

# Tamanna Nahar, MD, MBA, FACC, FASE

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*Academic Medicine ■ Hospital Administration*  
*Director Noninvasive Labs ■ Interventional Cardiology ■ Telemedicine*  
*Clinical Trials ■ IRB Committee ■ Faculty Mentorship ■ Risk Management ■ Quality Assurance ■ Expert Witness ■ Utilization Review*  
*Remote Imaging Review ■ Clinical Content Development Review ■*

I am a board certified well rounded cardiologist with a broad range of skills spanning over 20 years. My experience has encompassed academic and clinical medicine with a focus on noninvasive cardiology for the past 23 years at premier Institutions. I have strong leadership and mentorship skills in addition to budgeting and revenue cycle management. I have been a Co-PI for Phase 2 and 3 clinical trials for Ultrasound Enhancing Agents and participated in clinical trials for various antihypertensive, lipid lowering, oral anticoagulant and heart failure drugs. In addition to serving as a Co-PI for Phase 3 trials for PFO/ASD device deployment trials. My expertise includes formulating and reviewing IRB protocols and serving on CRO committees.

## EXPERIENCE

### **1/2017- present: HDD Cardiovascular, LLC**

#### **Exchange Health (Former McKesson)**

Knowledge Consulting - Clinical content development reviewer

#### **R3Continuum**

Knowledge Consulting - SME

#### **Carnegie Hill Cardiovascular**

Remote noninvasive image interpretation: Echocardiograms, Peripheral LE and UE Arterial and Venous Duplex, Carotid Duplex, Renal Arterial Duplex. Nuclear stress tests, Stress echocardiograms. Level 2 CTA trained.  
Clinical Cardiology Consultations.

### **1/2016-present: Cardiosolution, LLC Cardiology,**

#### **Consultant**

Noninvasive and Interventional Cardiology

### **7/2013-present: Evicore (Formerly Carecore National), Bluffton, SC**

#### **Cardiology - Medical Director**

UM reviews URAQ, LCD, NCD guidelines

### **3/2016-7/2018: Harlem Hospital, Columbia Affiliate, NY, NY**

#### **Associate Chair, Medicine**

#### **Faculty, Cardiology Clinical Assistant Professor, CUMC, NY, NY**

Ensured patients received the highest quality treatment possible by hiring, evaluating, and training new physicians.  
Chaired various Alliance committees, including but not limited to Clinical Quality Improvement Committee (CQIC), Peer Review and Credentialing Committee (PRCC), Physicians Advisory Group (PAG), Quality Improvement Work Group (CQIW), Network Hub, Benefit Hub, Policy Hub, Utilization Management Committee (UMC), Utilization Management Work Group (UMWG), RCM, Reassignment Committee, Appeals and Grievances Committee, Compliance Committee, etc.  
Writing and implementing a quality improvement plan that addresses Patient Safety and QI activities, such as physician peer review, chart reviews for quality monitoring, implementing mandatory quality initiatives, such as those for central line infections and DVT prophylaxis, initiating QI projects using QI models such as PDSA, performing root cause analyses for serious errors or sentinel events; Monitoring public reporting (PressGaney, HealthGrades, LeapFrog and others);  
Promoted research initiatives and developed mentorship tracks for residents to avail advance training. Participated in drug and imaging trials for cardiovascular as well as renal disease and ICU patients,  
Directed house staff to collaborate with study coordinators and statisticians for data review. Served on CR and RM committees.  
Provided clinical support to the Pharmacy Department drug utilization management process including practitioner interface as appropriate and looked over all denials; and assisted in the pharmacy benefit manager (PBM) and pharmacy consulting services relationships including the PBM request for proposal process (RFP).  
Developed, oversaw, and improved the residency or fellowship program, according to a set of responsibilities articulated in the ACGME Common Program Requirements, Section II. Promoted research initiatives and developed mentorship tracks for residents to avail advance training.

### **9/2014 – 11/2015: Texas Tech University Health Sciences Center, El Paso, Tx.**

#### **Director, Noninvasive services; Interventional Cardiology Faculty**

Performance Improvement projects to improve workflow, quality of patient care. Developed and Initiate stress echocardiogram and 3D program. Served on CR and RM committees. Fellow, staff education. Maintained interventional practice.

