

Oregon Chapter GOVERNOR'S NEWSLETTER



American College
of Physicians
American Society
of Internal Medicine

Winter 2003

Stephen R. Jones, MD, FACP
Governor, Oregon Chapter



GREETINGS FROM THE GOVERNOR

The Chapter leadership continues to be focused in three broad areas: Education; Advocacy and Policy; and Financial Management.

Education

The fall Chapter meeting was by all accounts successful, and a brief summary is presented below. Please remember that the Program Committee, with the unanimous approval of the Chapter Council, has recommended that the Annual Chapter meeting be alternatively held every other year in Eugene and in Portland:

- 2003, Nov. 6-8. Eugene Hilton Hotel
- 2004, Nov. 4-6. Portland Marriott Hotel
- 2005, Nov. 3-5. Eugene Hilton Hotel

Advocacy and Policy

Bob Gluckman has accepted the *Chairmanship* of the Advocacy and Health Policy Committee and is assembling a group of Committee members to help him. In this capacity, Bob will represent the Chapter to the Oregon Medical Society. If you have questions or comments regarding advocacy and health policy, please do not hesitate contacting him at 503-216-2621, or <rgluckmanmd@providence.org>.

Financial Management

At a special Council meeting, held November 16th, the Council agreed to invest non-annual operating expense funds to higher yielding, but secure, fixed income investments. The *Chapter Treasurer*, **Arthur Hayward, MD**, who is managing the funds transfer, has gathered information from several local investment institutions. Details may be obtained from Dr. Hayward at <haywardaj@msn.com>. Pie charts detailing chapter finances can be found on page 6.

SUCCESSFUL CHAPTER MEETING, NOVEMBER 14-16, 2002

PROGRAM CHAIR'S REPORT

Linda Humphrey, MD, 2002 Program Chair

From the perspective of the Program Planning Chair, the 2002 Chapter Scientific meeting in Eugene was a great success. We were very fortunate to have many excellent speakers including **Dr. Christine Cassel**, Dean of the OHSU School of Medicine; **Dr. Joe Silva** representing the ACP-ASIM as College Representative; **Dr. David Gilbert**; and **Governor John Kitzhaber**. The Associates' competition on Thursday night was a great success with many excellent abstracts presented, all worthy of a first-place award. One of the highlights of the meeting was the discussion of health care and health care reform given by Governor Kitzhaber at lunch on Friday.

A program highlight, which has become a tradition, was another rousing round of Medical Golf led by **Drs. Dan Gilden** and **Ross Tangum**, and bravely played by **Dr. Rick Goldstein** of Bend. From my perspective, the collaborative efforts of the Program Planning Committee contribute greatly to the quality of this meeting, and I was very much appreciative of the help of the committee and **Dr. Stephen R. Jones**, Governor of the Oregon Chapter. Next year, **Dr. Claudia Leonard** from Providence St. Vincent Medical Center will Co-Chair the Program Planning Committee and will become Chair for the 2004 Program.

ASSOCIATES' COMPETITION 2002

Oral Clinical Vignettes

1st Prize: **Ryan Petersen, MD**

2nd Prize: **Emmeline Hou, MD**

Clinical Research Poster

1st Prize: **Jennifer LeTourneau**

2nd Prize: **Jennifer Baron & Kreem Henedi**

Congratulations to all the participants of the competition.

Clinical Vignette Posters

1st Prize: **Farnoush Abarghoui**

2nd Prize: **Steven Seres**

3rd Prize: **Evan Soderstrom**



CHAPTER AWARDS 2002

Howard P. Lewis Teaching Award: **Bruce Anderson, MD**, Portland

Community Service Award: **Martin L. Jones, MD, FACP**, Eugene.

OREGON CHAPTER LAUREATE AWARD – JOHN A. BENSON, JR., MD, MACP

The first ever Oregon Chapter Laureate Award was presented to **John A. Benson, Jr., MD, MACP**. The Laureate Award honors those Fellows or Masters of the College who have demonstrated by their example and conduct an abiding commitment to excellence in medical care, education, or research, and in service to their community, their Chapter, and the American College of Physicians-American Society of Internal Medicine.

Benson was lauded for his unique capacity to motivate others to strive to meet their best potential, and for his longstanding distinguished service and loyal support of the College. Benson is honored for his work in enhancing the concept of professionalism, doctor-patient communication and patient autonomy, work which has garnered him national attention during his 16-year tenure as president of the American Board of Internal Medicine, and later as chairman of the Foundation of Medical Excellence and assistant director of the OHSU Center for Ethics in Health Care.

