



PULASKI COUNTY MEDICAL SOCIETY News

May 2026

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When you think professional, ethical, quality healthcare,
 think physicians of Pulaski County Medical Society.

UAMS Colleges of Medicine, Nursing, Pharmacy, Health Professions, Public Health Receive Accolades

LITTLE ROCK — The University of Arkansas for Medical Sciences (UAMS) colleges of Medicine, Nursing, Pharmacy, Health Professions, and Public Health garnered recognition among the top academic programs in [U.S. News & World Report's list of Best Graduate Schools for 2026](#).

In the rankings released today, the UAMS College of Medicine is recognized as a Tier 1 school for primary care education, placing it among the highest-performing institutions in the nation. *U.S. News & World Report* evaluated dozens of medical and osteopathic schools and separated them into four tiers based on factors such as faculty resources and the academic achievements of entering students.

The College of Medicine rated highly in several other categories, ranking fifth in the nation for its percentage of graduates who practice in medically needy areas, 14th for graduates who work in rural communities and 30th for graduates who serve as primary care physicians.



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Mediation is an alternative to going to trial. It is a private and informal process by which a neutral person, the mediator, helps the parties reach an agreement. The mediator cannot impose a decision on the parties to settle the case, but usually pushes both sides towards a settlement of the case. Through this process, the mediator helps narrow the issues and works to get each side to agree to an actual amount to resolve the case. Mediations provide a way for the plaintiff and defendant to have a chance to speak their piece about the case. It is not the same as having their day in court, but it can be a very adequate substitute, when appropriate, without the devotion of large amounts of time, energy, and expense required by trial.

WHO ARE THE PLAYERS AND WHO ATTENDS? The defense attorney assigned to the case and the State Volunteer Claims Attorney attend on behalf of the physician and/or practice group. The plaintiff attorney and their client attend, as well as any other co-defendants and their attorneys. The mediator is an attorney with knowledge of medical malpractice cases. The mediator is in a neutral position and does not represent either side. The mediator's only financial interest is the fee they are paid to conduct the mediation. Before the mediation is set, the defense and plaintiff attorneys choose a mediator that they both believe will be fair and impartial. Each side looks for a mediator with the skills and personality they think will help resolve the case on terms most favorable to their client. The physician may not be required to attend but it is most often quite beneficial when they do so. State Volunteer provides a modest stipend for attendance at a mediation to help offset the physician's time away from work.

WHEN ARE CASES MEDIATED? Cases are mediated after both sides have had sufficient time to develop the case, which usually means sometime after discovery is completed but before trial. This is usually 2 to 3 years after the case was filed, but it may be earlier in some cases. In some instances, the Court may order the case to be mediated, but this does not necessarily mean that the case is ready for mediation. For there to be a good chance for successful mediation, both sides need to want to participate in the mediation process and the case needs to be ready, or "ripe," to mediate. A looming trial date often gives both sides some interest in mediation no matter how strong they feel their case is.

WHAT IS THE PROCESS? In a traditional mediation, all the participants come together in a "joint session." This usually involves everyone introducing themselves briefly. The mediator will outline the process and often let both sides know that the mediation is a way for them to "have their day in Court," but without the expense, commitment of time and uncertainty that would come with going through a jury trial. The mediator may offer that this is an opportunity for those involved in the case to resolve it versus placing their respective fates in the hands of a jury. The plaintiffs then present a summary of their case and outline why they believe the standard of care was breached, how that breach caused injury and the nature of the injury itself. The defense then responds with its summary of why the case is defensible and why the standard of care was not breached. At the conclusion of the "joint session," each side adjourns to its own room.

After the opening session adjourns, the mediator spends some time discussing the case with the plaintiff and then returns to the defendants with an opening demand. Many times, the opening demand is shockingly high and may exceed what the plaintiff's best day in Court might be. At this point, it is easy to get discouraged and frustrated but making a reasoned and rational counteroffer is important because it helps set the trajectory and tone for the mediation. At this point, the difference

between the demand and the counteroffer is typically huge and the odds of reaching an agreement seem very low. However, the plaintiffs and defendants continue the process of trading offers and counteroffers. Each side may communicate certain points through the mediator that they feel will push the other side to become more realistic. The mediator may use certain techniques to bring the parties closer together. A common technique is called "brackets." With that technique the mediator gets one side to commit to go to an amount if the other side will go to another amount. For example, "If the plaintiff will come down to \$300,000, will you, defendant go up to \$200,000?"