### **5/2014 - Present: Healthtap**

## *Telemedicine Consulting*

### **9/2012 - 9/2014: Columbia Presbyterian Medical Center, NY NY**

#### **Echo lab Attending Physician**

Pre and post TAVR follow-up, ECMO, LVAD, RVAD assessment. Mentor Fellows rotating in the echolab.

### **6/2010 - 9/2011: Harlem Hospital, Columbia Affiliate, NY NY**

#### **Chief of Cardiology**

Harlem hospital cardiology division faced threat of losing 'conditional participation' and closure of the Cardiology division.

Revamped the Cardiology division from the ground up - This required strong management skills with a firm clinical base.

CMS survey – daily meetings with CMS and RM staff to help take the hospital off the 'radar'; preparation for JCAHO survey. Assisted with Utilization Review; participate in 'tracers'. Prepared all new cardiology division P&P; Research, teach and implement appropriateness of cardiac testing; Work flow optimization/QA across all disciplines for all MD and non-MD staff; budgeting. Identified and implemented Cardiology PQRI. Lead staff of 15-20.

Participated in drug and imaging trials for cardiovascular as well as renal disease and ICU patients,

Collaborated with the ICU team in coordination with the FDNY/DOH to develop a Hypothermia protocol.

Directed the houses staff in collaboration with study coordinators and statisticians for data review and ultimate publication. I am also abreast with formulating and reviewing IRB protocols. Served on CR and RM committees.

Formed allies across disciplines to increase cardiology revenues; help build community awareness.

Held clinical and academic responsibilities. OP, CCU, IP service rounds; reading and performing noninvasive test, house staff teaching.

### **1/2006 – 4/2010: Bronx-Lebanon Hospital Center, Bronx, N. Y.**

#### **Director of Echocardiography/Faculty Cardiology Albert Einstein School of Medicine, Assistant Professor of Medicine**

Directed the Echo Lab. ICAEL certification. Lead staff of 5-10

Organized patient flow in the Echo laboratory. Identified and implemented Cardiology PQRI incentives. Work flow optimization/QA

JCAHO preparation; assist with Utilization Review

Developed vascular protocols. Stayed abreast with clinical as well as academic responsibilities. Outpatient, CCU, Consult service rounds; noninvasive testing (including nuclear procedures), house staff teaching.

Participated in multiple Phase 3 and 4 Heart Failure and hypertensive drug trials. Formulated IRB protocols / publications with colleagues.

Presentations / Chair grand rounds and national/international meetings. Coordinated and directed fellow conferences.

Develop curriculum for Cardiology Fellows and actively participate in the IM Residency Program.

### **5/2005 – 9/2005: Crystal Run Healthcare, Middletown, N. Y.**

#### **Cardiology (Multi Specialty practice)**

Left due to excellent offer with administrative duties, teaching and research at Bronx Lebanon Hospital.

### **5/2003 – 5/2005: Gramercy Park Cardiology, New York, N. Y.**

#### **Non invasive Cardiologist – Group Practice**

Managed Echo laboratory at Cabrini Hospital. Coordinated work flow and QA with Chief Sonographer. Taught Residents / sonographers.

Held some clinical as well as academic responsibilities. Outpatient, CCU, Consult service rounds; reading and performing noninvasive test, house staff teaching.

### **5/2002 – 4/2003: Hahnemann University, Philadelphia, Pa.**

#### **Associate Director Echo Lab / Assistant Professor of Medicine / Faculty MCP**

Co-direct the Echo lab. Organizing structure, functionality and workflow. Leading staff of 5-7

Abreast with clinical as well as academic responsibilities. Outpatient, CCU, Consult service rounds; reading and performing noninvasive test, house staff teaching; performing ICE. co-PI for Phase 2 and 3 Contrast drug trials for Ultrasound Enhancing Agent drug trials. co-PI for Phase 3 trials for PFO/ASD device deployment trials. Served as a critical member of CRO for above trials. Formulated and reviewed IRB protocols. Researched publications with colleagues. Presentations/Chair grand rounds and national/international meetings. Coordinated and directed local, national and international conferences. Key member for CORE lab for clinical UEA trials.

### **10/1997 – 5/2002: Mount Sinai Medical Center, New York, NY**

#### **Assistant Professor of Medicine / Assistant Director, Echo Lab**

co-PI for Phase 2 and 3 Ultrasound Enhancing Agent drug trials. Participated in multiple anti hypertensive oral anticoagulant and lipid lowering drug trials. Served as a critical member of CRO for above trials. Formulated IRB protocols and published with colleagues.

