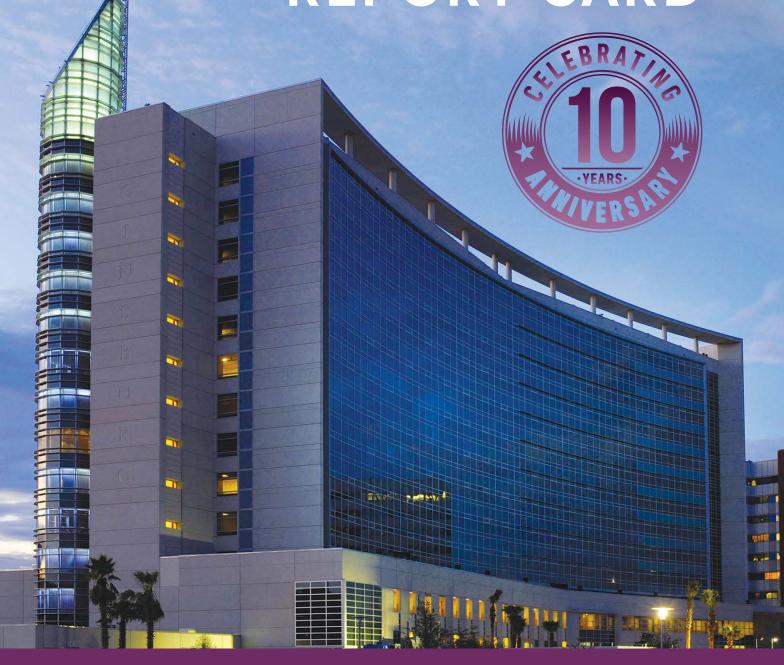


CJIII 2202 REPORT CARD





A History of Quality Care and Innovation

Founded in 2012, Center for Interventional Endoscopy (CIE) was central Florida's first state of the art endoscopy center focusing on interventional gastroenterology. Since then, it has evolved to become one of the largest complex endoscopy centers in the country, attracting patients from across the globe. CIE integrates therapeutic endoscopy with minimally invasive endoscopic surgery to diagnose and treat a wide range of complex gastrointestinal diseases among adult and pediatric patients. These endoscopic interventions can provide an alternative to more invasive surgeries and are often associated with faster recovery and better quality of life.

The Advent health CIE is led by a highly skilled team of experienced physicians. The CIE team strives to provide personalized high-quality care to each patient and at the same time is invested in endoscopic research and training of the next generation of advanced endoscopists.

> CIE physicians work in close partnership with referring physicians to ensure continuity of care once their interventional endoscopy treatment needs are met.

VISION

EXCELLENCE IN CLINICAL CARE

CUTTING-EDGE RESEARCH AND INNOVATION

PATIENT AND REFERRING PHYSICIAN SATISFACTION

TRAIN THE NEXT GENERATION OF THERAPEUTIC ENDOSCOPISTS

Overview From Physicians

Dear Colleagues,

I am pleased to present the CIE annual report card for the year 2022. Over the last two years CIE has gone through a change in several personnel which has led to a new energy and dedication to excellence in patient care and has transformed us for the better. It is my pleasure to introduce you to our team of six highly skilled advanced endoscopists who represent the face of CIE: Muhammad K. Hasan, MD, Kambiz Kadkhodayan, MD, Mustafa Arain, MD, Dennis Yang, MD, Deepanshu Jain, MD and Natalie Cosgrove, MD.

Over the last year our dedicated team has taken the challenges associated the ongoing COVID pandemic and a changing healthcare environment in its stride and has focused on our mission of providing high quality clinical care, conducting cutting edge research, and contributing to the field with teaching events and training of the next generation of advanced endoscopists.

In the year 2022, we performed a total of 8,314 advanced endoscopic procedures; 3058 EUS, 2099 ERCP and 3157 other advanced endoscopic procedures including endoscopic mucosal resection, endoscopic submucosal dissection (ESD), peroral endoscopic myotomy (POEM), endobariatric procedures and more.

In addition, we developed a Pancreas Center of Excellence where patients with pancreatic diseases are seen in an ambulatory setting and a Third Space Endoscopy Clinic for patients undergoing complex procedures such as POEM and ESD. In the summer of 2022, we initiated our Endobariatric Program that continues to grow and offers patients with an endoscopic option for the management of obesity.