HOW DO PARTIES THAT ARE SO FAR APART RESOLVE A CASE THROUGH MEDIATION? Mediations involve the centuries-old art of negotiation and there are many ways this process leads to a resolution. The process helps each side to find that point where they will not take any less and the other side will not pay anymore. Mediation may give both sides a chance to de-entrench from certain positions and look at a resolution from a new or fresh perspective. Mediation gives an opportunity for the heat and pressure of litigation to give way to the advice and efforts of the mediator. A good mediator "hammers" on both sides to shape a deal that realistically can be accomplished. When a resolution appears "within striking distance," a new type of pressure emerges, the pressure to bend and give a little more or accept a little less, to bring about an end with certainty to stressful, expensive and time-consuming litigation. The resulting agreement is not usually one that either side is totally happy with, but one that the parties can accept and "live" with. It may resolve a matter that has been pending for years. For the plaintiff, mediation gives an opportunity to convert a claim related to a loss or an injury into a tangible asset that can be used to empower that plaintiff's life and the lives of their family.

HOW LONG DOES MEDIATION LAST? Most mediations will last a full day. For the physician who wants to attend but cannot stay the entire day flexibility exists. Arrangements can be made for the physician to remain involved by phone on key decisions.

ARE ALL MEDIATIONS DONE IN PERSON? No. Some are done by video conferencing. However, personal participation and its requisite commitment tends to be more effective in bringing about an agreement.

WHAT IF THE CASE DOESN'T SETTLE AT MEDIATION? Many cases that ultimately settle, do not settle on the day of mediation. For one, both sides are in unfamiliar territory—conducting intensive back and forth negotiations on a matter that is very significant and deeply personal to them. This type of negotiation is stressful, tiring and foreign to most plaintiffs and defendants. Both sides are being hit with lots of information and both sides are trying to grapple with the emotions of resolving a case. On the surface it may seem only about money, but it goes far deeper for both sides. Each side may have to address a "new" reality that they did not have prior to the mediation. For example, the plaintiff may have to come to the realization that their case does not appear to be worth as much as they thought, or the defendant may have to face that the case is worth more than they thought. Walking away may give a participant some time to let this new reality sink in or for a participant to realize that resolving the matter through mediation offers a distinct advantage over the uncertainty of going to trial. For cases that do not settle at mediation, the mediator often stays in touch with the participants' attorneys and, if desired, continues to convey offers and counter offers and possible solutions for the case.

WHAT ARE THE PROS AND CONS OF MEDIATION? A positive for both sides is certainty. No matter how well each

side is prepared juries can be very unpredictable and may simply not see the case the way the parties see their case. A jury could return a very large award for the plaintiff that the defense did not anticipate or award an amount that is much lower than the plaintiff expected or could have been realized at mediation. The jury could also find the physician not negligent and award nothing. Resolving a case through mediation gives each side certainty and control over the outcome that they will not have in front of a jury. So, for as significant and cherished a jury trial is to American jurisprudence, the saying that the litigants are in the best position to resolve the case amongst themselves versus putting this decision in the hands of a jury bears some truth. This is true IF it can be resolved as some cases simply cannot be resolved by mediation. Another positive for the litigants is the savings in terms of time, lost revenue, expense, and the emotional toll of a trial. A medical malpractice trial will take anywhere from a few days to a few weeks depending on how much evidence is presented. This does not include the time needed for preparation.

For the physician, there are some negatives to settling a case. Most importantly, by settling you are giving up the opportunity for a complete win. A settlement will usually result in a National Practitioner Databank Report and in some states a report to the particular state's medical board that tracks such payments. That state's health department or board of medical examiners may conduct an investigation into the lawsuit. A settlement is also part of the physician's insurance history and must usually be addressed in credentialing. For all these reasons, the decision to go to trial versus settling the case requires careful consideration and depends on the facts of the particular case.