Presented at major national and international meetings. Abreast with clinical as well as academic responsibilities. Outpatient, CCU, telemetry, Consult service rounds; reading and performing noninvasive test, house staff teaching. Attending schedule preparation

Leading in direct patient care during outpatient/IP sessions. Key member for CORE lab for clinical UEA trials.

## **EDUCATION:**

May 2009: Rutgers Business School, Newark, NJ Executive M.B.A.

July 1988: Ramaiah Medical School/Bangalore University, Bangalore, India M.B.B.S - M.D.

Dec 1982: Seton Hall University, Deans List, South Orange, N.J. Accepted to 4½y Medical School in India

### **POSTDOCTORAL TRAINING:**

9/1988 - 9/1989: M.S. Ramaiah Teaching Hospital, K.C. General Hospital, Bangalore, India Internship.

7/1990 – 6/1993: NYU Medical Center/NYVA, NY, N.Y. Internship/Residency

■ Research coordinator for multiple trials.

7/1993 – 6/1994: St. Vincent's Medical Center/Yale Univ, Bridgeport, Ct. Cardiology Fellow

7/1994 – 6/1996: N.Y. Hospital / Cornell Univ Medical Center, NY, N.Y. Cardiology Fellow

7/1996 – 6/1997: Columbia Presbyterian Medical Center, Echocardiography, CUMC, NY, NY

■ Clinical/Research Fellow Participated as a research coordinator and data acquisition for multiple trials. Actively participated in CR meetings

9/2011 - 8/2012: SUNY Downstate/Brooklyn, NY Interventional Cardiology Fellowship

### **CERTIFICATION / LICENSURE**

Education Committee, Foreign Medical Graduate (Part I & II); Federation of Licensure Examination;

ABIM-Internal Medicine (1995 not recertified); ABIM-Cardiovascular Disease; ASE; ASNC

PA – MD417942; New York - 193779; New Jersey - 25MA07693700; Texas – Q0129; Florida - ME118111; Kentucky; NPI 1174542575

### **PUBLICATIONS**

1. T. Nahar, R.B. Devereux. Hypertension, cardiac hypertrophy and the effects of anaesthesia. In: Balliere's Clinical Anaesthesiology: Arterial Hypertension. London:Balliere-Tindall:11(4)675-703,1997
2. M.T. Savoia, T. Nahar, M.R. DiTullio, S. Homma. Transesophageal echocardiography guided transvenous biopsy of a cardiac sarcoma. J Am Soc Echocardiogr, 10(7):752-755, 1997.
3. T. Nahar, S. Homma. Echocardiography and selected mitral valvular diseases. Amadeus CD ROM 1997.
4. J. Umana, T. Nahar, S. Homma, M. Oz, "Bow-tie" mitral valve repair: An adjuvant technique for mitral regurgitation. Ann Thorac Surg, 7(2):115-120, 1997.
5. J. Umana, T. Nahar, S. Homma, M. Oz. "Bow-tie" mitral valve repair successfully addresses subvalvular dysfunction during ischemic mitral regurgitation. Surgical Forum, Vol. XLVII:279-280, 1997.
6. J P Umaña, B Salehizadeh, J J DeRose Jr, T Nahar, A Lotvin, S Homma, M C Oz. "Bow-tie" mitral valve repair: an adjuvant technique for ischemic mitral regurgitation. Ann Thorac Surg. 1998 Nov ;66 (5):1640-6 9875764
7. T. Nahar, M.R. DiTullio, L.L. Schulman, S. Homma. Spontaneous resolution of pulmonary venous thrombosis after lung transplantation: a case report. J Am Soc Echocardiogr, 11(2):209-212, 1998
8. Nelson JE, Croft LB, Nahar T, Vorcheimer D. Evaluation of subclavian catheter position. J Cardiothorac Vasc Anaesth. 13(3):359-361, 1999.
9. Z. Fayad, T. Nahar, J. Badimon, M. Goldman, J. Fallon, J. Chesboro, V. Fuster. In-Vivo MR evaluation of atherosclerotic plaques in the human thoracic aorta: a comparison with transesophageal echocardiography. Circulation 101(21):2503-2509, 2000.
10. T. Nahar. Echocardiographic assessment of mitral regurgitation for mitral valve repair. J Indian Academy of Echocardiography. 5(1):24-28, 2000.
11. T. Nahar, L. Croft, R. Shapiro, S. Fruchtman, J. Diamond, M. Henzlava, J. Machac, S. Buckley, M. E. Goldman. Comparison of Four Echocardiographic Techniques for Left Ventricular Ejection Fraction. Am J Cardiol. 86:1358-1362, 2000.
12. P. Muscat, M. Lidov, T. Nahar, S. Tuhim, J. Weinberger. Vertebral artery dissection in Turner's syndrome: diagnosis by magnetic resonance imaging. J Neuroimaging 11(1):50-54, 2001.
13. B. Kuersten, T. Nahar, M.A. Vannan. Methods of contrast administration for myocardial perfusion imaging: continuous infusion versus bolus injection. Am J Cardiol. 2002 Nov 18;90 Suppl 10A:35J-37J.
14. T. Nahar, P. Li, B. Kuersten, S. Batra, M. A. Vannan. Detection of Resting Myocardial Perfusion Defects by SonoVue® Myocardial Contrast Echocardiography. Echocardiography, 20(6), 511–517, 2003.
15. A. Loyd, P. Gorodin, Z. Liu, N. Capozzoli, T. Nahar, J. Entwistle 3rd, M. A. Vannan. Delineation of intracardiac shunts using contrast echocardiography. J Am Soc Echocardiogr. 2003 Jul ;16 (7):770-3 12835665.
16. T. Nahar. Myocardial Contrast Echo: Current Status and Future Directions. Indian Heart J 2007; 59(3): 226–231.
17. M. Popp Switzer, S. Gosavi, T. Nahar, Medical Management of Type A Aortic Dissection in a Setting of Atrial Fibrillation. JACC Volume 67, Issue 13 Supplement Supplement 1239
18. **Carotid US 2018**
19. **Carotid Chapter 2018**
20. **Functional TR**
21. **FFR iFFR 2018**

