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Governor's Message

Dear Colleagues:

What tumultuous times we find ourselves in. We can almost certainly expect changes in the way medical care is delivered. Both of the presidential candidates have expressed this. Your ACP has been a resource for the candidates. ACP is on record supporting Universal Health Care. Until the financial crisis hit us, the cost of medical care was 1 of the 2 top issues (jobs, healthcare). ACP was instrumental in having the anticipated 10.1% Medicare cuts for July 2008, repealed. Nearly all the state ACP Chapters sent "Lobbyists" to Capital Hill this past May. We were like ants crawling all over Capital Hill. Dr. Donielle Freedman and I talked with our Congressional Delegation - either the principal or his legislative assistant. The outcome as you know is a 1.1% increase in Medicare in January 2009.

The Patient Centered Medical Home (PCMH) is a concept whereby the general internists directs the patient's medical maintenance and is the repository of the patient's records. The General internist acts as the patient's supervisor of medical care. For these added responsibilities, there will be additional codes to compensate the internists (or family physician or pediatrician) for his or her time. It is felt that this approach will be cost effective; the internists will not be a gatekeeper but more as a coordinator. Our Government is interested in this approach and monies have been allocated for 5 pilot projects. Private primary care physicians can apply for grants to carry out this concept. See our chapter portal under "Patient Centered Medical Home" (PCMH).

The Board of Governors met this September for four days in Minneapolis. It was jam-packed. We discussed 22 resolutions that were introduced. You can obtain details of these resolutions by going on-line to our chapter portal. Let me focus in on resolution #1 (01-F08).

There is a move afoot for Nurse Practitioners to obtain a Doctorate degree - "*Doctor of Nursing Practitioner*" (DNP). A certifying exam for this ancillary medical group has been proposed. There is genuine concern that such an exam will equate DNP with MD or D.O.

Discussions ensue as to the structure of such an exam. Furthermore these individuals can refer to themselves as "DOCTOR". This could be misleading, as patients will assume they are Medical Doctors. This already occurs to some degree with PhD's in Psychology or with Podiatrist. In our society the title "Doctor" has the connotation of Medical Doctor, particularly, in the correct setting. This is true even for very sophisticated patients.

Let me know your thoughts on this issue.

The other issue that has stimulated much commentary is the extent to which we, as physicians, can lobby our patients. Can we request them to call our legislators in support of issues we want passed?? Do you believe it is ethical to discuss political issues with patients with the idea of educating them or persuading them on a particular issue? I believe we need guidelines as we engage in such activity as it could easily deteriorate into arm-twisting. We need to be factual and objective. I would like to hear from the membership in this regard.

Here are the statistics for our chapter as of 7/2008. There are 1,427 internists in Nevada of which 552 are members (Masters, Fellows, and Members Associates). This represents 39% of all the internists in NV. This ranks us 41st among all the states. Of the general internists in NV, 30% are members of ACP; this ranks us dead last among the states. This organization is designed for the general internists primarily. I am surprised that more general internists do not participate in ACP. After all, who collectively speaks for them if not the ACP? Keep in mind that ACP is the largest specialty medical organization in the US with about 150,000 members.. In numbers there is strength. In comparison 43% of all internal medicine subspecialists are members of ACP.

Of all the medical residents in NV, 77% are associate members of ACP. I hope this portends well for Internal medicine. According to National ACP, there are 206 medical students in NV and we have captured more than 100%. We are #1 in the country in that category. (I don't think National counted the students at Touro University)

I am always delighted to hear from our membership. If you have a complaint or a compliment let us know. If you have a resolution to submit, let me know, by e-mail. Dr. Goodenberger was handling our resolution but he left Nevada for Texas a couple of months ago. If anyone is interested in volunteering handling the resolutions please e-mail me.

Our next BOG meeting is in April in Philadelphia. It dovetails with the annual ACP meeting. The annual meeting is absolutely awesome. A wide range of subjects with various degrees of intensity is offered. There is actually something for everyone. This is a superb way to earn CME's. There are also special lectures for those certifying or recertifying in internal medicine.

