My next entrepreneur interview was from my home town of Albany,NY, a friend of mine from high school who became a speech pathologist. Below is the description of Marina Kristel's speech pathology business in Niskayuna,NY, just outside Albany, quoted in her own words.

“The name of my corporation is Northeast Speech-Language Pathology, PC. I am located in Niskayuna New York. I began a private practice under my personal sir name in 1991, then incorporated under this aforementioned name in 2003. My mission is to reduce the incidence of aspiration pneumonia both in the community and in skilled nursing facilities. Aspiration pneumonia is the leading cause of death in skilled nursing facilities and the fifth leading cause of death in the elderly living  in the community.   
My services include evaluating and providing treatment for people with dysphagia (swallowing disorders) using Fiberoptic Endoscopic Evaluation of Swallowing (FEES).   
  
In 1995, New York State recognized licensed speech-language pathologists to include dysphagia in their scope of practice.  It had previously been recognized in the scope through the federal law (Medicare regulations) and American Speech-Language-Hearing Association.   
  
The FEES aspect of the business was initiated in 1999 with the business taking a bank loan and purchasing $24,000 worth of equipment. The corporation began expanding its territory to provide these exams in both NY & MA in 2011. Massachusetts was included in the expansion due to prime candidates/patients being held up in Trach & Vent facilities, where aspiration pneumonia is most prevalent. At this time, the business grew exponentially.  
  
The government, nor philanthropic contributions, nor any institutions helped to start up the company. This was started solely by the private practitioner.   
  
The challenges included convincing skilled nursing administrators and their medical directors (high ranking MDs) the benefits of this procedure versus their current means to address patients with dysphagia. Change is very challenging. Continuous research, marketing, making presentations within the medical community, while working & balancing a family has been the biggest challenge. Being a woman among a majority of male physicians, respiratory therapists & administrators is an added challenge. The few female physicians, nurse practitioners, and directors of nursing also often have presented themselves as very noncommittal & reserved, who are among the primary decision makers in the skilled nursing facilities.   
  
As the company grew during the past five years, doors opened for the opportunity to incorporate education and provide classes  to employees & direct care staff of the nursing home residents. This has been the optimal means for preventing aspiration pneumonia. Training the staff that feed and verbally redirect these residents simply on safe strategies to eat, drink, take medication, and prevent dental disease is the direct route to preventing the initial problem from starting and improving a condition caused by various medical diagnoses.   
  
The success of this company is not based on income. Success is reducing the incidence of aspiration pneumonia in the community and in skilled nursing facilities. The United States is spending $87 billion per year addressing aspiration pneumonia. Educating and assessing the swallow with this gold standard instrumental exam known as FEES, will enable the in-house Speech-language pathologist to know the physiology of their patients' swallow, the least restrictive diet texture and liquid consistency, what strategies are necessary in order to safely swallow, and what plan of treatment (including swallowing/strengthening exercises) are necessary.   
  
The beneficiaries of this success are the patients, both young and old, as well as the government's money (coming from both Medicare and private insurance companies) which ultimately comes from the people of the United States.”