IS MY CONSENT REQUIRED TO SETTLE A CASE? Written consent is required most of the time before SVMIC can pay any amount of money on the physician's behalf. Consent does not have to be given prior to attending the mediation. The physician may decide to give consent or withhold consent depending on how the mediation develops. If a court orders mediation, it is not compelling payment, but rather attendance and participation in the mediation process.

Is mediation confidential? Specific statements made in a mediation are usually not admissible in Court and are confidential amongst the litigants. However, each party will be exposed to information that they can use to their advantage even though it is not admissible. Parties can and do share information with the mediator which the mediator does not share with the opposing side if requested not to do so.

CONCLUSION: Mediation is a tool that can be used to settle a case. Whether it is the right tool depends on a thorough and careful analysis of the particular case.

UAMS Colleges of Medicine, Nursing, Pharmacy, Health Professions, Public Health Receive Accolades

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"These rankings confirm yet again that the UAMS College of Medicine is one of the nation's very best for primary care education, and that we understand the importance of making medical care accessible to those who need it most and to those who are in rural communities and need easier access to care," said Steven Webber, M.D., executive vice chancellor of UAMS and dean of the college. "Our goal is to ensure that all Arkansans have access to high-quality primary care, both today and in the decades to come."

College of Pharmacy

The UAMS College of Pharmacy ranks 31st among the nation's pharmacy programs, making it the only Arkansas college in the top 100. Cindy Stowe, Pharm.D., dean of the College of Pharmacy, said a commitment to discovery and innovation has propelled the college's name recognition beyond the state and region.

"Being ranked in the top quarter of colleges and schools of pharmacy is a tremendous testament to the impact of our graduates, students, and faculty," she said. "The College of Pharmacy has a rich history of excellence that makes for a robust professional practice environment in Arkansas. UAMS graduates also are strong pharmacy advocates and leaders on the national stage."

College of Nursing

The UAMS College of Nursing also received recognition for its graduate programs. The college's Doctor of Nursing Practice (DNP) program ranks 41st in the nation, up from 52nd the year before. It is the state's only DNP program included in the top 100. The college's Nurse Anesthesia program, which welcomed its first students in 2020, climbed 31 places to No. 49.

"I'm so proud of all the staff and faculty members who ensure that the Doctor of Nursing Practice program continues to put our students on the path to success

in advanced nursing practice and leadership roles," said Sarah Rhoads, Ph.D., DNP, dean of the College of Nursing. "The Nurse Anesthesia program was only established a few years ago, but it has already distinguished itself as a top-tier training ground for aspiring nurse anesthetists in Arkansas."

College of Health Professions

The UAMS College of Health Professions had multiple programs represented in this year's rankings, including the Physical Therapy program at 72nd and the Speech Language Pathology program at 104th. The college's

Occupational Therapy program, jointly offered by UAMS and the University of Arkansas in Fayetteville, made a significant jump in the rankings, rising 36 spots to No. 59.

"We are proud of the continued recognition of our Occupational Therapy, Physical Therapy, and Speech-Language Pathology programs," said Susan Long, Ed.D., dean of the College of Health Professions. "These rankings reflect the dedication of our faculty and the caliber of our students, as well as our

ongoing commitment to excellence in education and to preparing graduates who will lead and serve across the health professions."

Fay W. Boozman College of Public Health

The UAMS Fay W. Boozman College of Public Health is 74th among the nation's public health programs and the only Arkansas program included in the top 100. Mark Williams, Ph.D., dean of the College of Public Health, said the ranking reflects the college's dedication to education, research, and service.

"What is most important is the experience we provide for our students," he said. "They are well prepared to positively impact the health of our communities through public health practice and science."





Dr. Juan Pablo Rivera

Baptist Health On-Site Endocrinology Clinic Welcomes Dr. Juan Pablo Rivera

Baptist Health On-Site Endocrinology Clinic recently welcomed Dr. Juan Pablo Rivera, who specializes in general endocrinology and is board-certified by the American Board of Internal Medicine.

Dr. Rivera earned his Doctorate of Medicine from Universidad Internacional del Ecuador and completed his internal medicine residency at Steward Carney Hospital/Tufts University School of Medicine. He finished a fellowship in clinical and molecular endocrinology at Case Western Reserve University Hospitals Cleveland Medical Center.