### **Abstracts:**

1. M.R. DiTullio, R.L. Sacco, T. Nahar, S. Homma. Increased left atrial size is an independent risk factor for ischemic stroke. Stroke, 1997
2. M.R. DiTullio, R.L. Sacco, T. Nahar, S. Homma. Patent foramen ovale as a risk factor for ischemic stroke in multiethnic population. Stroke, 1997
3. M.R. DiTullio, T. Nahar, S. Homma, R.L. Sacco. Increased frequency of fibrinogen elevation in elderly stroke patients with large aortic arch atheromas. Cerebrovasc Dis, 7(suppl4):31,1997
4. M.R. DiTullio, T. Nahar, S. Homma. Association between left ventricular hypertrophy and ischemic stroke: effect of age, gender and race-ethnicity. Cerebrovasc Dis, 7(suppl4):67,1997
5. M.R. DiTullio, R.L. Sacco, T. Nahar, S. Homma. Left ventricular hypertrophy and other risk factors for ischemic stroke in an ethnically mixed community. Circulation, 96:1-1561,1997
6. M.R. DiTullio, R.L. Sacco, T. Nahar, S. Homma. Left ventricular hypertrophy and other risk factors for ischemic stroke in an ethnically mixed community. Circulation, 96:1-1561,1997
7. M.R. DiTullio, T. Nahar, R.L. Sacco, S. Homma. Association between protruding aortic atheromas and hypercoagulability in elderly stroke patients. Circulation, 96:1-570,1997
8. J. Umana, T. Nahar, S. Homma, M. Oz. The "bow-tie" mitral valve repair directly addresses subvalvular dysfunction in ischemic mitral regurgitation. Circulation 96(suppl 1):II-683,1997