The team at CIE is humbled by our success and is looking forward to a very productive 2023 in which we aim to build on our foundations with a focus on quality, innovation, education, and research to further the field of advanced endoscopy. We look forward to being a resource for colleagues and continuing to be a destination program for complex endoscopy in the nation.

Sincerely,

Muhammad Hasan, MD

Medical Director

Center for Interventional Endoscopy

14. Hascu





Rob Deininger, CEO

AdventHealth Orlando

Market Central Florida Division

"The Center for Interventional Endoscopy is a model for innovation and excellence in clinical care. The dedicated team and talented physicians continue to advance high-quality and cutting-edge clinical care for our community and patients each and every year. They continue to maintain a critical presence on the national and international stage representing AdventHealth and advancing our reputation in the field. Just this past year, with the addition of 3rd Space Endoscopy and Endobariatrics, they continue to grow and evolve our service offerings. I am grateful for this amazing team and all that they bring to AdventHealth!"

Patient Testimonials

"They call me a medical miracle. Five surgeons in Orlando told me I'd be dead by October 2017. I'm still here. If it wasn't for Dr. Hasan, I wouldn't be able to eat. I love that man and everyone in his office is wonderful. He's not treating cancer, he's just helping to make it possible for me to keep eating while I'm still alive."

- Jacqulyn K.

The staff at Endoscopic Weight Loss Center at CIE is truly amazing. Luis calling and answering all my questions and getting everything squared away. Brittany called me daily to check in and Dr. K took the time to walk through my procedure to make sure my spouse and I understood what was going to happen. Three weeks after the surgery, I have lost 15 pounds and I could not have done this on my own. My confidence is coming back and it's truly amazing to know they used a natural opening to complete this surgery.

- Missy N.

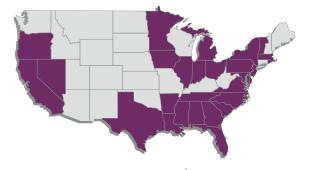


2022 Facts and Figures

TOTAL ADVANCED PROCEDURES

3,058 EUS 2,099 **ERCP**

3,157 OTHER RFÃ, EMR, ESD, 3rd SPACE, DBE



7,315 Total Patients

30 States

67 Patients

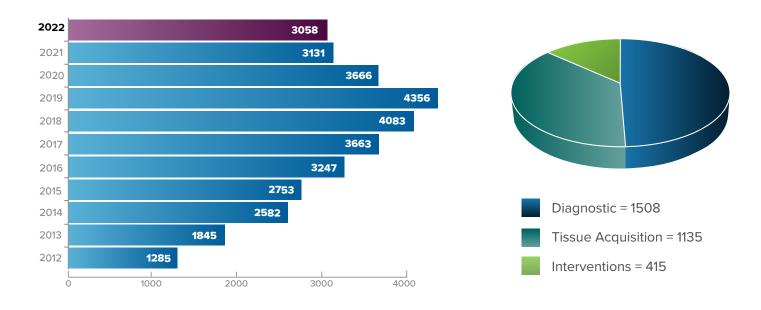
Tri County 4,615 | Non-Tri County 2,628

International Patients

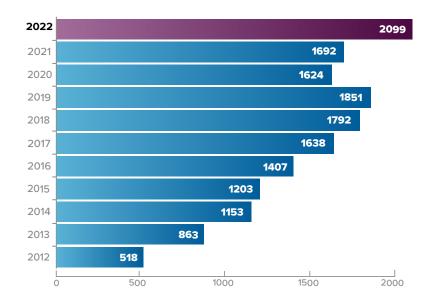
Patients are referred to CIE for tertiary-level endoscopic care from across the United States as well as internationally. In 2022, patients were referred from 5 countries and nationally from 30 states. More that 36% of treated patients originated from outside the Tri-County area.