“John Benson has served as a member and role model for several generations of Oregon internists. He continues to influence us, promoting professionalism through precept and example. We are fortunate to have him among us,” said **Stephen Jones, MD, FACP**. Benson has held several leadership positions for national professional organizations. He is past president of the American Gastroenterological Association and served as the first president of the American Board of Internal Medicine. Currently he is a member of the Institute of Medicine of the National Academy of Sciences. His many honors include the Association of Program Director’s in Internal Medicine Founder’s Award (first recipient); the ACP-ASIM John Phillips Memorial Award for outstanding work in clinical medicine; and the Medical Research Foundation of Oregon’s Mentor Award for leadership and support in improving human health and well-being.

Benson received his medical degree from Harvard Medical School, and completed his residency and fellowship at the Peter Bent Brigham and Massachusetts General Hospital in Boston, and the Mayo Clinic in Rochester, Minn. He joined OHSU in 1959.

ACP-ASIM CHAPTER EXCELLENCE AWARD

College Representative, Joe Silva, MD, FACP, awarded the ACP-ASIM Excellence Award for Chapter Management for 2001 to the Chapter.

WE WANT YOUR E-MAIL ADDRESS!!

In an effort to ensure that you receive urgent healthcare communications from the Chapter, please submit your e-mail address to us. Send your current e-mail address to Mary Olhausen at <omary@teleport.com>. ACP-ASIM will not sell or share your e-mail address and will ensure judicious use of your e-mail address.

MASTERSHIPS & FELLOWSHIPS 2003

The Chapter nominated, and then the ACP-ASIM Credentials Subcommittee recommended for election by the Board of Regents two Oregon physicians for Mastership, which will be conferred at the Convocation Ceremony at Annual Session 2003 in San Diego on the evening of April 4, 2003:

- **David Gilbert, MD, FACP** - Portland
- **D. Lynn Loriaux, MD, FACP** - Portland

At the same Convocation Ceremony, four Oregon Chapter Members will be designated as Fellows:

- **Deepak V. Gopal, MD** - Lake Oswego
- **Manuel Lois, MD** - Ontario
- **Claudia Leonard, MD** - Portland
- **Charles Bentz, MD** - Portland



PEER-TO-PEER PROGRAM

The ACP-ASIM has initiated a “Peer-to-Peer Recruitment Program”. The program is designed as a “member-get-a-member” recruitment effort in which existing College members volunteer as recruiters to encourage their peers to join ACP-ASIM. If you are interested in becoming a Peer-to-Peer recruiter, please contact Mary Olhausen at 503-494-8676, or <omary@teleport.com>.

MEDICAL STUDENTS

We are pleased to announce that **Ryan Williams**, has joined the Chapter Council as our student member. Ryan will bring ideas and issues regarding medical students to the Council leadership level.

Also, the ACP-ASIM Young Physicians Subcommittee (YPS) believes it is very important to provide opportunities for young physicians to communicate with more established physician internists. You can lend your expertise to younger colleagues just getting started. The YPS is establishing a national mentorship database, maintained by the College staff, of established internists willing to share their business, personal, and career acumen via electronic mail with our less experienced Associates and Members. Interested physicians would be able to get e-mail addresses from the database on the YPS portion of the College’s Web site and contact volunteer physicians directly. If you would like to become a mentor, please contact Jean Elliott, YPS Administrator, at <jelliott@mail.acponline.org>, or 800-523-1546, ext 2692.

ASSOCIATES’ COUNCIL

Tim Thunder, MD, has accepted the appointment as the Chair for the Associates’ Council. His term will begin in June 2003. The Associates will sponsor meetings in January and February 2003 – Topics include contract negotiation, how to get a job, and the various opportunities for employment.



NEW PDA STORE AVAILABLE TO MEMBERS

The College has just signed a one-year, non-exclusive agreement with PDA Verticals of Seattle, Washington to provide members with access to the latest PDA hardware and software. The new web site is called PDA MD, and members accessing the site receive a 5% discount on hardware and software purchases. This brings the hardware price within range of current retail pricing.

Members have access to the latest models of PDAs as well as a wide array of medical software to include specially priced “ACP Bundles” for internal medicine, geriatrics and childcare. Experienced PDA buyers who want to “build their own” can do

so using the “build to order” section of the web site. Within 3-5 days of placing their order, the PDA will arrive on the physician’s desk, loaded, charged and ready to go. With this option there are no downloads, no mistakes and no troubles. For first time buyers, there are help screens and articles to help the novice become acquainted with the PDA world.

