



NORTHERN OHIO PHYSICIAN

The Voice of Physicians in Northern Ohio

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Community Leaders Receive Lifesaving Training at “Stop the Bleed” Event

On August 1, 2025, AMCNO hosted a hands-on Stop the Bleed training for community leaders at its Independence, Ohio headquarters. The training brought together medical professionals, elected officials, violence prevention advocates, and concerned community members to build skills that could help save lives in a bleeding emergency.



Left to right: Kathryn Wesolowski, Rep. Darnell Brewer, Rep. Veronica Sims, Annie Bacevice, MD, FAAP

Community Leaders Receive Lifesaving Training at “Stop the Bleed” Event

(Continued from page 1)

The training was led by Dr. Annie Bacevice, an AMCNO member and the co-director of the Level 1 Pediatric Trauma Center at UH Rainbow Babies & Children’s Hospital. Dr. Bacevice, a board-certified physician in Pediatrics and Pediatric Emergency Medicine, emphasized the importance of community preparedness during critical trauma events, especially those caused by firearm injuries.

AMCNO is committed to advocating for common-sense solutions to reduce gun violence in our communities. As part of its bicentennial advocacy initiative in 2024, AMCNO has prioritized firearm injury prevention as a key public health focus. This training aligns with that goal, offering evidence-based strategies to reduce preventable deaths in northern Ohio. According to a [report from Johns Hopkins University’s Center for Gun Violence Solutions](#), more than 46,700 people died from firearms in the U.S. in 2023, averaging one death every 11 minutes.

Stop the Bleed is a national campaign and training program developed to train bystanders to assist in a bleeding emergency before professional help arrives. Attendees learned the ABCs of bleeding control: Alert 911, find the Bleeding, and Compress using pressure and/or wound packing. Practical skill stations allowed participants to apply tourniquets and pack wounds using both adult and pediatric mannequins. These hands-on sessions were supported by medical student volunteers from Northeast Ohio Medical University (NEOMED), who brought equipment and provided one-on-one coaching for participants.

23 community members completed the course, including several participants from the Peacemakers Alliance, a Cleveland-based violence interrupter organization. Among them were a number of young adult students who, when asked for their thoughts after the event, reported that they felt they gained valuable skills and a sense of empowerment from the training.

State Representatives Darnell Brewer and Veronica Sims attended the training, showing legislative support for community-based solutions to public health crises. Representative Brewer has recently been working on a bill to expand Stop the Bleed training access across Ohio.

As gun violence continues to pose a serious threat to public health, programs like Stop the Bleed give local leaders the tools to act quickly and effectively, potentially saving lives before emergency responders arrive. By connecting medical professionals, policymakers, and community advocates in this hands-on training format, AMCNO is proud to continue to address this important public health issue facing northern Ohio.

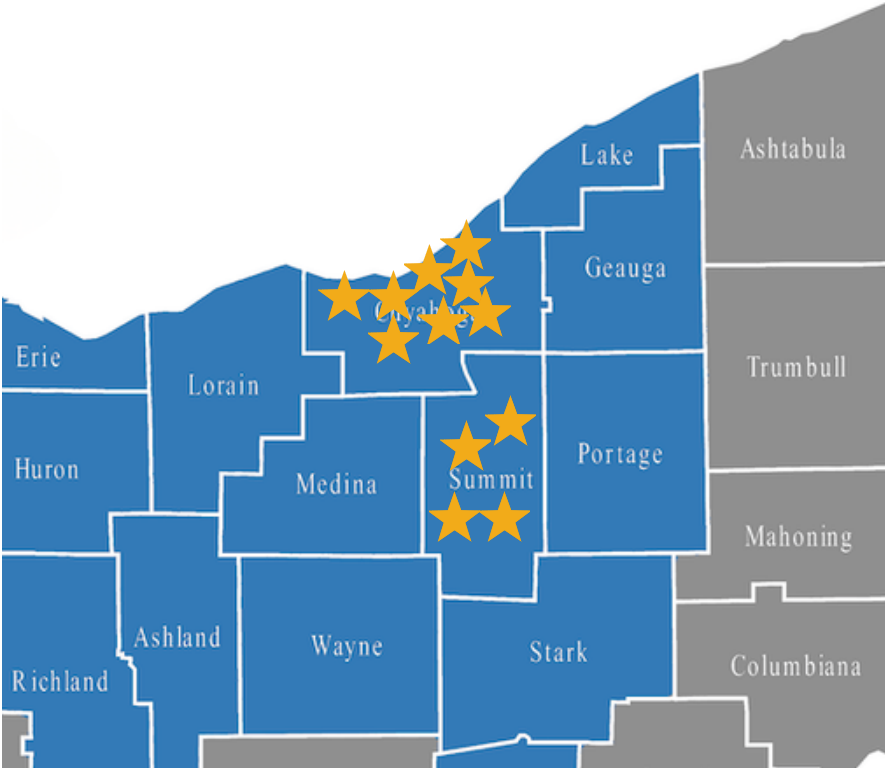


Store it Safe Update

As part of our bicentennial year in 2024, the AMCNO Board of Directors decided to choose a public health issue to highlight in recognition of the organization’s long history of public health work in Northeast Ohio. They decided on gun violence, which is now the number one cause of death for children in Cleveland, and nationwide.

As part of that work, the Academy of Medicine Education Foundation (AMEF) is partnering with the American Academy of Pediatrics (AAP) Ohio Chapter to bring the Store it Safe program to area physicians.

The AMCNO has distributed 575 gun safes so far as part of our Store it Safe partnership. The table to the right details where we have distributed the safes so far. We are working primarily with pediatricians and family medicine physicians to distribute the safes to patients and also provide education for the physicians on how to have firearm safety conversations with patients. Any physicians interested in participating in the program should email AMCNO Executive Director Jen Johns at JJohns@amcno.org.



Number of Lock Boxes	City Distributed
10	Massillon
10	Wooster
20	Maple Heights
25	Garfield Heights
45	Euclid
75	Akron
175	Cleveland
215	East Cleveland



Lower Hour: Scope of Practice – Liability & Legality

On Thursday October 16, the Academy of Medicine of Cleveland & Northern Ohio (AMCNO) and the Cleveland Metropolitan Bar Association (CMBA) co-hosted a Lower Hour Discussion on Scope of Practice – Liability & Legality.

The event was the third in a series of educational talks, named after Cleveland Clinic founder and AMCNO past president Dr. William E. Lower, on issues of medical and legal significance.

The panelists were Monica Hueckel, Vice President of Advocacy at the Ohio State Medical Association (OSMA) and Avery Shumacher, Esq., Partner, at Epstein, Becker and Green, P.C. Ms. Schumacher presented on some of the liability considerations for physicians who work with advanced practice providers.