EUS Procedure Volume



ERCP Procedure Volume

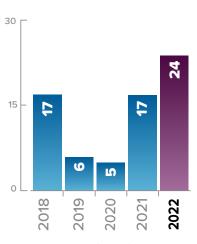


TREATMENT Outcomes:

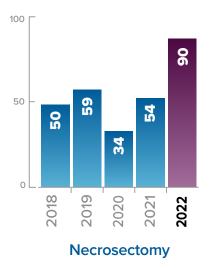
- Technical Success = 99.4%
- Native Papilla = 72.86%



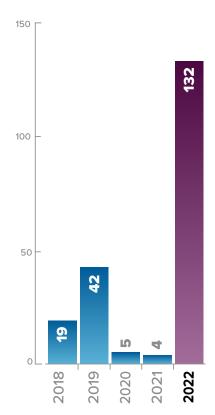
Other Interventional Procedures



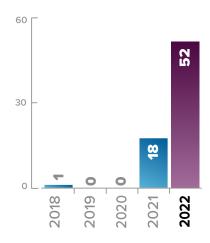
Zenker's Diverticulectomy



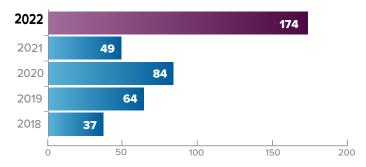
Endoscopic Mucosal Resections (EMR)



Peroral Endoscopic Myotomy (POEM)



EUS Guided Gastrojejunostomy



Endoscopic Submucosal Dissection (ESD)

Pancreas Center Program

Under the leadership of Mustafa A. Arain, MD, CIE launched Central Florida's first dedicated Pancreas Center in December 2021 to provide patients with coordinated, multidisciplinary care for a full range of pancreatic conditions, including recurrent acute pancreatitis, chronic pancreatitis, exocrine pancreatic insufficiency (EPI), hereditary pancreaticis, pancreatic cysts and complex disease of the biliary system, as well as hereditary pancreatic cancer screening. Through this new center, gastroenterologists, surgeons, endocrinologists, nutritionists, health psychologists, genetic counselors and pain management physicians work together to treat the whole patient — mind, body and spirit.

CIE has been providing advanced endoscopic services including endoscopic ultrasound and endoscopic retrograde cholangiopancreatography for patients with pancreatic and biliary diseases for over a decade. Management of pancreatic diseases can be challenging for multiple reasons including difficulty in making a correct diagnosis of a pancreatic disorder, limitations of currently available diagnostic tests and treatment options, and importantly, access to specialists with an interest and expertise in the field. In order to fulfill this unmet need in the Orlando and surrounding area, we recently established the AdventHealth Pancreas Center at CIE with three primary goals; provide comprehensive patient care to patients with pancreatic diseases, conduct research in the field of pancreatic disorders to better understand and treat diseases and be a resource for fellow colleagues across disciplines through direct interactions as well as continuing education opportunities for fellow colleagues and trainees.

The clinical goal of the AdventHealth Pancreas Clinic is to create a dedicated ambulatory clinic environment in which patients are evaluated and managed for their pancreatic disorders using an evidence-based, state-ofthe-art, multidisciplinary and comprehensive approach. Our team works closely with other specialists to treat a variety of pancreatic conditions including acute and chronic pancreatitis, pancreatic necrosis and associated complications, pancreatic cysts and hereditary pancreatic cancer screening. In addition, we also see patients with diseases of the biliary system, including biliary strictures, stones, cysts, and tumor. Our comprehensive approach includes using advanced imaging techniques including high-resolution CT, MRI/MRCP and endoscopic ultrasound, evaluation for genetic disorders associated with pancreatitis and access to nutritional and endocrine specialists. Our dedicated pancreatic surgeons perform a variety of surgical options for benign, premalignant, and malignant pancreatic conditions.

The team at CIE is actively involved clinical research in pancreatic diseases. In collaboration with the Translational Research Institute (TRI) at AdventHeatlh, we are participating in the National Institutes of Health (NIH) supported Type 1 Diabetes and Acute Pancreatitis consortium (T1DAPC) and DREAM trial. The aim of the DREAM study is to better understand the relationship between acute pancreatitis and the development of diabetes and to study molecular and imaging mechanisms involved in the process. We are also conducting several other studies to assess patient outcomes in pancreatic diseases.

DREAM STUDY DREAM is a study to find out how frequently people with acute pancreatitis (AP) develop diabetes. High blood sugar (blood glucose) is a known complication of acute pancreatitis. Sometimes high blood sugars can last a few weeks after acute pancreatitis and get better. However, sometimes high blood sugars may not improve after acute pancreatitis and diabetes is diagnosed. Diabetes can also appear later, a year or more after acute pancreatitis. Little data is available on how often or why diabetes occurs after acute pancreatitis. The DREAM study will help to better understand diabetes after acute pancreatitis and who is at increased risk of developing it, as well as the different types of diabetes that develop after acute pancreatitis. The Pancreas Center at CIE and the TRI at AdventHealth are actively recruiting patients for the DREAM study.



