



MISSION CONCIERGE CARE

Dr. B. Grant Marshall · Titusville, FL



The Month of Fathers, Health & Human Connection

June arrives with intention. It's the month we celebrate the fathers who show up, the survivors who push through, and the health we owe it to ourselves to protect.

Observation	When	Why It Matters
Father's Day	Jun 15, 2026	Honoring the men who guide and protect
Men's Health Month	All June	Empowering men to up for their own health.
CPR & Automated External Defibrillator (AED) Week	June 1–7	Know what to do in those critical seconds
National Cancer Survivors Day	First Sunday in June	Resilience deserves recognition
World Blood Donor Day	Jun 14, 2026	A small act. A life saved.
World Sickle Cell Day	Jun 19, 2026	Understanding a disease that deserves more attention
National HIV Testing Day	Jun 27, 2026	Know your status. Own your health.

Message from Dr. B. Grant Marshall



Newsletter Highlights

A MESSAGE FROM DR. B. GRANT MARSHALL

CELEBRATING THIS MONTH: FATHERS, SURVIVORS & DONORS

MONTHLY FOCUS: MEN'S HEART HEALTH — WHAT THE RESEARCH SAYS

UNDERSTANDING CHOLESTEROL & DYSLIPIDEMIA

HEART-HEALTHY RECIPE: GREEN TEA BERRY BANANA SMOOTHIE

MONTHLY FITNESS: JUNE MOVEMENT — YOGA FOR MIND & BODY | QUOTE OF THE MONTH

June is the month we pause and ask the men in our lives a simple question: Are you okay? Not just physically. Truly okay.

Men's Health Month is a reminder that men are statistically less likely to schedule a doctor's visit, less likely to name a symptom before it becomes urgent, and more likely to push through warning signs that deserve attention. I have seen this pattern throughout my career, and I am committed to changing it, one conversation at a time.

This month we cover what matters most for men's health: cholesterol, heart disease risk, and the lifestyle choices that carry the greatest impact. We also recognize the awareness moments June brings, from CPR Week to World Blood Donor Day to International Yoga Day, because health is never just one thing. It is everything working together.

To every father reading this: taking care of yourself is not optional. It is the greatest gift you can give your family.

My door and my phone are open. Do not wait until something feels urgent to reach out.

Dr. B. Grant Marshall

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Celebrating This Month

To Every Father. To Every Survivor. To Every Donor.

Father's Day — June 15

Fatherhood is not a title. It is a daily decision to show up. To protect. To guide. To stay. This Father's Day, we celebrate the men who take that responsibility seriously and we remind them: you cannot pour from an empty vessel. Your health matters, too.

National Cancer Survivors Day — First Sunday of June

To every patient who heard the words no one wants to hear - and kept going. Your resilience is not just personal; it is powerful. Cancer Survivors Day is a reminder that survivorship is its own journey, and one that deserves ongoing support, monitoring, and celebration.

CPR & AED Awareness Week — June 1-7

Ninety percent of cardiac arrests that happen outside of a hospital are fatal. That number drops dramatically when bystander CPR is performed immediately. This week, we ask a simple question: Do you know what to do in those critical first minutes? If the answer is no, it's worth finding out. It could be the most important thing you ever learn.

World Blood Donor Day — June 14

One donation can save up to three lives. Blood cannot be manufactured. It can only be given. If you are eligible, consider rolling up your sleeve this month. And if you have questions about whether blood donation is appropriate for your health situation, that is exactly the kind of conversation we have here.

World Sickle Cell Day — June 19

Sickle cell disease affects millions worldwide, with a disproportionate impact on Black communities. It is a condition that is still widely misunderstood and undertreated. On this day, we pause to increase awareness, extend compassion, and remember that every patient living with sickle cell deserves more than symptom management, they deserve to thrive.

National HIV Testing Day — June 27

Knowing your status is one of the most powerful acts of self-care. HIV is now a manageable condition with early detection and proper care. There is no shame in knowing — only in not knowing. If you have questions or would like to discuss testing as part of your preventive care, please reach out. It is a conversation worth having.

Men's Heart Health: What You Need to Know

Heart disease is the leading cause of death in men in the United States and unlike many conditions, most of its major risk factors are both detectable and addressable.

Here is what every man, and the people who love them should know:

- **Men experience heart attacks younger.** On average, men develop coronary artery disease about a decade earlier than women. The classic symptoms - chest pressure, left arm pain, shortness of breath are more typical in men, but that doesn't mean they always recognize them as cardiac in nature. Know the signs.
- **Cholesterol is not just one number.** Total cholesterol, LDL (the harmful kind), HDL (the protective kind), and triglycerides all tell different parts of the story. A borderline number in one area can be meaningfully offset or compounded by others. If you have not reviewed your full lipid panel recently, that conversation belongs in your next visit.
- **Blood pressure is the silent threat.** Hypertension often has no symptoms, until it does. Men are less likely than women to have their blood pressure treated aggressively. If yours is elevated, we need to talk sooner rather than later.
- **Lifestyle choices compound quickly.** Smoking, excessive alcohol, poor sleep, high stress, and a diet heavy in processed foods accelerate cardiovascular aging. The good news: the body responds faster to positive changes than most people expect.
- **Men don't always ask for help.** This may be the most dangerous risk factor of all. Delaying care, normalising symptoms, and pushing through discomfort are patterns that cost lives. Concierge medicine exists precisely to make it easier to have these conversations early and often.