Dr. Rivera’s practice philosophy is evidence-based, focusing on a patient-centered approach to create tailored treatment plans for each individual’s needs. He provides diagnostic evaluation and treatment for adult endocrine and metabolic conditions such as Type 1 and 2 Diabetes Mellitus, lipid disorders, thyroid and parathyroid pathology, adrenal disorders, pituitary disorders and osteoporosis.

Baptist Health On-Site Endocrinology Clinic is located at 9600 Baptist Health Drive, Suite 100, in the Doctor’s Park building on the campus of Baptist Health Medical Center-Little Rock. It is open Monday through Friday from 8 a.m. to 5 p.m.

For more information about Dr. Rivera and the services he provides at Baptist Health On-Site Endocrinology Clinic, visit Baptist-Health.org or call (501) 202-4705.

UAMS Names Paul Stover, MBA, Vice Chancellor for Institutional Support Services

The University of Arkansas for Medical Sciences (UAMS) named Paul Stover, MBA, as its next vice chancellor for Institutional Support Services, overseeing the institution’s Campus Operations and Department of Public Safety.

“Paul will do a wonderful job in this new role,” said C. Lowry Barnes, M.D., chancellor of UAMS. “I have worked closely with him since the day I arrived at UAMS 12 years ago, and I hope to work with him as long as I am here.”

Stover joined UAMS in 2000 as a patient representative and has served in many roles since then, including as a clinical director, a department administrator, and the College of Medicine’s assistant dean for administration. For the past five years, he has been assistant vice chancellor for clinical operations, providing oversight for several areas including The Orthopaedic and Spine Hospital at UAMS; musculoskeletal, spine, and women and infant clinical services; the Department of Orthopaedic Surgery and Rehabilitation; and the Department of Obstetrics & Gynecology.

Stover earned a Bachelor of Science degree in Health Services Administration and a Master of Business Administration from the University of Central Arkansas.

In 2019, Stover received the College of Medicine Staff Excellence Award for Administration. His achievements



Paul Stover, MBA

before and after receiving that award are many.

He helped with the planning and design of the UAMS Health Women’s Center in midtown Little Rock. He also had a key role in the planning, design, and opening of various orthopaedic clinics in the metro area.

He was deeply involved in the planning and design of The Orthopaedic and Spine Hospital. Since it opened in 2023, he has been actively involved with the operations of the four-story hospital, which has more than 158,000 square feet dedicated to orthopaedic surgery, spine care, and pain management.

Stover also played a vital role in the expansion of orthopaedics in Northwest Arkansas. That included UAMS assuming the lease on the clinic on Van Asche Loop in Fayetteville, and the development and opening of a second clinic location in Lowell, which just moved to an even larger facility in Bentonville. He has been instrumental in planning The Orthopaedic & Sports Medicine Hospital in Springdale, which is slated to open in 2027.

CARTI Earns URAC Accreditation for Specialty Pharmacy

CARTI is now home to a URAC-accredited Specialty Pharmacy. Offering prescription pharmaceutical delivery across the state, the prestigious designation reflects the not-for-profit provider's dedication to expanding patients' access to trusted, high-quality care.

"For 50 years, we have walked alongside patients for every step of their journeys, including helping them navigate complex medical treatments safely and effectively," said Misti Harvey, PharmD, FACHE, CARTI's executive vice president and chief clinical officer. "This URAC accreditation is a testament to our team's efforts to ensure treatment remains not only accessible but also manageable for those facing cancer."



ACCREDITED
Specialty Pharmacy
 Expires 4/1/2029

URAC is the independent leader in promoting health care quality by setting high standards for clinical practice, consumer protections, performance measurement, operations infrastructure and risk management. Its accreditation process validates compliance with nationally recognized health care standards and supports improvements and innovation in long-term care management and service delivery.

"This achievement demonstrates CARTI's excellence in pharmacy operations, product handling, patient education and patient management," said URAC's president and CEO Shawn Griffin, M.D.

"When an organization achieves URAC accreditation, it demonstrates a commitment to improving quality of care, which is important to patients, providers and payers."

UAMS, University of Arkansas-Fort Smith Forge Agreement to Expand Health Care Education Pathways

The University of Arkansas for Medical Sciences (UAMS) and the University of Arkansas-Fort Smith (UAFS) have entered into a formal Memorandum of Agreement designed to create clear, accelerated pathways for UAFS graduates pursuing careers in health care.