Third Space **Endoscopy Program**

Under the leadership of Dr. Dennis Yang, the Director of Third Space Endoscopy at CIE, we have expanded the Third Space Endoscopy Program at AdventHealth significantly over the past 12 months. CIE has become one of the highest volume and most successful third space endoscopy programs in both the state of Florida and in the nation. We at CIE continue to provide state-ofthe art third space endoscopic procedures to all our patients. These procedures include minimally-invasive endoscopic interventions for the treatment of foregut motility disorders (e.g. esophageal and gastric per-oral endoscopic myotomy) and for the resection of pre-cancerous and cancerous lesions in the gastrointestinal tract (e.g. endoscopic submucosal dissection and tunneling resection).



FLORIDA THIRD SPACE ENDOSCOPY WORKSHOP

In addition to patient care, the team at CIE recently launched the first Florida Third Space Endoscopy Workshop, a successful comprehensive hands-on workshop on current and emerging techniques in third space endoscopy. The workshop focused on individualized hands-on training with world-class faculty. The event was very well-received and will be expanded in 2023 to include a 3-day course with tailored training opportunities for both beginners and advanced endoscopists.







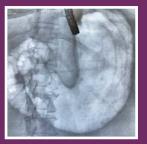






Endobariatric **Procedures**

Patient BEFORE ESG



Patient AFTER ESG



TORe Procedure



TORe Procedure



Balloon Therapy



Balloon Therapy



Endobariatric Program

Under the leadership of Kambiz S. Kadkhodayan, MD, CIE opened its Endobariatrics program in 2022 to offer patients access to cutting edge, minimally invasive endoscopic weight-loss procedures such as endoscopic sleeve gastroplasty (ESG). An alternative to traditional gastric sleeve surgery, ESG is a minimally invasive weight-loss procedure that uses an endoscope with an attached suturing device to place sutures in the stomach.

In addition, we offer endoscopic procedures that are aimed at managing weight re-gain after bariatric surgery. Examples of such procedures are Transoral Outlet Reduction (TORe) for patients with weight regain after Roux-n Y gastric bypass and Sleeve in Sleeve (SIS) for weight regain after surgical sleeve gastroplasty. All the procedures are performed in our state-of-the-art endoscopy lab and nearly all patients are discharged home the same day.

Traditional treatment options for patients with obesity have included diet-lifestyle modification, pharmacotherapy and, ultimately, surgery. As most of us realize, diet-lifestyle modification, while an essential component of weight loss, can be difficult to maintain. Pharmacotherapy has limited efficacy when used alone as primary treatment. Surgery, on the other hand, is highly effective and is considered "the gold standard" for treatment of patients with body mass index (BMI) over 40 kg/m2.

In recent years, the field of endobariatrics has emerged as a viable, incisionless, minimally invasive endoscopic alternative to surgery that bridges the gap between the diet-exercise, pharmacotherapy and surgery options.

We consider endobariatrics to be an essential component of a broader multidisciplinary and comprehensive approach to patients with obesity. We work in tandem with our bariatric surgeons, physicians, and medical practitioners from several different fields, all with the common goal of providing our patients with a wholistic and personally tailored solution to weight loss and good health.

The majority of endobariatric patients belong to the BMI category of 30-40. For the most part, these are patients who would not otherwise qualify to have surgery. We are also able to provide endoscopic treatment to patients with higher BMIs who prefer not to have surgery. As such, the field of endobariatrics broadens our patient reach, and here at AdventHealth, we pride ourselves in being able to offer our patients the entire gamut of available procedures.

At CIE, we are at the forefront of clinical development, and offer the most novel and clinically validated endoscopic treatment solutions to our patients. What truly sets us apart is our excellent team of dedicated and talented individuals at CIE who strive every day to make sure our patients are well cared for before, during and after treatment.

Quality and Safety in Gastroenterology and Endoscopy



At CIE, we strive for quality of care and patient safety. **Dr. Natalie Cosgrove** is leading this effort at AdventHealth Gastroenterology.