During the 2009 national meeting we will have a cocktail reception hosted in conjunction with ACP Chapters of New Mexico & Colorado. If you are at the meeting be sure to get together with your colleagues for some social exchanges.

I want everyone to know we have an **Executive Director, Roberta Again**. We are fortunate to have her. Feel free to contact her if you have any membership questions.

Respectfully,

Eugene L. Speck, MD, PhD, FACP, FIDSA

Nevada Chapter - 2009 Scientific Meeting

Remember to mark your calendars for the upcoming ACP Nevada Chapter conference scheduled for January 10, 2009. This year's conference will be held at the Golden Nugget Hotel in Downtown Las Vegas. For information on how to register please visit the Chapter Portal for registration instructions at: http://www.acponline.org/about_acp/chapters/nv/news_meet.htm

You can also call the Office of CME at University Medical Center and speak to **Roberta Again** or **Anita Fleisher** at 702-383-2604.

We encourage everyone to attend!!!!!!

Call for Spring 2009 Resolution topics

Friday, December 19th is the deadline for members to submit resolutions to your Governor, for consideration at the spring 2009 BOG meeting. This deadline will appear in the ACP Internist Weekly and on the ACP Online homepage.

DUES

A new dues bill was sent out October 17th for members who have not renewed their membership. Please take a moment and consider the benefits of renewing.

- In addition to receiving the Annals of Internal Medicine with In the Clinic and ACP Journal Club, and ACP Internist, both in print and online.
- Significant discounts on MKSAP 14, Internal Medicine 2009, which is ACP's annual scientific meeting and chapter meetings, and board prep courses.
- Free access to PIER, which is ACP's online database for clinical decision support.
- A complete array of practice management guidelines, and assistance through the College's Practice Management Center.
- Free patient-education resources.

As Governor of the ACP Nevada Chapter, I hope that you will consider continuing your membership with the College. Please do not hesitate to contact me if you have any questions about ACP or would like to learn more about the chapter. To pay your membership dues, please call ACP Customer Service at 800-523-1546, ext. 2600 (M-F, 9 a.m.–5 p.m. ET) or pay online by visiting www.acponline.org/membership/dues/renew. Your membership will be valid through June 30, 2009.



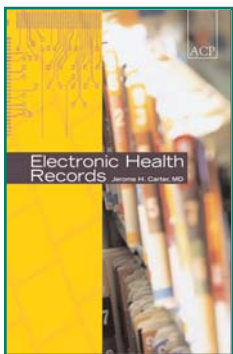
Help strengthen the voice of internal medicine - recommend ACP Membership to your colleagues!

The need for a strong voice to speak on behalf of medicine and, in particular, internal medicine has never been greater than it is today. It is critically important that we unify to address the specific needs of our medical specialty. There are advocacy efforts to champion, practice management issues to simplify, and a time-honored profession to foster. We must work together.

Electronic Health Records, Second Edition

Jerome H. Carter, MD, FACP

A leading resource in evaluating, purchasing, implementing, and using an electronic health records system (EHR), this fully revised new edition continues to help even the most technology-challenged reader master key concepts. Electronic Health Records, Second Edition is a user-friendly guide, presenting information in a clear and precise manner and providing readers with a solid understanding of what electronic health records are and do.



Features:

- A new section on implementation planning and new chapters on decision support, informatics standards, and project management
- Information on evaluating and selecting systems
- Clinical decision support
- Numerous tables, diagrams, and figures to make important information easy to understand

Divided into 2 major sections the first section serves as a tutorial on the technological, business, and legal aspects of EHRs. Using a hands-on workbook approach, the second section focuses on the implementation and management of the EHR system. Also included is the latest information on resources, Web sites, services, and vendors. Written by authors with extensive EHR implementation experience, Electronic Health Records, Second Edition is the practical, step-by-step guide to understanding the many different aspects of an EHR system. To view the table of contents, a sample chapter, or further ordering information please visit: www.acponline.org/chr.

Visit the Chapter website at
http://www.acponline.org/about_acp/chapters/nv