The agreement covers 14 UAMS programs across four colleges and offers qualifying UAFS students guaranteed interviews, priority application review, or automatic admission.

"We greatly value this partnership and look forward to continued collaborations to create seamless pathways for students to advance their health care careers after completing their degree at UAFS," said Tina Maddox, Ph.D., RD, associate provost at the UAMS Northwest Regional Campus, who led development of the agreement.

The agreement spans UAMS programs in the College of Health Professions, College of Pharmacy, College of Nursing, and Fay W. Boozman College of Public Health. Participating programs include degrees in cytology, medical laboratory sciences, respiratory care, speech language pathology, audiology, physical therapy, pharmacy, nursing, public health, health administration, health care data analytics, and doctoral research programs.

"UAFS plays an important role in preparing the future health care workforce, both through the programs on our campus that put nurses, surgical technicians, and more into the workforce, and through our partnerships with institutions like UAMS, where our graduates take the next step toward medical degrees," said UAFS Chancellor Terisa Riley, Ph.D. "Our faculty prepare UAFS graduates by building strong academic foundations early, and this agreement ensures those talented students have a clear path forward toward the next stage in their education."

Depending on the program, eligible UAFS students who meet specified GPA and prerequisite criteria will receive one of three levels of enhanced admissions consideration: a guaranteed interview, priority application review that bypasses standard prescreening, or automatic admission.

The collaboration was initiated through conversations between UAMS Northwest Regional Campus leadership and UAFS Chancellor Terisa Riley, Ph.D., and UAFS Provost Shadow Robinson, Ph.D. The agreement is supported by 14 programs across UAMS, reflecting broad institutional enthusiasm for the initiative.

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UAMS, University of Arkansas-Fort Smith Forge Agreement to Expand Health Care Education Pathways

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"We are incredibly grateful for the opportunity and the partnership," said Ryan Cork, MSHA, vice chancellor of the UAMS Northwest Region. "This agreement reflects our shared commitment to expanding access to health professions education and strengthening the health care workforce across Arkansas."

UAFS students wishing to benefit from the agreement must declare their intent to apply to a participating UAMS program by the relevant program's admissions deadline and obtain certification from a designated

UAFS faculty or staff member confirming they meet the eligibility criteria.

"The significance of this agreement extends far beyond admissions," Riley said. "Many of the students who start at UAFS go on to become the providers, practitioners, and health care leaders who serve this region. Creating stronger pathways for their success is one of the most influential ways we invest in healthier communities and a stronger future for western Arkansas and the state as a whole."

CARTI Announces Physician Leadership Transitions

Following decades of dedicated service to patients, Scott Stern, M.D., CARTI's chief medical officer (CMO), will retire. Matthew Hardee, M.D., Ph.D., current medical director of radiation oncology, will assume the CMO role on July 1.

"The role of a physician-leader is one of the most challenging jobs in health care," said Adam Head, CARTI's president and CEO. "I am thankful to have had the opportunity to work alongside someone with the professionalism, character and mission-mindedness of Dr. Stern, along with other CARTI physician leaders who are not only incredibly skilled in their craft but willingly bear the weight of responsibility for others."

Ron Kuhn, M.D., and Donald Norwood, M.D., will transition from their roles as medical directors of urology and imaging, respectively, to focus fully



*Grace Raja, M.D.,
medical oncology (July 1)*



*Jonathan Pagan, M.D., M.S.,
radiation oncology (July 1)*



*David Hays, M.D., imaging
(April 1)*



*John Brizzolara, M.D.,
F.A.C.S., urology (April 1)*



*Yara Robertson, M.D.,
F.A.C.S., surgery (current)*



*Sam Makhoul, M.D.,
research (current)*

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CARTI Announces Physician Leadership Transitions

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on patient care. CARTI also recognizes Rhonda Gentry, M.D., for her nine years of leadership as medical director, during which she played an instrumental role in the medical oncology program's unprecedented growth.

In addition to Dr. Hardee as CMO, CARTI's physician leadership team will now include the following medical

directors: Grace Raja, M.D., medical oncology (July 1); Jonathan Pagan, M.D., M.S., radiation oncology (July 1), David Hays, M.D., imaging (April 1), John Brizzolara, M.D., F.A.C.S., urology (April 1), Yara Robertson, M.D., F.A.C.S., surgery (current) and Sam Makhoul, M.D., research (current).