Ms. Schumacher also covered the varying regulations and licensure requirements by state. There are 1,790+ different state occupational licensing boards across the U.S. There are interstate licensure compacts – but no true national license to practice a regulated profession.

Ms. Hueckel made a point that it is difficult for physicians to continue to lobby against these bills when there are so many different types of providers currently fighting scope expansions concurrently. Ms. Hueckel argued that it continues to undermine the education and experience of the medical profession when so many providers are trying to have the same authority.

The politics of the Ohio legislature do not help these fights as many members believe expanded scope of practice is the answer to addressing physician workforce shortages. AMCNO remains committed to lobbying against any legislation or scope expansion that creates two standards of care—all Ohioans deserve the highest quality of medical care regardless of their zip code.

Members interested in getting involved in advocacy on Scope of Practice should contact Executive Director Jen Johns at Jjohns@amcno.org.



Left to right: Avery Shumacher, Esq, Monica Hueckel, Kristin Englund, MD

States apply varying standards by profession, and activity. Common variations include:

- ✔ Titles and terminology
- ✔ Education, training, and certification requirements
- ✔ Scope of practice
- ✔ Practice authority for nurse practitioners (NPs) (i.e., full, reduced, restricted)
- ✔ Prescribing authority
- ✔ Physician supervision/collaboration requirements for APPs:
 - Supervision/collaboration ratios
 - Written agreement requirement
 - Remote supervision/collaboration permissibility
 - Proximity requirements
 - Chart review and co-signature obligations



Attendees enjoyed connecting with peers before and after the event and actively engaged throughout with thoughtful questions and lively discussion.



We're launching #WhyWeVaccinate — a campaign where real healthcare professionals share their personal reasons for vaccinating and recommending vaccines to their patients. Visit our website for powerful stories, honest perspectives, and science-backed truths.

**Discover how we're making an impact -
now live on our website.**
amcno.org/why-we-vaccinate



Amidst vaccine confusion, health experts provide clarity ahead of fall illness season

On October 15, Champions for Vaccine Education, Equity and Progress (CVEEP) hosted a webinar on Coverage, Access, and ACIP Recommendations for Fall Respiratory Vaccines aimed at educating consumers about flu, COVID, and other respiratory vaccinations.

In recent months, confusion has swirled about COVID-19 vaccines in particular, as federal guidance regarding the shot has changed from previous years. In August, the Food and Drug Administration approved COVID-19 vaccines only for those 65 and older or with risk factors. In September, the Centers for Disease Control Advisory Committee on Immunization Practices recommended the COVID-19 vaccination for everyone 6 months and older after consultation with a healthcare provider, which the CDC adopted on October 6.

These changes come as the United States is facing widespread misinformation about vaccines and antivax sentiment, spurred on by Health and Human Services Secretary Robert F. Kennedy Jr. While much of the antivax focus is currently on lifesaving childhood vaccines, it has extended to immunizations more broadly, including those that are critical ahead of the fall and winter respiratory illness season.

“Usually, this time of the year, we spend a lot of time explaining how the flu vaccine doesn't actually cause you to get the flu, said Dr. Margot Savoy, Chief Medical Officer for the American Academy of Family Physicians. “But this year, we're spending a lot more time trying to explain whether or not they're supposed to get vaccinated at all, which vaccines they're supposed to get, and whether or not those are going to be covered by their insurance plan, which is a much different conversation than we are used to having at this time of the year, from the family medicine perspective.”

During the webinar, Chris Regal, Director of Clinical Innovation for AHIP (formerly America's Health Insurance Plans) said that the fall respiratory vaccines should be completely free at the point of access for patients, and that there should not be any cost sharing for patients. In September, AHIP put out a statement to reaffirm that commitment, saying they will continue to cover all ACIP-recommended immunizations including COVID-19 and influenza with no cost-sharing through the end of 2026.

The webinar also addressed issues of misinformation and combatting antivax rhetoric. Ultimately, the speakers emphasized the importance of individuals getting vaccinated against fall respiratory illness, for their own sake and to protect vulnerable members of their communities.

You can watch the full webinar online here: [Coverage, Access, and ACIP Recommendations: What Consumers Should Know About Respiratory Vaccines Heading Into Fall.](#)

AMCNO and CWRU Host Annual Speed Mentoring Events

On September 30, October 6, and October 27, the AMCNO partnered with Case Western Reserve University School of Medicine to host the annual Speed Mentoring program.

These events provide medical students with a unique opportunity to connect with local physicians and begin exploring the wide range of medical specialties available to them. Students rotated through small-group sessions with physicians representing diverse fields, engaging in conversation, asking questions, and gaining valuable career insights.

We are grateful to the physicians who generously shared their time and expertise and look forward to continuing this meaningful tradition with CWRU in the years ahead.

Join us this January for Speed Mentoring events with Ohio University Heritage College of Osteopathic Medicine and Northeast Ohio Medical University.



AMCNO President, Eric Shapiro, MD gave welcoming remarks.



Thank you to all AMCNO members who generously volunteered their time.

Pictured above (clockwise): David Margolius, MD, Director of Public Health; Thomas P. Gilson, MD, Cuyahoga County Medical Examiner; Mary LaPlante, MD; Mathew Levy, MD; and Thomas Collins, MD, Executive Medical Director of Professional Affairs, Emergency Medicine, and EMS Physician.

About 68% of adults who currently smoke want to quit.

**Three minutes of
your time could add
years to their lives.**



**Talk with your patients about
quitting tobacco.**

The Ohio Tobacco Quit Line is free to all Ohioans.
To refer your patients, please use the QR code or link below.



Department of
Health

Department of
Medicaid

A conversation with MetroHealth CEO, Dr. Christine Alexander-Rager

After nearly three decades practicing as a family medicine physician and leading various departments all at MetroHealth, Dr. Christine Alexander-Rager was promoted to President and CEO of the medical system in October 2024. Prior to her promotion, Dr. Alexander-Rager served as the Interim Chief Physician and Clinical Executive and previously held the role of Chair of Family Medicine for 14 years.

More than a year into her tenure as president, Dr. Alexander-Rager is working to weather the storms of an ever-changing health landscape.

The AMCNO sat down with Dr. Alexander-Rager to talk about her path to medicine and leadership. Questions and answers have been edited for length and clarity.



AMCNO: I would love for you to just tell us a little bit about your path into medicine and what inspired you to move into leadership roles?

Dr. Christine Alexander-Rager: My journey started when I was about four years old. My uncle was an OB/GYN, and he delivered me, so I say he indoctrinated me right from an early age. He had this black bag -- doctors back then carried black bags and had their stethoscopes and all their stuff in it -- and he would let us peek and occasionally he'd hide a sticker or a piece of candy or something in there for us. I was fascinated by that whole thing. I fell into this place of, of loving hearing my uncle's stories, and as a little girl with a lot of baby dolls, hearing him talk about delivering babies, I was like, how cool is that job? You get to be with babies all day, you know?

