROM BIOPSY TO NEXT STEPS

For many patients, the cancer journey often begins in the lab. “The lab is integral in confirming a diagnosis, directing treatment and monitoring patients throughout their oncology journey,” says Mary Kielma, Administrative Director, UHS Laboratory Services.

When a biopsy is performed, UHS pathologists step in, sometimes giving real-time results during surgery to determine if a tumor is cancerous and whether it’s been fully removed. Using advanced testing techniques, pathologists can learn where the cancer started and how it behaves, information that helps oncologists choose the most effective treatment plan.

UHS is the only facility in the region to offer cutting-edge services for diagnosing leukemias and lymphomas—an advanced service rarely available at community hospitals. Specialists can also review lab results digitally from anywhere, which speeds up turnaround times and helps UHS recruit top talent. And through a partnership with the Mayo Clinic, UHS patients gain access to highly specialized cancer tests, often receiving results within 24 hours.



The UHS Specialty Pharmacy offers patients a convenient location on Main Street in Johnson City.

“Providers can pick up the phone and talk with our pathologists in real time. That accessibility means faster answers, less waiting and more confidence for patients and their care teams,” Ms. Kielma says.

SPECIALTY PHARMACY: MAKING TREATMENT ACCESSIBLE

Once a treatment plan is in place, the UHS Specialty Pharmacy steps in to make sure patients get the medications they need, whether it’s chemotherapy in the infusion center or pills taken at home. “Some chemotherapy drugs can cost over \$100,000 a dose,” says James Jester, System Director, UHS Pharmacy Services. “Our role is to make sure patients can get the medications they need safely and affordably.”

The team navigates the process—working with insurance approvals, applying for grants and connecting with manufacturers to secure rebates or free supplies for those who qualify. Oral medications are shipped directly to the patient’s home, with clear instructions and tips for managing side effects. Pharmacists also make regular follow-up calls to patients to check on their progress.

In the infusion center, safety comes first. Every order is verified by both the Nursing and Pharmacy teams. Pharmacists embedded in the Oncology practice work side-by-side with providers to ensure each regimen is tailored to the individual.

For both Ms. Kielma and Mr. Jester, it comes down to teamwork. “It’s not a cookie-cutter approach. We tailor everything to the patient, so they can focus on healing while we handle the rest,” Mr. Jester says.

At UHS, patients can count on advanced testing, timely access to treatment and a care team that will be with them every step of the way. 🌱

CONNECT If you or a loved one is facing a cancer diagnosis, contact our Oncology team to learn how we can help. Visit nyuhs.org/cancer to get started.

A portrait of Dr. Omotinuwe Adepoju, a Black woman with long, curly hair, wearing a white lab coat over a black top. She is looking directly at the camera with a slight smile. The background is a blurred office setting with large windows.

A SPECIAL KIND OF *makeover*

Plastic surgeon restores self-image and confidence for women facing breast surgery

For women who are undergoing surgery for breast cancer, restoring their health is always the top priority. But for many, their appearance following cancer surgery can also be a valid concern. At the UHS Breast Center, specialists are available to guide women in their decision-making around this important aspect of their cancer journey.

Omotinuwe Adepoju, MD, UHS Plastic & Reconstructive Surgery, specializes in breast reconstruction surgery. Before they have their cancer surgery, Dr. Adepoju consults with patients to ensure they have plenty of time to consider their options and understand the requirements for any elective surgery. She explains that while the cancer surgery must be done as quickly as possible, the reconstruction surgery

can often be planned on a longer timeline, especially if there are any health risks that need to be addressed, such as quitting smoking or controlling diabetes.

Planning for reconstruction will take into account the extent of the surgery—a lumpectomy, single mastectomy or double mastectomy—and whether a patient will need radiation therapy in addition to surgery.

“If a patient is having a lumpectomy, I don’t necessarily get involved unless the patient and the surgeon feel it might change the shape of the breast,” says Dr. Adepoju. “In the case of a mastectomy, they automatically will get referred to me if the patient is interested in plastic surgery. Oftentimes, I can start the reconstruction process on the same day as the breast cancer surgery.”

Dr. Adepoju explains to patients the options of having tissue taken from elsewhere in the body to rebuild the breast or selecting an implant filled with silicone or saline. The patient may also choose whether to begin the reconstruction process immediately or delay it by months or even years.

“There’s no time limit,” says Dr. Adepoju. “Let’s say someone has a mastectomy, and they decide that they don’t want to have reconstruction. If the patient changes their mind five years down the road, the laws are

“It helps restore some sort of normalcy to their lifestyle.”

OMOTINUWE ADEPOJU, MD

written so that health insurance must cover that reconstruction regardless of when it is done. That way, patients don’t feel like they have to have this surgery now or it’ll be considered cosmetic. It’s never cosmetic—it’s always reconstructive.”

Ultimately, Dr. Adepoju encourages patients to do what is best for them. “Breast reconstruction does not replace their own breast; it’s not going to be the same as what they had before, but it helps restore some sort of normalcy to their lifestyle. When they come to see me, I tell them that I will try to guide them the best I can medically. I’m here to support them through whatever decision they make, so if their option is to go flat, that is absolutely okay. And if they choose to do something in the future, that’s okay, too.”

LEARN MORE about the UHS Plastic Surgery services here.



Omotinuwe Adepoju, MD, consults with a patient about her preferences for breast surgery.



"UHS President and CEO John Carrigg (center) joins UHS Foundation Development Manager Andrea Mastronardi and Executive Director Cory Jacobs at the annual Sock Out Cancer 5K.

FIGHTING CANCER *together*

How the UHS Foundation helps lighten the load

The UHS Foundation is proud to provide financial assistance for patients navigating a cancer diagnosis through two critical partnerships and outreach programs: Sock Out Cancer and the Saint Agatha Foundation.

SOCK OUT CANCER

Several years ago, Security Mutual Life Insurance Company of New York approached UHS with the idea of creating a program to help ease the burden on cancer patients in the community. From that vision came Sock Out Cancer, a nonprofit initiative designed to support patients with nonmedical necessities, like:

- Cost of food
- Utility bills
- Cost of transportation
- Insurance costs
- Housing expenses

From their annual benefit concert to their popular rainbow socks, Sock Out Cancer's efforts continue to uplift those managing these diagnoses.

"When Security Mutual approached us, their main objective was to help patients concentrate on their recovery," said Andrea

Mastronardi, development manager, UHS Foundation. Sock Out Cancer helps relieve some of those burdens, so patients can focus on getting better.

Since the program began in 2017, Sock Out Cancer raised over \$550,000 that helped support over 725 UHS cancer patients and their families.



SAINT AGATHA FOUNDATION

In July 2025, the Saint Agatha Foundation awarded the UHS Foundation a generous \$75,000 grant to support breast cancer patients in Broome County. After just one month, several breast cancer patients experienced financial relief with the help of this partnership.

"If we can help a patient feel less overwhelmed, less scared and less anxious, we want to be able to help," Mastronardi said. "And this is the way the UHS Foundation can do that."

The UHS Foundation and its community partners share a commitment to ensuring that patients facing a cancer diagnosis are supported throughout their care. These programs are made possible through the generosity of community members. 🌱

GIVE WISELY You can learn more about the work of the UHS Foundation by visiting nyuhs.org/give-back.