UAMS Receives Initial Accreditation for Preventive Medicine Residency Program

The University of Arkansas for Medical Sciences (UAMS) has received initial accreditation from the Accreditation Council for Graduate Medical Education to form the Dr. Joseph H. Bates Preventive Medicine Residency Program, a blend of public health and general preventive medicine.

It will be the only preventive medicine residency program in Arkansas.

Recruitment will begin this fall with a class of two residents per year expected to start July 2027. The residents will complete the Master of Public Health program in the UAMS Fay W. Boozman College of Public Health as part of their residency curriculum.

The residency program's mission is to train physicians in public health to prevent disease and improve health for Arkansans at individual and population levels. The program will work toward eligibility for American Board of Preventive Medicine certification in the specialty of public health and general preventive medicine after completing residency training. The program will also help connect trainees with potential areas of practice.

The new program is a joint venture between the Arkansas Department of Health, the UAMS College of Medicine's Department of Family and Preventive Medicine, and the UAMS College of Public Health. It is funded by the Arkansas Department of Health through state tobacco tax dollars.

"This is a big step toward bridging the chasm between medicine and public health in Arkansas," said Bala Simon, M.D., founding director of the residency program. "Physicians trained in preventive medicine are well-equipped not only to address individual patient care but also to address the policy, system, and environmental issues that hinder the health of the population."

Simon is also the deputy chief medical officer with the Arkansas Department of Health and an associate professor with the UAMS College of Medicine and College of Public Health.

"The program and its accreditation are a testament of our efforts to build a bridge between health care and public health in Arkansas," said Shashank Kraleti, M.D., chair of the Department of Family and Preventive Medicine.

Mark Williams, Ph.D., dean of the UAMS College of Public Health, added, "This is an exciting opportunity for UAMS College of Public Health to engage in graduate medical education and to train future public health physician leaders of Arkansas."

Molly Gathright, M.D., the executive associate dean of graduate medical education at UAMS, said the new residency will help Arkansas' communities meet the public health challenges they face.

"The accreditation of the Dr. Joseph H. Bates Preventive Medicine Residency Program reflects UAMS' continued leadership in graduate medical education and our commitment to training physicians who can meet Arkansas' evolving health needs," she said.

The Dr. Joseph H. Bates Preventive Medicine Residency Program is named in memory of Joseph H. Bates, M.D., M.S., an internationally known tuberculosis researcher, pulmonologist, and proponent of preventive medicine for more than 50 years. He was vice chair of the UAMS Department of Internal Medicine, chief of medical services for the Central Arkansas Veterans Healthcare System, deputy state health officer at the Arkansas Department of Health, and associate dean for public health practice at the UAMS College of Public Health.

Mayor Frank Scott, Jr. Recognizes CARTI's 50 Years of Impact

Mayor Frank Scott, Jr. joined CARTI leadership, physicians and team members today to recognize the not-for-profit provider's 50 years of impact. Since its establishment in 1976, CARTI has expanded from a radiation-focused practice to a comprehensive statewide network of care, serving more than 60,000 patients annually.

"For 50 years, it has been our privilege to walk alongside those facing some of life's most difficult moments," said Adam Head, president and CEO. "While this milestone is significant, our focus remains forward: continuing to expand access to care across our state."



During the event at CARTI's flagship campus in Little Rock, Mayor Scott presented Adam Head with a proclamation celebrating CARTI's continued contributions to advancing cancer care in Arkansas. Photos and b-roll from the event are available for download [here](#).

Heather Grigsby, APRN of Baptist Health Family Clinic in Malvern Honored

Heather Grigsby, APRN of the Baptist Health Family Clinic in Malvern, was selected as the Hot Spring County

Health Care Worker of the Year. She was recognized at the Chamber of Commerce Banquet on April 30th. The Chamber Board selected her for her diligence in serving the community and compassionate patient care.



Picture Left to Right: Andi Whitman with Farmers Bank, Heather Grigsby, Ashlee Stafford of Stafford Realty, and Lance Howell Hot Springs County Chamber of Commerce. Not pictured Danny Riggan.