Since joining CIE, Dr. Cosgrove has spearheaded a joint effort to streamline colon cancer screening by detecting system barriers and identifying strategies to improve timely patient access to endoscopy. Several disciplines at AdventHealth continue to collaborate to develop effective and efficient multi-disciplinary care pathways for the treatment of various general and complex gastrointestinal issues. To achieve the highest quality of care for our patients, we have instituted an infrastructure that allows us to measure and track important gastroenterology and endoscopic quality benchmarks.

We take pride in providing not only world class quality in endoscopy but also in the care of patients in a whole some way. From the

patient's first contact with our CIE team, we make every possible effort to ensure that the patient feels comfortable, safe and actively involved in the medical decision-making process. Beyond medical care, we provide emotional and spiritual support to the patient and their loved ones.

Expansion of CIE Vision to AdventHealth Celebration



Celebration, a master planned community for tomorrow, as envisioned by Walt Disney, has rapidly expanded since its inception within Osceola County in Orlando, FL. By virtue of its location, it hosts and caters to the medical needs of a population much larger than the county itself.

In 2022, under the vision of the AdventHealth leadership team, groundwork was laid to develop a new state-of-the-art interventional endoscopy unit at AdventHealth Celebration. This new addition will be an extension of the Center for Interventional Endoscopy (CIE). Expert care to patients with complex gastrointestinal diseases will now be provided at this location by the same CIE team that has been successfully caring for patients at the Orlando Campus.

CIE ANNUAL REPORT C

Under the guidance of Dr. Hasan, **Dr. Deepanshu Jain** will lead this expansion into 2023. Beyond interventional endoscopy, a complex endoscopy clinic is being developed to provide a continuum of care for patients in the outpatient setting. CIE at Celebration aims to provide world-class care to each patient tailored to their specific needs. Achieving high level of patient satisfaction, referring physician satisfaction, incorporating cutting edge research into clinical practice, and developing an educational curriculum for the trainees are the main pillars of our mission.

Publications in 2022

East versus West: Comparisons and Implications in Adaptation to Practice. Gastrointest Endosc Clin N Am. 2023 Jan;33(1):7-13.

A novel through-the-scope helix tack and suture device for mucosal defect closure following colorectal endoscopic submucosal dissection (ESD): a multicenter study. Endoscopy. 2022 Nov.

Novel single-operator through-the-scope traction device for endoscopic submucosal dissection: Outcomes of a multicenter randomized pilot ex-vivo study in trainees with limited endoscopic submucosal dissection experience (with video). DEN Open. 2022 Oct 10;3(1):e174.

Novel dual-action tissue through-the-scope clip for endoscopic closure. VideoGIE. 2022 Aug 20;7(10):345-347.

Successful management of a duodenal perforation using a through-the-scope suturing device after failed attempt at closure with an over-the-scope clip." VideoGIE. 2022.

Rare solitary giant hamartomatous polyp of the stomach removed by endoscopic submucosal dissection. VideoGIE. 2022 Oct 24;7(11):413-416.

Efficacy and safety of EUS-guided gallbladder drainage for rescue treatment of malignant biliary obstruction: A systematic review and meta-analysis. Endosc Ultrasound. 2022 Oct 23.

Telecytology versus in-room Cytopathologist for Endoscopic Ultrasound Fine Needle Aspiration or Biopsy of Solid Pancreatic Lesions. Gastrointest Endosc. 2022 Oct 14.

Large Colon Polyp as the Only Manifestation of Chronic Schistosomiasis Infection. ACG Case Rep J. 2022 Oct 7;9(10)

A Prospective Cohort Study Evaluating PAN-PROMISE, a Patient-reported Outcome Measure to Detect Post-ERCP Morbidity. Clin Gastroenterol Hepatol. 2022 Sep 6.

Disconnected Pancreatic Duct Syndrome: Pancreatitis of the Disconnected Pancreas and Its Role in the Development of Diabetes Mellitus. Clin Transl Gastroenterol. 2022 Feb 1;13(2).

Metal versus plastic stents in the management of benign biliary strictures: systematic review and meta-analysis of randomized controlled trials. Eur J Gastroenterol Hepatol. 2022 May 1;34(5):478-487.