9. J.Umana, T.Nahar, S.Homma, M.Oz. "Bow-tie" repair successful adjunctive to posterior ring annuloplasty in ischemic mitral regurgitation. *Circulation*, 96(suppl 1):I-731,1997
10. J.K.Roberts, T.Nahar, R.L.Sacco, S.Homma. Valvular strands and hypercoagulability in patients with cerebral ischemia. *Circulation*, 96:1-577,1997
11. Z.Fayad, T.Nahar, J.Badimon, M.Goldman, J.Fallon, J.Chesboro, V.Fuster. In- Vivo MR characterization of plaques in the thoracic aorta. *Circulation* 98:1-515;1998
12. AE. Schussheim, L.Croft, T.Nahar, M.Goldman. Anisotropy may create contrast echo myocardial perfusion 'pseudo-defects.'" *J Am Soc Echocardiogr* 11(5):527,1998
13. T.Nahar, L.Croft, A.Nahar, S.Buckley, M.Goldman. Power harmonic imaging is quantitatively superior to harmonic and triggered imaging for contrast myocardial perfusion imaging. *Circulation* 98:1-214;1998
14. ME Goldman, G Venkatraman, C Eng, S Buckley, T.Nahar, J Fallon, A Gass, M Shinnar, D Mehta, A. Nahar, P Santini, R Desnick. Quantitative analysis of coronary vasculopathy in patients with Fabry's disease by contrast echo myocardial perfusion. *JACC* 33:II(suppl 2);1179-127-456A,1999
15. T.Nahar, S Buckley, L Croft, E Stern, A Nahar, G Venkatraman, ME Goldman. Real time detection of myocardial perfusion defects with Power Harmonic Imaging. *J Am Coll Cardiol* 33:II(suppl 2);1058-108-414A,1999
16. T.Nahar, L Croft, R Shapiro, E Stern, S Buckley, A Schussheim, Milena Henzlova, J Machac, J Doucette, O David, C Soltero, D Gainza, T George, ME Goldman. Is non-contrast harmonic imaging a more rapid and convenient alternative enhanced fundamental imaging? *J Am Soc Echocardiogr*, 1999
17. T.Nahar, L Croft, R Shapiro, E Stern, S Buckley, A Schussheim, Milena Henzlova, J Machac, J Doucette, O David, C Soltero, D Gainza, T George, ME Goldman. Accurate quantitative echocardiography is achievable using harmonic imaging with contrast. *J Am Soc Echocardiogr*, 1999
18. T.Nahar, L Croft, R Shapiro, E Stern, S Buckley, J Doucette, J Machac, J Diamond, Milena Henzlova, S Fruchtman, E Stern, ME Goldman. Accurate quantitative echocardiography requires harmonic contrast imaging. *J Am Coll Cardiol* 35(2A):477, 2000
19. T.Nahar, L Croft, R Shapiro, E Stern, S Buckley, Milena Henzlova, J Machac, J Diamond, E Stern, ME Goldman. The qualitative and quantitative advantage of harmonic contrast echo. *J Am Coll Cardiol* 35(2A):461, 2000
20. LB Croft, JA Diamond, A VanTosh, S Horowitz, RA Phillips, S Buckley, T.Nahar, E Stern, A Schussheim, M Henzlova, J Machac, ME Goldman. Validation of quantitative myocardial flow reserve using contrast perfusion echocardiography by positron emission tomography and T1-201 SPECT imaging. *Circulation* 102:II-562, 2000
21. LB Croft, JA Diamond, S Buckley, RA Phillips, A VanTosh, S Horowitz, M Henzlova, J Machac, T.Nahar, ME Goldman. Detection of abnormal myocardial flow reserve by myocardial perfusion echocardiography: validation by positron emission tomography. *J Am Coll Cardiol* 415A, 2001
22. R Shapiro, A. Squire, N Glueck, T.Nahar, LB Croft, E Stern, ME Goldman. AHA guidelines for endocarditis antibacterial prophylaxis may be outdated in the era of high resolution echocardiography. *J Am Soc Echocardiography* 14(5):492, 2001

#### Invited Faculty:

1. International Update in Cardiology and Workshop in Echocardiography. 'Cardiac transplantation'. Bombay and Surat, India; December 24–26, 1997.
2. Update in Echocardiography. 'Mitral valve repair vs replacement: role of echocardiography.' New York, NY; June 15–19, 1998.
3. International Update in Cardiology and Workshop in Echocardiography. 'Contrast myocardial perfusion and power harmonic imaging'. Udaipur and Mumbai, India, February 1998
4. 2<sup>nd</sup> Update in Echocardiography. 'Echocardiographic assessment of mitral regurgitation for mitral valve repair.' New York, NY; April 12–16, 1999.
5. Fifth Annual Women's Conference. 'Women and heart disease'. World Trade Center, NY, NY; April 19, 1999.
6. Medical Grand Rounds. 'Stress Echocardiography'. Peninsula Hospital, NY; June 10, 1999.
7. American Society of Echocardiography. Moderator – poster session, Orlando, Florida; June 1999.
8. International Update in Cardiology and Workshop in Echocardiography; 'Cardiac source of emboli'. Rajkot and Mumbai, India; December 24 – 26, 1999.