If you have questions about your cardiovascular risk — whether you're 35 or 75 — please reach out. This is exactly the kind of conversation that belongs in a longer visit.



Understanding Your Cholesterol: What the New Guidelines Actually Mean for You

The American Heart Association recently released updated clinical guidelines on how doctors should evaluate, manage, and monitor cholesterol and related conditions - a category called dyslipidemia. It is a document written for physicians. Here is what it means for you, in plain language.

So what is dyslipidemia, exactly?

Dyslipidemia is a catch-all term for abnormal levels of cholesterol or fats in the blood. This includes high LDL (often called 'bad' cholesterol), low HDL ('good' cholesterol), high triglycerides (blood fats), and elevated lipoprotein(a) — a lesser-known particle that some people carry at high levels due to genetics alone.

Why does this matter?

These fats, when out of balance, can gradually build up in the walls of your arteries, a process called atherosclerosis. Over time, this narrows the arteries and increases the risk of heart attack and stroke. The tricky part? It rarely causes any symptoms until significant damage has already occurred.

What the new guidelines emphasize

- It's not just LDL anymore. While high LDL remains a key risk factor, the guidelines now place greater emphasis on lipoprotein(a), a particle that traditional cholesterol panels often miss. Ask your doctor if you have ever had your Apo B checked.
- Risk is personal. The guidelines stress that treatment decisions should be based on your full cardiovascular risk picture, not just one number. Age, family history, blood pressure, diabetes status, and lifestyle all factor in. This is exactly why a one-size-fits-all approach does not work.
- Statins remain highly effective, but they are not the only tool. Newer medications, dietary interventions, and newer drug classes (like PCSK9 inhibitors) are now part of the picture, particularly for patients with very high risk or those who do not tolerate statins well.
- Diet and lifestyle are not optional footnotes. The guidelines reinforce that a heart-healthy diet rich in vegetables, whole grains, lean protein, and healthy fats, meaningfully reduces cardiovascular risk. This is not a supplement to medication. In many cases, it is the medicine.

What should you do with this information?

Know your numbers. A full lipid panel, including LDL, HDL, triglycerides, and ideally Apo B gives a complete picture. If you have not had one recently, or if your numbers have been in the borderline zone for years without a clear plan, it is time to have a real conversation.

At Mission Concierge Care, that conversation is never rushed. We look at the full picture — and we help you understand what it means for your life, not just your chart.

Heart-Healthy Recipe -

From the American Heart Association Kitchen

This month's recipe is built for a Florida June — refreshing, nourishing, and loaded with antioxidants that actively support cardiovascular health.



Green Tea Berry Banana Smoothie

Ingredients

- 3 cups water
- 8 single-serving bags green tea
- 16 oz frozen mixed berries (about 3 cups)
- 2 medium bananas, peeled, halved, and frozen
- 1 cup fat-free plain Greek yogurt
- 2 tsp fresh grated gingerroot (optional)
- 2 tsp vanilla extract (optional)
- 2 tsp chia seeds or flax seeds (optional)

Directions

1. Bring water to a boil. Remove from heat, add tea bags, steep 4 minutes. Discard bags. Let cool 30 minutes, then refrigerate 2 hours until chilled.
2. In a blender or food processor, combine chilled tea, berries, banana, yogurt, gingerroot, and vanilla. Blend until smooth.
3. Pour into four glasses. Sprinkle with chia or flax seeds if using. Serve immediately.

Nutrition Facts (per serving)	
Calories	136
Protein	8g
Dietary Fiber	5g
Total Carbohydrate	29g
Total Fat	1g
Sodium	23mg

June Movement: Cardio for Heart Health

June is Men's Health Month, and there's no better time to take the American Heart Association's guidance to heart — literally. Only about one in five adults get enough exercise to maintain good health. The good news? It doesn't have to be complicated.

Science has linked being inactive and sitting too much with higher risk of heart disease, type 2 diabetes, colon and lung cancers, and early death. Regular aerobic activity is one of the most powerful tools you have — and the evidence behind it is strong.

The AHA Target: At least 150 minutes per week of moderate-intensity aerobic activity or 75 minutes per week of vigorous aerobic activity, or a combination of both, preferably spread throughout the week.

Week 1 — Start Moving	Brisk walking (at least 2.5 mph), water aerobics, or cycling slower than 10 mph. 30 minutes, 5x this week. You should be able to talk but not sing — that's your zone.
Week 2 — Build the Habit	Add a 6th active day. Add moderate- to high-intensity muscle-strengthening activity such as resistance or weights on at least 2 days per week
Week 3 — Push Harder	Vigorous activities include running, swimming laps, cycling 10 mph or faster, or jumping rope. Aim for 2 x 20-minute vigorous sessions this week.
Week 4 — Hit Your Target	Hit 150+ minutes of moderate or 75+ of vigorous this week. Track your resting heart rate — it should be trending down.

If you have a chronic condition, cardiovascular history, or are just getting started, please reach out before beginning. Dr. Marshall can help you build a plan that meets AHA guidelines safely for your specific situation.

Fathers, do not exasperate your children; instead, bring them up in the training and instruction of the Lord.
— Ephesians 6:4

Quote of the Month
“One father is more than a hundred schoolmasters.”
— George Herbert

Have a question from this newsletter? Noticed something worth discussing at your next visit? Dr. Marshall is a text or call away — that's the whole point of being a Mission Concierge Care member.

Schedule a Visit or Reach Out

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