My parents were very involved in the church, but it was always about giving -- you get the gifts that you give in life and it's your obligation is to share them to make the world a better place for others. That was my upbringing, and so it just really fit that pulling together what I was interested in educationally, fit with my faith, fit with the upbringing of service and community, and ultimately landed me in medical school. And I think that one of the other messages that I grew up with was if you're not contributing to a solution, you might be the person contributing to the problem. So better to be the person contributing to the solution.

I came to MetroHealth just by luck, that I was dating somebody in the area and one of my faculty in Pittsburgh knew someone in Cleveland at Metro and helped to arrange for me to spend a month here as part of an educational experience. I just totally fell in love with Metro, hook, line, and sinker. Because again, I had this drive to be part of a mission driven organization and so landing at Metro for a month, getting to see the way we truly live mission, was just such an overwhelming experience. It was clear, as I looked at opportunities, that Metro was the place for me.

AMCNO: You just don't see someone really spending their entire medical career in one place like you have with Metro, so I would love if you could talk about what are the most special things about Metro that have made you stay and now take on this big role?

Dr. Alexander-Rager: There is just something there is a secret sauce to Metro. There really is. I think what it boils down to is the mission of the organization that brings people here that want to be here, that they have that gift, that they have that mindset of, I'm here to serve. And that brings just a personality and a sense of character and values that pulls people together instead of pulling people apart. We like to say it all the time that you come for the mission and you stay for the culture because the mission draws you in, but then when you feel that culture, that is something really hard to let go of and becomes this super high bar against which you measure everything else. That comes down to the patients that we serve. I love our patients. I love our community.

AMCNO: At the Academy, we're big fans of physician leadership, and people who have been in the trenches being the ones leading the systems. I'm curious how you bring your physician background into leading?

Dr. Alexander-Rager: I don't know how people step into this role without having experienced the institution kind of from an entry level up. That is what I lean into, those experiences, and I'm the sort of person that really views team broadly. The person who works for environmental services is every bit as important as me making the medical decisions as is the person who's in the chemistry lab writing all the labs are. We all have a critical role to play and there isn't any one role that's more important than any other role, because if we didn't have those roles, we could come to a screeching halt. I've always been a person that really felt much inclusive of all. I try to really lean into that. I do still take call. I don't get to do as much patient care as I would like, but hopefully if things settle down a little bit, I'll be able to get back into doing a little bit more. That's important to me because that's how I feel what everybody else is feeling.

AMCNO: It's great to hear about physicians, like you, who have had careers that they've gotten to do a lot of different things. There's so much creativity out there.

Dr. Alexander-Rager: Agreed and, I think to some degree, while we're in this challenging time financially, we talk a lot about “don't waste a crisis” because that's what pushes you to innovate. Innovation is very important, but a crisis will push you further down that line than if you were just doing it for the sake of innovating. That's what we're talking about right now, how do we innovate our way through? You can't cut your way to surviving a crisis. You must innovate through it. That's what I think will be exciting to come out of this -- hopefully in the next couple of years as opposed to the next decade -- how do we make our way through and look back and say, yep, here are some of these things we would have never thought about doing. Sometimes it's not bad to be in the middle of a crisis; It'll help you create things you wouldn't have dreamed possible otherwise.

AMCNO: Do you have any words of wisdom or advice for folks starting on their career or starting, look outside of just their exam room, wanting to get involved in leadership and advocacy?

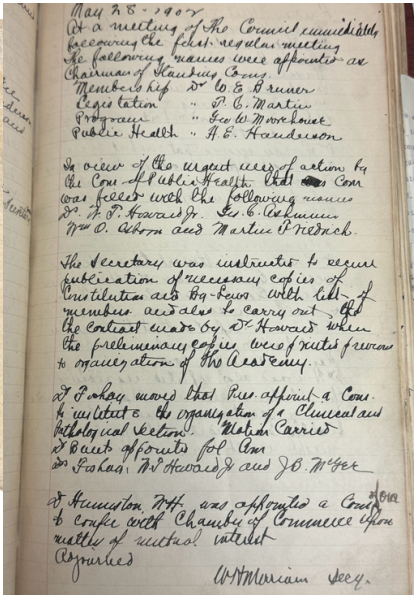
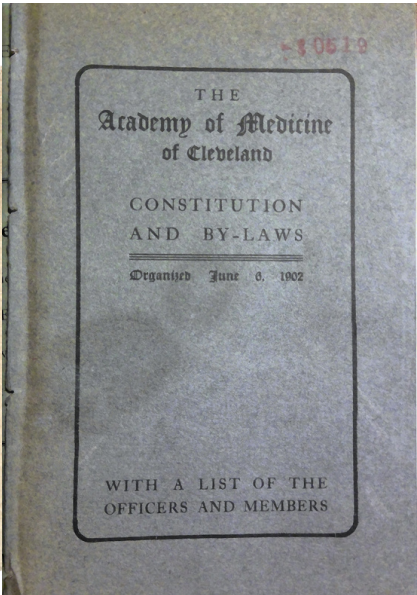
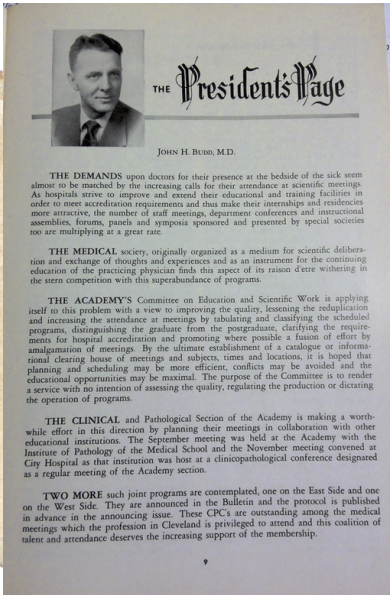
Dr. Alexander-Rager: I never thought I would land in this job. This was never part of something I'd dreamt about. As a young person, I dreamed about being a physician and didn't think a lot beyond that. I think remaining open to opportunity and don't just shoot it down if it doesn't align with what you saw as your narrow vision for yourself, realize that others are going to see something in you, that you may not have thought about for yourself. Open yourself up to the world of possibilities that might present itself to you, and don't be afraid to stray from what was your original goal, because you might end up like me and have the job of a lifetime. I've had a career of a lifetime by just making the simple decision of coming to MetroHealth and I feel really blessed.