The November, *ACP Observer* published a 12-page supplement on PDAs that will provide some extremely valuable information and background for the new user and experienced member alike.

If you’re in the market for a PDA, this is the first place to begin. For more information, please visit the PDA MD site, or contact Robin Bartlett at <rbartlett@mail.acponline.org>.

ANNUAL SESSION 2003 IN SUNNY SAN DIEGO – MAKE YOUR PLANS TO BE THERE

Internal medicine's best and brightest are coming to San Diego, California. ACP-ASIM's Annual Session 2003 will be held April 3-5, 2003 in Sunny San Diego. Pre-Session Courses will be held April 1-2, 2003.



Learn the latest information on internal medicine and discover the answers to common, yet difficult, patient-management problems. Enhance your knowledge and effectiveness as a physician by choosing from over 260 high-quality CME offerings in a wide variety of formats, from lectures to small-group discussions.

Refresh and refine your skills and learn new ones at hands-on Clinical Skills workshops featuring small-group tutorials led by experts in techniques and tools for the outpatient setting. Through demonstration, practice, and feedback, develop important skills in physical examination, medical interviewing, office-based procedures, and more.

Apply what you learn immediately to improve your practice and patient care. Come away with the latest information on internal medicine and new insights into effective patient-management issues.

Connect with your peers and with leading experts in their fields. Annual Session is the year's premier opportunity to meet and exchange ideas with fellow internists from around the globe, including those whom you know and those whom you would like to know. Attended by acknowledged leaders in virtually every area of internal medicine, Annual Session offers a rich array of networking and social opportunities.

Expect to have a great time in San Diego, America's Most Family-Friendly City! Consider spending an extra day or two in the city that *Family Fun* magazine rated the Most Family-Friendly City in the Southwest two years in a row.

Make plans now to be in San Diego, April 3-5, 2003 for ACP-ASIM's Annual Session! For additional information, visit www.acponline.org/cme/as/2003/index.html.

KEY CONTACTS PROGRAM

After hearing on the evening news about a proposed change to Medicine or a problem in the health care system, have you wanted to put your two cents in on the issues? Do you care how legislation coming through Congress affects your patients and the practice of internal medicine? If you answered "yes" to one of these questions, you would make a valuable addition to the ACP-ASIM Key Congressional Contact Program. If you would like to be updated on the legislation affecting internists and their patients, and if you are interested in corresponding with your legislators a few times each year on these issues, contact the Grassroots Associate at 800-338-2746, ext 4532, or find information on the College web site at www.acponline.org.



AMA'S CARING FOR HUMANITY INITIATIVE

The American Medical Association is launching a new initiative called "Caring for Humanity," which extends medicine's mission for the sick and suffering beyond U.S. borders. The first Caring for Humanity project is WorldScopes, a campaign to collect 100,000 stethoscopes from U.S. physicians and distribute them, with the help of humanitarian organizations, to communities around the world where medical supplies are scarce.

The AMA is seeking the support of ACP-ASIM and its members for this initiative by encouraging online purchases

of one or more stethoscopes at the following Web site www.caring4humanity.org. Stethoscopes ordered online are shipped directly to one of the AMA's partnering humanitarian organizations for distribution around the world. The AMA receives no royalty for the sale of stethoscopes for WorldScopes and each stethoscope donation is tax deductible.

The success of WorldScopes depends upon leaders like yourself and members of the U.S. physician community acting individually and collectively to donate stethoscopes to their colleagues abroad. Your participation matters. Please do not hesitate to contact Katherine Rouse at (312) 464-4075, or Katherine_rouse@ama-assn.org, if you have any questions.



COMMENTS FROM THE CHAPTER GOVERNOR

As the delivery apparatus of our nation's healthcare steadily moves to a flashpoint that may bring substantial change, I would like to share my interpretation of some of the kindling and a few of the attempts that are being made to light the fire.

Physician manpower: We know that there are more physicians per capita now than 30 years ago (110/100,000 vs. 200/100,000), if so, why does it now seem like there are not enough of us. There is no single explanation, but physicians are limiting practice hours and retiring early. How many 55-some year-old practicing internists do we know?