A rare case of hyponatremia and gallbladder cancer. Gastroenterology. 2022 Dec 8: S0016-5085(22)01376-2.

Characterizing a CT esophagram protocol after flexible endoscopic diverticulotomy for Zenker's diverticulum: A retrospective series. Transl Gastroenterol Hepatol. 2022 Oct 25;7:34.

First interobserver agreement of optical coherence tomography in the bile duct: A multicenter collaborative study. Endosc Int Open. 2022 Aug 15;10(8):E1065-E1072.

Role of gastric per-oral endoscopic myotomy (G-POEM) in post-lung transplant patients: a multicenter experience. Endosc Int Open. 2022 Jun 10;10(6):E832-E839.

Predictors of adverse events after endoscopic ultrasound-quided through-the-needle biopsy of pancreatic cysts: A recursive partitioning analysis. Endoscopy. 2022 Dec;54(12):1158-1168.

Endoscopic submucosal dissection for colorectal dysplasia in inflammatory bowel disease: a US multicenter study. Endosc Int Open. 2022 Apr 14;10(4):E354-E360.

Outcomes for endoscopic submucosal dissection of pathologically staged T1b esophageal cancer: A multicenter study. Gastrointest Endosc. 2022 Sep;96(3):445-453.

Clinical outcome of non-curative endoscopic submucosal dissection for early colorectal cancer. ESD Western Alliance (EWA). Gut. 2022 Jan 20:gutjnl-2020-323897.

Validation of choledocholithiasis predictors from the "2019 ASGE Guideline for the role of endoscopy in the evaluation and management of choledocholithiasis. Surg Endosc. 2022 Jun;36(6):4199-4206.

Radiologic Predictors of Increased Number of Necrosectomies During Endoscopic Management of Walled-off Pancreatic Necrosis. Clin Gastroenterol. 2022 May-Jun 01;56(5):457-463.

Prospective Study on the Efficacy of Endoscopic Through-The-Scope Tack and Suture System for Gastric Peroral Endoscopic Myotomy Mucosal Incision Site." Endoscopy International Open (AAM). Double balloon-enteroscopy with EUS-guided rendezvous for biliary access in patients with Roux-n-Y gastric bypass. VideoGIE (accepted for publication).

Endoscopic Pyloric Exclusion; EUS guided gastrojejunostomy combined with endoscopic suturing and closure of the pylorus. a novel approach to failed surgical repair of a perforated duodenal ulcer". VideoGIE (accepted for publication).

Helix tack for lumen apposing metal stent fixation in single session endoscopic ultrasound directed transgastric ERCP". VideoGIE (accepted for publication).

Educational Symposium

With a mission to advance the field of interventional endoscopy and share knowledge across the globe, CIE hosts a number of physician education events throughout the year for local, national and international audiences. In 2022 CIE hosted 3 conferences, several monthly grand rounds webinars with live cases and didactic lectures, weekly offerings like journal clubs and faculty lectures.

- AdventHealth Gastroenterology and Hepatology Conference January, 29, 2022
- · AdventHealth Pancreas Updates 2022 Conference August 13, 2022
- AdventHealth Center for Interventional **Endoscopy Monthly Grand Rounds**
 - Visit www.AdventHealthClE.com for all the past webinars
- Florida Third Space Endoscopy Workshop December 1, 2, 2022
- Orlando Live Endoscopy 2023 February 8, 9, 10, 2023