AMCNO Moves Archive Collection to Cleveland History Center

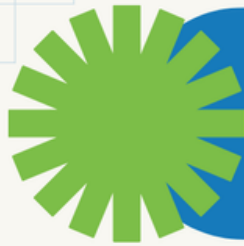
The AMCNO recently made an agreement with the Cleveland History Center, formerly known as the Western Reserve Historical Society, to house our 201 years of history. Included in the collection is the footage and photographs of the 1962 Sabin Oral Sundays polio vaccine campaign, the most successful polio campaign in the country, as well as all editions of the Cleveland Medical Journal (now Northern Ohio Physician) since its inception in 1903.

During its bicentennial year, the organization housed a museum exhibit at the Cleveland History Center, which is where the conversation in making it the formal home for AMCNO's archives began.

“This agreement to move our archives to the Cleveland History Center ensures our invaluable history will be available to the public and researchers for generations to come, as we saw with the Bicentennial in 2024, we have had an impressive two centuries of medicine in Cleveland,” said Jen Johns, AMCNO Executive Director.



UPCOMING EVENTS



AMCNO VOLUNTEER NIGHT AT MEDWISH

November 13, 6:00-8:00 PM
1625 E 31st St, Cleveland, Ohio



TOWN HALL MEETING WITH AMCNO AND OSMA

November 19, 6:30-7:30 PM
Via Zoom



MAT TRAINING - FREE CME

November 20, 8:00 AM-12:00 PM
6111 Oak Tree Blvd S, Independence, Ohio



OUHCOM SPEED MENTORING

January 15, 2026 - Save the Date!
OUHCOM Campus - 4180 Warrensville Center Road, Warrensville Heights, Ohio



NEOMED SPEED MENTORING

January 28, 2026 - 6:00-8:00 PM
NEOMED Campus
4209 St. Rt. 44, Rootstown, Ohio

SIGN UP



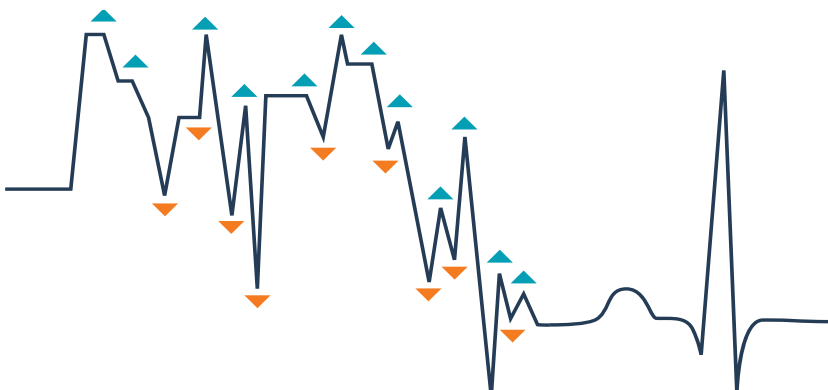
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Medicare Multi-Cancer Early Detection (MCED) Screening Coverage Act Passes Committee

In September, U.S. Rep. Terri Sewell (AL-07) celebrated as her legislation to ensure seniors' access to cutting-edge cancer screenings cleared a key hurdle. H.R. 842, the Nancy Gardner Sewell Medicare Multi-Cancer Early Detection (MCED) Screening Coverage Act, passed unanimously in the House Ways and Means Committee by a bipartisan vote of 43 to 0, and was referred to the full House for a vote.

Today, we are one giant step closer to enacting the Nancy Gardner Sewell Multi-Cancer Early Detection Act and giving our seniors the best chance at catching cancer early," said Rep. Sewell. "The fact that our bill passed unanimously in the Ways and Means Committee less than 24 hours after Cancer Advocacy Day is a testament to its strong, bipartisan momentum and its potential to save countless lives. Cancer knows no political party, and I'm proud of the bipartisan efforts of the Ways and Means Committee to advance this bill."

H.R. 842, the Nancy Gardner Sewell Medicare MCED Screening Coverage Act, would create a pathway for Medicare to cover emerging diagnostic tools, once FDA-approved, which hold the promise of screening for up to 40 cancers with a simple blood test. The bill enjoys overwhelming bipartisan support, with 305 House co-sponsors and 62 Senate co-sponsors. It is backed by more than 600 patient advocate organizations across the nation.

Lobbying for the bill's support were over 700 cancer advocates from the American Cancer Society Cancer Action Network.

The Multi-Cancer Early Detection Screening Coverage Act has the support of more than 550 leading health care and advocacy organizations across the United States, including AMCNO, demonstrating the significant impact that it would have on a diverse set of communities throughout the U.S.

AMCNO will continue to update its membership on the movement of H.R. 842 and its companion legislation in the Senate, S. 339.

Congressman Max Miller (R-Rocky River) names AMCNO as a member of Health Advisory Council

The advisory body is designed to serve as a collaborative vehicle to convey key priority health care issues to our region and thus assist Congressman Miller in addressing and advancing these objectives in federal policy.

The first meeting of Congressman Miller's Health Advisory Council took place on August 28th. AMCNO Executive Director Jen Johns shared key federal priorities with the council, including:

1. Increasing residency slots and encouraging federal loan availability for medical students.
2. Protecting funding for medical research including clinical trials.
3. Protecting immigration policy that allows for foreign doctors to train and work in the U.S., and specifically, asking for a waiver for physicians from the Trump Administrations new \$100,000 fee for H1-B visa holders.

Other members of the council include AMCNO group members Akron Children's Hospital, Cleveland Clinic and Metro Health, as well as the Ohio State Medical Association and the Ohio Hospital Association.



Left to right: Christine Alexander-Rager, MD, Congressman Max Miller, David Margolius, MD

AMCNO Advises Public to Follow Vaccine Schedule as Usual, Warns of Politicization of Department of Health and Human Services (HHS), Calls on RFK Jr. to Resign

In September, AMCNO brought to the public's attention the need to continue routine vaccinations this flu season, warning against following the unscientific advice of Health and Human Services (HHS) Secretary Robert F. Kennedy Jr.. Kennedy is a well-known anti-vaccine and anti-science advocate and has touted conspiracy theories and lies about vaccines (including that childhood immunizations cause autism), the pasteurization of milk, and fluoride in water.

During his confirmation hearings Secretary Kennedy assured members of the U.S. Senate that he would not interfere with vaccines, but he has already begun to do so and has fired any official who will not follow his recommendations, which are not backed by reputable science.

Vaccines have been shown, not only, to have saved millions of lives, but to have saved hundreds of thousands from paralysis, physical and mental disabilities. They have spared trillions of dollars in health care costs. They have been studied extensively and scientifically.

There is no question that vaccines are the greatest public health invention of our time. They have allowed us to diminish and, in some cases, eradicate the threat of fatal infectious diseases. There is also no question that routine childhood immunizations have helped save lives.