In addition, more of us are specialists. In 1970, 50 physicians per 100,000 population were generalist vs. 55/100,000 now; at the same time, the number of specialist physicians have risen from 50 to 150/100,000. Yet there are more chronic and complex patients who defy a reductionistic attempt at specialty management as their sole source of care.

With this clear and present opportunity for generalists, why are students not choosing careers that allow them to care for the elderly, complex, and chronically ill? The answer is complex, but in part is economic.

Debt of Graduating Medical Students: The average level of liability of students at graduation has risen in the past 17 years from \$35,000 to \$110,000. Many students now owe in excess of \$150,000 at graduation. The social contract between society and medical education has been broken, and we are seeing the result. Students and residents are saying, "force me to mortgage my soul for my education, and I will give my soul to repay the debt."

Socially conscious medical school freshmen soon learn that becoming a generalist will not repay their debts. Responding to this real and understandable fiscal pressure, students often choose specialty training that leads to a highly reimbursed career. Specialty care is important, and alone it will not solve the systems' problems. Without the balance of vigorous generalism, specialty medicine tends to widen the gap between reality and needs. We are required to create a new system, or perhaps an aggregate of systems each of which shares central core values. A broad schema for such systems has been fashioned.

The Quality Chasm: A New Health System for the 21st Century: This report, prepared by the Institute of Medicine was released in March 2001. It is recommended reading for all physicians. Your medical library, and as well your public library should have a copy prominently available. It is easy to get as full text at <www.nap.edu/books/0309072808/html/>. The report suggests that bringing state-of-the-art care to all Americans will require a fundamental, sweeping redesign of the entire health enterprise. The IOM report calls for shared aims for a system that will be:

- Safe;
- Efficient;
- Timely; and
- Effective;
- Personalized;
- Equitable

To help achieve these improvement aims, the report sets ten simple general principles:

- Care is based on continuous healing relationships
- Care is customized to patient needs and values;
- The patient is the source of control;
- Knowledge is shared and information flows freely;
- Decision making is evidence -based;
- Safety is a system property;
- Transparency is necessary;
- Needs are anticipated;
- Waste is continuously decreased; and
- Cooperation among clinicians is a priority.

The System is as Important as the Physician: This is one of the main messages within the Quality Chasm and is an emerging medical administrative mantra. We all agree more that balance between teamwork and individuality is important, and as we move toward greater teamwork, however, we must not forget the defining word "balance". There is still need for the brilliant, hard-working individual physician within the team. A few years ago as a patient my well being depended upon several physicians, both noted more for their individuality than for their enthusiasm for teamwork. Reflecting on this personal experience, I worry that such physicians and surgeons may not be replicated to care for me in the future. A team certainly will not replace them.

Several factors militate against the training of passionately excellent physicians and surgeons. Current graduate medical education now requires reduced work hours, and the resident physician who insists on getting the very most from this short period of training may not be allowed to stay in the hospital. This limitation on resident work hours is well intentioned, but as Jane R. Eisner said in a recent syndicated news column on President Kennedy's health, "Fitness...is complicated because it depends in part on individual capacity and will and the mysterious, often unpredictable workings of the human body and mind." We must be mindful of the importance of individual effort and contribution.

Admittedly, even the most brilliant individualist physician works within a team whether in the operating room, the wards or in the clinic, and the team is increasingly recognized as the core for management of the chronically ill.

Chronic Care-a 21st Century Challenge: While generations of physicians have been preparing their personal skills for the care of acutely ill patients with diabetic ketoacidosis, gastrointestinal hemorrhage, meningitis, etc., something has happened. As we have gotten better at managing acute illness, people have survived, living longer and sicker. Consequently, a new set of issues has arisen that has relatively little to do with the acute hospital care.

It is in this context that the main body of physicians has fallen out of step. However, perhaps the all left-foot marching band is not the most apt metaphor for us. Instead, when I'm confronted with this criticism of medicine, I recall the old Texas aphorism "When you up to your ass in alligators, it's hard to remember that you came down here to drain the swamp." The tumult of

our professional lives impairs our ability to personally redesign the system.

However, it seems clear to me that physicians can meaningfully respond to this crises. This response almost certainly should take two forms, one professional and one political. First, all physicians and the physicians' offices, must become adept at chronic care. The adage, "Each Physician a Geriatrician" symbolizes this intent. Secondly, we must be active politically to advocate for the allocation of the State and National resources that will be required to "Cross the Chasm". Lately this advocacy as taken on a hard realism, that only a few years ago I would have interpreted as cynicism.