Clinical Trials

Study	Principal Site	Status
ASGE Clinical Research Award Sponsored Development and Validation of a Video- Based Assessment Tool for POEM (POEMAT)	CIE	Active
A Prospective Cohort Study Evaluating PAN-PROMISE, a Patient-Reported Outcome Measure to Capture Morbidity related to Post-EUS Pancreatitis Symptoms	CIE/Loma Linda	Active
Diabetes RElated to Acute pancreatitis and its Mechanisms (DREAM) - An observational cohort study from the Type 1 Diabetes in Acute Pancreatitis Consortium (T1DAPC), NIDDK Funded Study	NIH Funded	Active
Study Principal Site Status Multicenter Prospective Study on Establishing Learning Curve and Competence Criteria in Colorectal EMR Among Advance Endoscopy Trainees using a standardized assessment tool (C-EMR STAT)	CIE	Active
A Prospective Cohort Study Evaluating for Acute Encephalopathy in Patients with Acute Pancreatitis	CIE/Loma Linda	Active
Multicenter Randomized Trial Comparing Hybrid vs Non-Hybrid ESD for Colorectal Lesions	CIE	Active
A Prospective Cohort Study Evaluating Risk Factors for Post-Sphincterotomy Bleeding	CIE/Loma Linda	Active
EUS-guided gastroenterostomy versus surgical gastroenterostomy for palliation of malignant gastric outlet obstruction	CIE	Active
Multicenter Prospective Study on the Effect of Purastat Gel for Esophageal Stricture Prevention after Wide-field ESD	CIE	Active
Pilot Study Evaluating Histopathological Changes on Muscle Biopsies of Patients with Refractory Gastroparesis Undergoing G-POEM	CIE	Active
Multicenter Retrospective Study Evaluating POEM Outcomes in Patients with Spastic Esophageal Disorder on Chornic Opiates	CIE	Active
Intraprocedural predictors of balloon enteroscopy assisted endoscopic retrograde cholangiopancreatography (BEA-ERCP) failure in patients with Roux-en-Y gastric bypass (RYGB) and determination of the optimal time to cross over to endoscopic ultrasound directed trans gastric endoscopic retrograde cholangiopancreatography (EDGE)	CIE	Active
A prospective study of overall accuracy and inter-observer variability of EUS directed CBD size measurement	CIE	Active
POEM Prospective Registry	CIE	Active
G-POEM Prospective Registry	CIE	Active
ESD Prospective Registry	CIE	Active
Single Center Retrospective Study on Adherence to Surveillance Colonoscopy After Colorectal EMR and Factors Associated with Non-Adherence	CIE	Active
Single Center Retrospective Cost-Analysis on Immediate Post-OP Management of POEM patients	CIE	Active
Multicenter Randomized Trial Comparing Margin-Marking Wide Field EMR vs Margin Ablation EMR and Its Impact on Recurrence (ERADICATE Trial)	CIE	Development
Multicenter Registry on the Dual Action Tissue (DAT) Clip by Microtech (sponsored by Microtech)	CIE	IRB
Multicenter Prospective Study to Develop and Validate Criteria for the Immediate Post- operative Care of POEM patients	CIE	Development
Survey-Based Study to Assess Colorectal EMR Training Among Third Year GI and Advanced Endoscopy Fellows	CIE-Mayo Clinic	Development
A prospective cohort study to evaluate practice trends for biliary drainage interventions at a tertiary referral center	CIE	Development

Advanced Endoscopy Fellowship Program

The advanced endoscopy fellowship at CIE is arguably amongst the premier programs in the country. The fellowship is structured to provide a rigorous advanced endoscopic curriculum, exposing our fellows to all facets of advanced endoscopy. During the first 6 months of training, our fellows are trained in the basics of endoscopic ultrasound (EUS), endoscopic retrograde cholangiopancreatography (ERCP), luminal intervention and resection. The latter 6 months are tailored to meet the clinical interests of our fellows. They have the ability to pursue interventional endoscopic ultrasound (EUS), advanced pancreatic endoscopy, third space endoscopy and bariatric procedures based on their clinical and research interests. Our fellows participate in didactic conferences that include monthly journal clubs, faculty lectures, pathology conference and bi-weekly clinical conferences. They are encouraged to participate as junior faculty in our many symposia and clinical conferences. Research is highly encouraged, and fellows have the opportunity to pursue self-initiated research and / or participate in several ongoing clinical research trials. By the end of their training, our fellows average 700 EUS procedures, 500 ERCP's, and approximately 2000 total advanced endoscopy procedures. These numbers far exceed established thresholds for training by the ASGE.

A unique aspect of our program is the comradery amongst the faculty and staff. Each of our faculty have had distinguished career's in teaching, and have been directors of advanced endoscopy programs. This brings together a rich milieu of teaching experience that our fellows benefit from every day. This dedication to teaching and instruction along with a high procedural volume and a wide spectrum of procedures make the program at CIE an ideal place for advanced endoscopy training.

Advanced Endoscopy **Fellows**





Waleed Aljohani, MD

Maham Hayat, MD



Yasi Xiao, MD







Artur Viana, MD





Tony Brar, MD



Hafiz Muzaffar Akbar Khan, MD

Advent Health

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