The World Health Organization (WHO) estimates that vaccines annually prevent almost 6 million deaths worldwide. In the United States there has been a 99% decrease in incidence for the nine diseases for which childhood vaccines have been recommended for decades.



“Vaccines not only protect the immunized but can also reduce disease among unimmunized individuals in the community through ‘indirect effects’ or ‘herd protection.’ In the last 50 years alone, vaccines have helped to nearly wipe out measles, diphtheria, and polio. Mr. Kennedy’s known opposition to routine childhood vaccinations is a threat to the public’s health and opens the door for these illnesses to recur in our children,” said Kristin Englund, MD, an infectious disease physician and past president of the AMCNO.

We are concerned with Sec. Kennedy’s attempts to undermine the public’s confidence in American medical science, and in the professionals and institutions, including the Centers for Disease Control (CDC) that make American medicine preeminent in the world. We join the many medical societies across the country who have called for his resignation to protect the public’s health.

The AMCNO strongly encourages the public to follow the recommendations of the American Academy of Pediatrics (AAP) [vaccine schedule](#) for persons under age 18, and the American College of Physicians (ACP) and American Academy of Family Physicians (AAFP) [vaccine schedule](#) for persons over the age of 18.

The Academy is proud of our 200-year history in protecting the public health in Cleveland & Northern Ohio and we will continue to educate the public about the importance of following sound medical advice, including medically appropriate vaccination to prevent illness.

AMCNO Legislative Committee Makes Positioning on Scope of Practice Bills

The AMCNO Legislative Committee recently met to determine positioning on the many scope of practice bills before the legislature. For an updated list of AMCNO positions on pending health care legislation in the Ohio General Assembly, please see our [Legislative Tracker](#).

Practitioner	Bill Number(s)	AMCNO Position
Midwives	HB 224	Oppose. This level of midwife does not meet appropriate educational or clinical standards to oversee childbirth and pregnancy care.
Optometrists	SB 36 AMCNO Opponent Testimony	Oppose. Optometrists do not have appropriate education or clinical training for surgical procedures.
Advanced Practice Registered Nurses (APRNs)	HB 449 and HB 508	Oppose. APRNs do not have appropriate training and clinical education to practice independently.
Physician Assistants (PAs)	HB 353	Oppose. This bill would change the title of PAs to “Physician Associate,” causing confusion amongst patients as to their level of education and experience, suggesting they are peers to physicians.
Pharmacists	SB 230	Oppose. This “test to treat,” legislation would allow pharmacists to perform and interpret tests, and prescribe medications based on those steps. Pharmacists do not receive adequate training and education to diagnosis.
Emergency Medical Technicians (EMTs)	HB 398	Neutral with technical assistance. This bill allows EMTs to perform tasks they already do in the field and in the Emergency Department, but in different areas of a hospital.
Surgical Technicians	HB 423	Neutral with technical assistance. These providers work underneath the supervision of physicians, and it is unclear why they need licensure.

Cancer Care Leaders Lay Out Policy Priorities Ahead of Fall Legislative Session



At the American Cancer Society Cancer Action Network's 2025 Policy Forum, access to screening and treatment are critical

Cancer experts, advocates, and lawmakers gathered in the Ohio Statehouse atrium on September 9, for the American Cancer Society Cancer Action Network's 2025 Ohio Policy Forum. Access to care dominated the conversation, as panelists and ACS members emphasized that even as scientific advancements continue to be made in cancer testing and treatment, the ability for patients to access that care is lagging due to lack of coverage and investment.

"A healthy state is a wealthy state," Electra D. Paskett, PhD, Professor of Cancer Research and Director of Division of Cancer Prevention and Control at the Ohio State University Comprehensive Cancer Center, said on the panel. "Any money we invest in health will come back to us multifold."

In Ohio, more than 71,000 new invasive cancer cases were diagnosed in 2022, the latest year for which data is available. Breast cancer led the case count, followed by lung and bronchus cancer, prostate cancer, and colon and rectum cancer. That same year, nearly 25,000 Ohioans lost their lives to cancer, with lung and bronchus cancer leading deaths.

Cancer screening is a critical way to catch new cases at early stages, when treatment can often be less intensive and more successful. In an annual survey, the Ohio Department of Health reported that 73.7% of women had recommended cervical cancer testing, 67.6% of Ohioans had colorectal cancer screening, 68.3% had mammograms, and 19.2% had lung cancer screening.

"Screening tests work," Paskett said. "We are working on better tests, simpler tests, and I'm excited to see where we go."

At the ACS CAN forum, panelists emphasized not only the importance of screening, but the technological advancements that have made finding the right treatment for a patient better than ever before. Rowan Barker-Clarke, PhD, is the American Cancer Society Postdoctoral Fellow at the Cleveland Clinic. He said at the event that it is critical that insurance keep pace with the speed of science, particularly as it pertains to the ways that noninvasive biomarker testing can complement other diagnostic and treatment strategies for cancer.

Biomarker testing is one part of a larger movement in cancer care towards precision medicine, in which a patient's individual genetic makeup and other factors can be used to more accurately target their cancer and direct treatment. Despite the importance of personalized medicine, insurance does not always cover the costs, which can lead health providers to follow more generalized protocols that may not be right for the patient, or force patients to pay out of pocket.

"To treat a patient's cancer without knowing the molecular makeup is, I think, malpractice," Davendra P.S. Sohal, MD, Professor of Medicine and Associate Director for Clinical Research at the University of Cincinnati Cancer Center, said on the panel.

For several years, ACS CAN has led the fight for comprehensive coverage of biomarker testing at the Ohio Statehouse. The AMCNO has supported and will continue to advocate for this legislation, which was introduced as HB 8 in the 136th General Assembly in January.

Beyond access to screening and testing, the panelists emphasized the importance of clinical trial participation. Dr. Sohal said that less than 5 percent of patients have access to clinical trials, and that needs to change.

It is especially challenging in the current political environment, in which funding decisions have stopped research trials in many places, leaving patients without care.

“All the cancer tests of today are the clinical trials of yesterday,” Dr. Sohal said, advocating for greater support for clinical trials for cancer care.

Paskett expressed concern about the impact federal funding cuts to the Health’s Ohio Cancer Incidence Surveillance System (OCISS) will have on the future of cancer in Ohio. Without comprehensive data, she said, we won’t know what interventions are needed to reduce cancer rates, or where disparities lie.

“We won’t know if our treatments are working in Ohio if we can’t track incidence,” Paskett said.

As the panelist’s turned their conversation to prevention, the importance of vaccines and understanding the social determinants of health were central.

Paskett emphasized the fact that there is an effective vaccine for cancer in the human papillomavirus vaccine. A 2024 study found that, for women aged 24 to 32 and immunized against HPV at 12 or 13 years old, there were zero cases of invasive cervical cancer. Even as anti-vaccine sentiments have become more legitimized, Paskett encouraged providers that it is worth it to have conversations about the HPV vaccine, because its ability to prevent cervical cancer in women and lower the risk of head and neck cancer in men is an achievement that should be celebrated.

Barker-Clarke pointed to policies that help Ohioans with stable housing and employment, and health systems that practice cultural competency, as indirect ways to promote access to cancer care. Without the basic needs met, he said, it can be hard for individuals to prioritize getting screened.

Following the panel, ACS CAN Volunteer & Advocate Leah McCleary shared her story, from being diagnosed with basal cell skin cancer and Gorlin syndrome on her 9th birthday, to the years of treatments she endured, and to her passion for advocating for sustainable financial investment in cancer research.

“Funding for cancer research doesn’t just save lives, it creates futures.”



FLC explores physician advocacy in Columbus

Medical students joined the AMCNO for the ACS CAN Ohio Policy Forum and a meeting with Representative Anita Somani, MD

Three students from the 2025-2026 Future Leaders Council made the trek from Northeast Ohio to Columbus for a firsthand experience learning about policy in the building where it happens.

Mehraeel Saleh (NEOMED, '27), Peter Moore (NEOMED, '27), and Benjamine Fesko (Case Western, '27) attended the American Cancer Society 2025 Policy Forum, and later met with Rep. Anita Somani, MD (D-Dublin), one of just a few lawmakers who are also physicians.

“I left the statehouse with a clearer sense that advocating for my patients outside the hospital can be just as important as caring for them inside it,” Moore said after the day.

The students discussed Dr. Somani’s path from OBGYN office to state office, and what concerns them about the future of medical practice in Ohio.

“I think in my case, when my career as a physician is over, I want to be able to point to something tangible that I did that I can leave behind, and in my case I think my best opportunity to do that is in shaping policy,” Fesko said.

In the coming months, as Ohio’s General Assembly returns from summer recess, FLC and other AMCNO members will continue to meet with lawmakers, in Columbus and in districts, to keep pushing for the best practice of medicine.

“What stood out to me is that advocacy does not always have to happen at the statehouse to matter,” Saleh said. “It can start in smaller circles such as our hospital teams colleagues and communities and then grow from there if it is something we are passionate about.”

Follow along with the AMCNO’s legislative activity and keep track of key bills online at www.amcno.org/policy-and-advocacy.



At Infant Vitality Advocacy Day, FLC promotes maternal mental health, economic stability for families

On September 30, advocates from across the state joined First Year Cleveland, Cradle Cincinnati, Celebrate One Columbus and the Ohio Collaborative to Prevent Infant Mortality in Columbus for the third annual Infant Vitality Advocacy Day.

Future Leaders Council Members Wes Brooks (NEOMED, '27) and Evan Kuczynski (NEOMED, '27) were among the supporters who gathered in the statehouse to ask lawmakers to push for policies that help parents and infant thrive. They met with Northeast Ohio lawmakers to promote maternal mental health and economic stability. September is National Infant Mortality Awareness Month. In the United States the infant mortality rate is 5.6 deaths per 1,000 live births. It's even worse in Ohio, where 7.16 deaths occur per 1,000 live births, meaning that 1 in 140 babies in Ohio do not live to see their first birthday. And it's worse still for Black infants in the state, with 1 in 73 not surviving to one year.

The organizations behind Infant Vitality Day want to change that.

"Babies have no voice, yet they are the future of our state and filled with potential," the Infant Vitality Day mission states. "In fact, from birth to age three, babies gain more than a million neural connections every second. By focusing on mortality and not the vitality of our families, we were focusing too much on the problem and not the solutions. Collectively, we have a responsibility to lift up the voices of the families and invest in solutions that are working to ensure every baby celebrates their first birthday."

This year, the advocacy day focused on promoting maternal mental health and economic stability, both of which are critical to Ohio families' ability to thrive. The AMCNO is proud to support House Concurrent Resolution 12, recognizing the importance of perinatal mental health. The legislation does not have funding attached, though its bipartisan sponsors hope to see investments in maternal mental health in the future.

Additionally, advocates made calls to improve and expand mental health care by simplifying universal mental health reimbursement models like those for primary care, and for expanded reimbursement for community health worker programs that provide perinatal support.

Poverty is a significant risk factor for infant mortality and for poor health outcomes. In Ohio, the poverty rate is 13.3%, which is the 15th highest in the United States. With that in mind, advocates called on lawmakers to protect Ohioans from federal cuts to SNAP and Medicaid, which are critical to providing health and nutrition services to millions of people in the state.

Under the federal H.R. 1 budget bill, Ohio stands to lose \$5.1 billion in the first year as nearly 340,000 people are at risk of losing Medicaid enrollment, and \$53.3 billion over ten years due to funding cuts. Protecting this funding is critical to the health of the state and its children. Plus, advocates called on the state to more than double the minimum wage, from \$10.70 to \$26.51, to meet the rising cost of living in the state.

While Infant Vitality Advocacy Day occurs once a year, the work of promoting early childhood health and wellness is a constant effort. The AMCNO will continue to uplift the work of First Year Cleveland and other partners in conversations with lawmakers, and will do our part to ensure all families in Ohio have what they need to thrive



Left to right: Evan Kuczynski, Wes Brooks



Left to right: Sam Zern, Evan Kuczynski, Rep. Tristan Rader, Wes Brooks

Member Spotlight: Dr. Christina Campana thrives in “controlled chaos” in the ED and as president of the American College of Emergency Physicians Ohio chapter

There is no singular path to medicine. The majority of medical students take gap years between their undergraduate graduation and medical school matriculation, and more and more people are finding their way into medical careers after working in different fields, but still feeling the call to medicine.

That was the case for Christina Campana, DO, FACEP.

“I was a wedding planner,” Dr. Campana said. “I was a buyer, so I would visit all these designers and pick out what I would think we would want to for the showroom. I’d go and pick out, like, their seasonal lines and I would go to New York, and we’d buy our jewelry and things like that. I just didn’t feel fulfilled.”

So, despite the option to take over her family’s bridal salon business in Youngstown, Dr. Campana pursued medicine at Lake Erie College of Osteopathic Medicine. There, in the final rotation of her third year, she fell in love with emergency medicine.

“I did my first emergency medicine rotation, and it was like having an epiphany. I was like, Oh my gosh, I can’t wait to come back to this place, even though it’s organized chaos. I felt that I wanted to be the ringleader,” Dr. Campana said. “I enjoyed my time there. I enjoyed seeing every specialty, every patient, and I knew right then and there that that’s what I wanted to go into. And I’ve been stuck here ever since.”

Now, in 2025, Dr. Campana is president of the Ohio Chapter of the American College of Emergency Physicians. She had been a member of the group since starting residency but decided to deepen her involvement and pursue leadership after feeling the pain of a lack of support for healthcare workers.

“Probably five years after I graduated residency, we were experiencing the opiate pandemic here in Northeast Ohio. It was really brutal – the department was running like 20 cardiac arrests a day, and it was very mentally taxing, and at that same time, we had a mass exodus of very experienced nurses from the emergency department,” Dr. Campana said. “I had a terrible night shift where we were boarding patients in the emergency department, and I was the only physician on for like 70 patients. That was the day that I realized that I was very burned out, burnt to a crisp, and I knew that I had to put my time outside of the emergency department to fight for myself, my nurse colleagues, my residents and my patients to make things better.”

In her time with ACEP, she’s been proud of the organization’s political advocacy that has successfully gotten prudent layperson legislation passed and protected the rights of doctors to express sympathy and apologizing to patients without fear of malpractice repercussions. Now, more than a decade since she graduated residency, Dr. Campana says the field has changed significantly, as have the advocacy priorities for the practice, the workers, and their patients.

“Our focus right now is physician led care in the emergency department and also fighting Medicaid cuts, which seems like never ending battle,” she said.

Like the AMCNO, ACEP is working with the OSMA to promote several pieces of legislation aimed at fighting back against the insurance industry. The organization is also raising alarms about federal cuts to healthcare and the deleterious impacts they will have on patients and rural healthcare. Still, Dr. Campana is hopeful as she looks at the incoming physicians and students she sees.

“The thing that I’m looking forward to the most is seeing this generation of physicians become involved early in [advocacy] that will affect the way that they practice,” she said. “I just love it.”



AMCNO Hosts Women in Medicine Wine Night

Once again the AMCNO hosted its annual Women in Medicine Wine Night at CLE Urban Winery on Sept. 4th. The host committee consisted of Drs. Sladjana Courson, Kristin Englund, Mary Frances Haerr, and Roopa Thakur.

Women in Medicine Month is celebrated in September each year in the United States. It was established by the American Medical Association (AMA) to recognize and honor the growing number of women in the medical field, highlight their contributions, and raise awareness of the challenges they continue to face.

Although women now make up roughly 50% of medical school students, they remain underrepresented in many specialties and leadership positions.

Women in Medicine Month promotes efforts toward equity, diversity, and inclusion in the field. We thank all of the AMCNO members who joined us for this special evening of networking and collegiality.



Member Spotlight: Randon Welton, MD

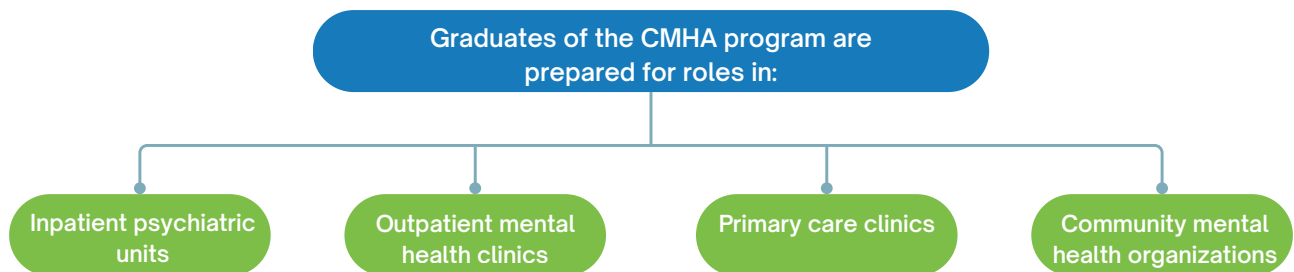
According to 2023 data from the Substance Abuse and Mental Health Services Agency, Ohio adults have less access to mental health care and less satisfaction with mental health than the national average.[1] The number of Ohioans reporting depression is higher than the national average, as is the number of individuals suffering from substance use disorder. In addition, the number of Ohioans who are reporting poor mental health is rising, along with the state's suicide rate.



All these trends concerned AMCNO member Randon Welton, MD the Margaret Clark Morgan Endowed Chair of Psychiatry at Northeast Ohio Medical University (NEOMED). Dr. Welton, who earned his medical degree from the Uniformed Services University of Health Sciences in Bethesda, Maryland, and completed his psychiatry residency at Wright State University School of Medicine, saw a need for additional providers to assist in the treatment of mental illness and substance use disorders and decided to do something about it.

Dr. Welton worked with State Senator Theresa Gavarone (R- Bowling Green) to address the worrisome prediction that by 2037, Ohio is estimated to have only 35% of its needed psychiatrists. Roughly modeled after the Certified Anesthesiologist Assistant (CAA), Sen. Gavarone introduced and passed legislation to create a new category of mental health prescriber, the Certified Mental Health Assistant (CMHA). The CMHA must work under the supervision of a physician but should help provide a high quality of mental health care to many more people than could be cared for by physicians alone.

NEOMED hopes to be the first university in the country to offer this program, with a goal of seeing its first class of students in July 2026. Dr. Welton is the head of the program and has developed an initial curriculum for these students. The curriculum will need to be vetted by an advisory panel consisting of members from the Ohio Psychiatric Physicians Association (OPPA) and the Ohio State Medical Association (OSMA). Once the curriculum is established, the master's level degree program will be submitted to the Higher Learning Commission for approval.



Outstanding issues to be addressed include how these new providers will be reimbursed, whether they can bill independently or will need to bill under the supervising physician, as well as the issue of malpractice insurance.

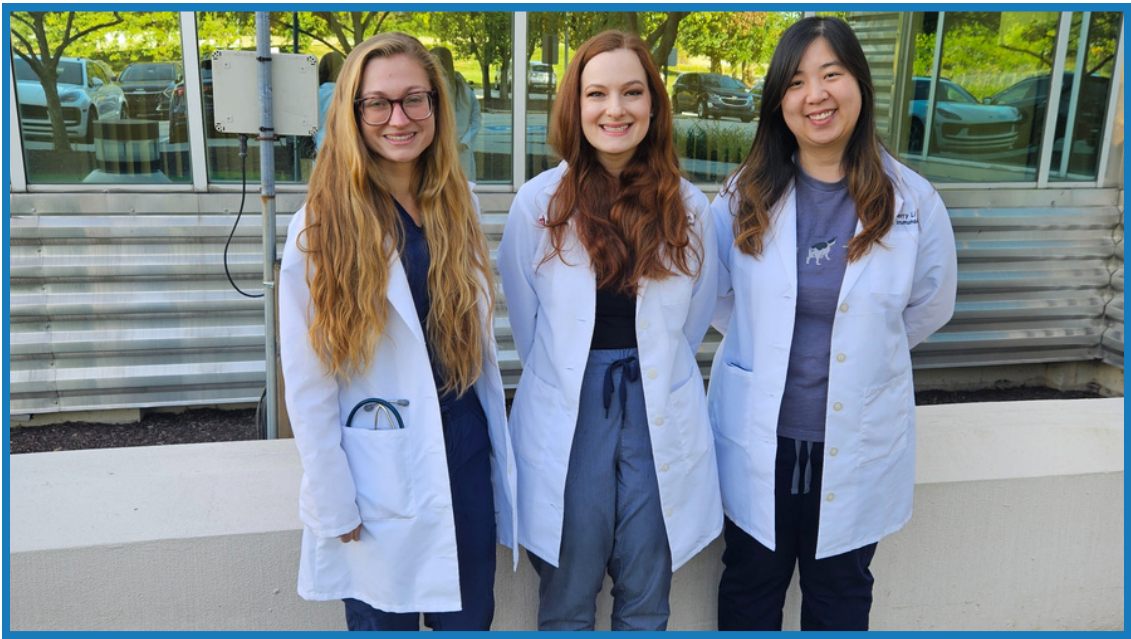
This model would be the first of its kind in the United States, and despite these hurdles, Dr. Welton remains committed to bringing this program to fruition. He remains motivated by the need for more providers to be available for Ohio patients suffering from mental health issues.

To learn more about the program, you can visit the NEOMED website at - <https://www.neomed.edu/certified-mental-health-assistant/> or contact Dr. Welton at rwelton@neomed.edu.

Northeast Ohio Pollen Counts 2025

By Anna Rothstein, MD; Sherry Li, DO; Marija Rowane, DO; and Robert Hostoffer, DO; Allergy/Immunology Associates

Allergy/Immunology Associates continues to serve the residents of the Greater Cleveland area by reporting daily pollen counts to the Academy of Medicine of Cleveland & Northern Ohio (AMCNO) Pollen Line. Pollen was collected using a Rotorod Aeroallergen device.



Left to right: Marija Rowane, DO, Anna Rothstein, MD, Sherry Li, DO

Northeast Ohio is mainly impacted by tree pollen, grass pollen, and weed and ragweed pollen. Many patients suffer from allergic rhinitis, allergic conjunctivitis, and asthma, all of which may worsen depending on the season and pollen counts. Tracking pollen counts helps patients and physicians anticipate peak pollen seasons and adjust treatment to better control symptoms.

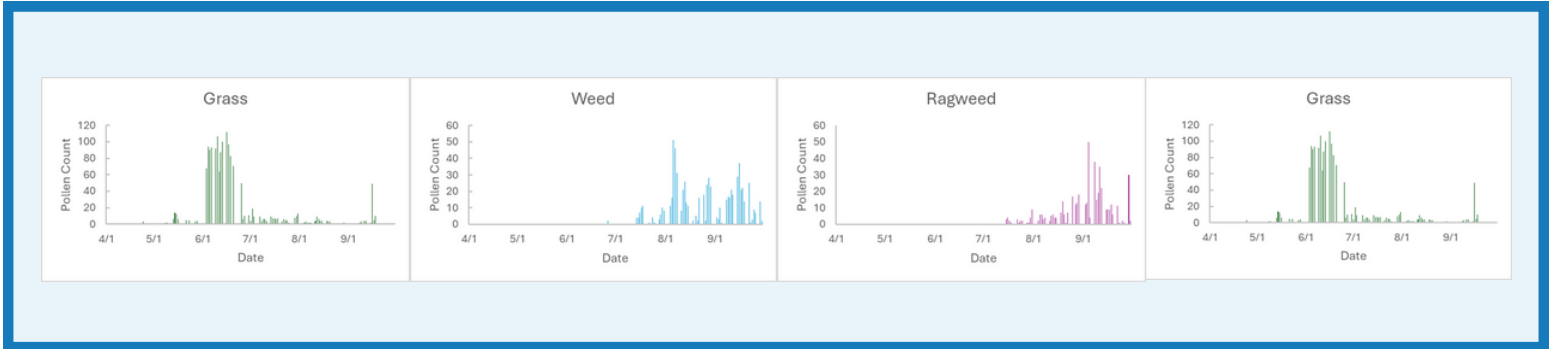
The pollen season begins with tree pollen in spring. This year, tree pollen first appeared on April 1, peaked on May 1, and remained persistently elevated from April 24 through May 21.

Grass pollen dominates during summer. It reached its peak on June 16, with the season spanning June 3 through July 2.

The season concludes with weed and ragweed pollen in late summer and early fall. Weed pollen peaked on August 6 and ranged from June 30 through September 22. Ragweed peaked on September 4, with activity from August 25 through September 22.

No data from 2024 is available for comparison due to a broken Rotorod during that year.

Each year, Allergy/Immunology Associates partners with the AMCNO to provide pollen counts for the Greater Cleveland area from April 1 through September 30. Counts are available through the Pollen Line at 216-520-1050 and online at www.amcno.org



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AMEF Holds Top Golf Fundraiser

On August 21st, the Academy of Medicine Education Foundation (AMEF) hosted a fundraiser at TopGolf in Independence, Ohio. AMEF, the charitable arm of the Academy of Medicine of Cleveland & Northern Ohio has awarded over \$2 million in scholarships since its inception in 1962.

AMEF focuses on helping medical students, especially those from or tied to Northeast Ohio, who have shown interest in organized medicine and community involvement.

Over \$15,000 was raised from the event to support medical student scholarships. These funds come at a time when medical school tuition is at an all-time high. Thank you to all of our sponsors (listed below) for their support.



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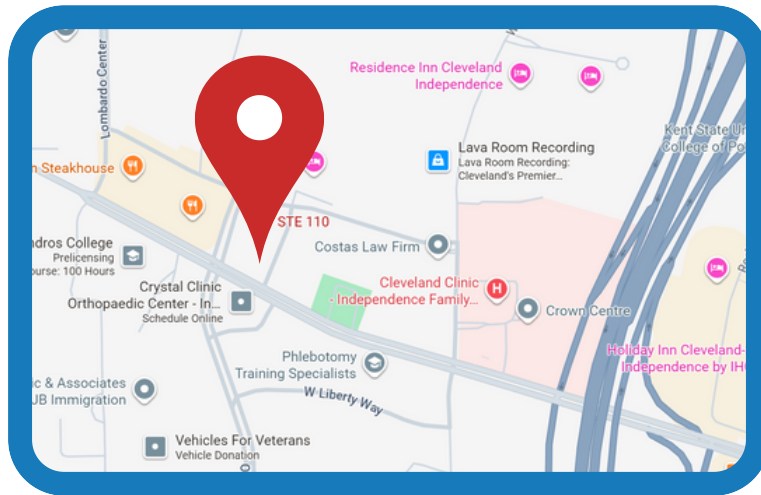




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