One System or More: Recently two physician health policy leaders, Dr. Steven Schroeder of the Robert Wood Johnson Foundation, and Governor John Kitzhaber, have had the courage to say in public, what may have been only whispered in

small groups or that which we have not dared to say at all: America is not a evenhanded place, and that this will be the case for the future of healthcare.

Personal economic status will decide the type and form of medical care. Both Schroeder and Kitzhaber believe that we are inching our way to an open admission that we have three castes of care: the wealthy who are able to buy what they want even if they don't need it; those in poverty who be rationed the basics; and third, the rest of us cared for in a polyglot of mechanisms.

While not egalitarian, these separate and unequal systems are probably closer to what the Founding Fathers had mind than most of us were lead to believe from our high school civics class.

I believe that Oregon physicians must embrace and support the creation of a just system for the poor. It is likely that a better care will not be reborn out of a conflagration, but more likely a series of controlled burns.

UPCOMING DATES

April 3-5, 2003 - ACP-ASIM Annual Session, San Diego, CA

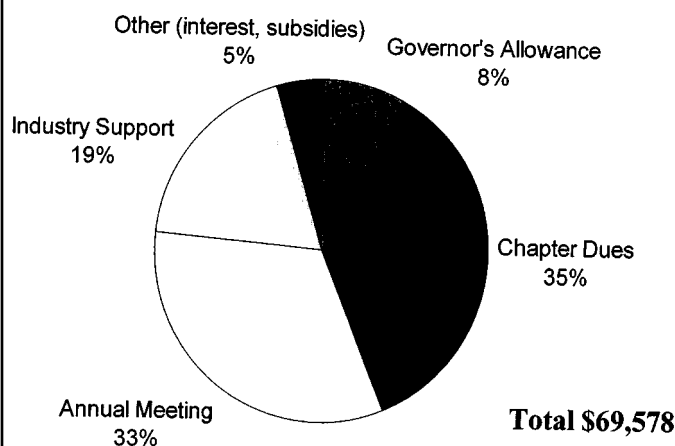
July 29-August 2, 2003 - ACP-ASIM Internal Medicine Board Review Course, Seattle, WA

November 6-8, 2003 - Oregon Chapter Scientific Meeting, Eugene, OR

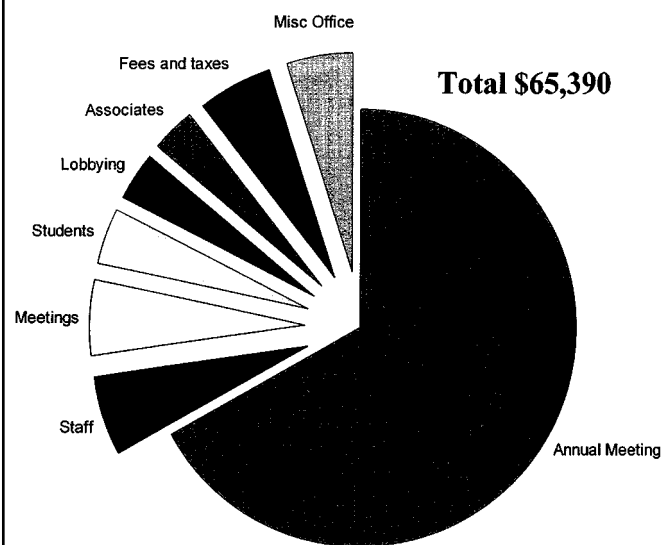
April 22-24, 2004 - ACP-ASIM Annual Session, New Orleans, LA

November 4-6, 2004 - Oregon Chapter Scientific Meeting, Portland, OR

2001-2002 Oregon Chapter ACP-ASIM Financial Report: Revenues



2001-2002 Oregon Chapter Expenses



FACES FROM THE 2002 OREGON CHAPTER MEETING



Jennifer LeTourneau, MD,
1st Prize, Clinical Research
Poster Competition.



The Providence group stops to smile for the camera.



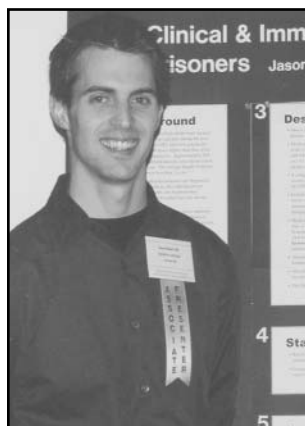
Emilia Arden, DO



John Strother, MD



Keren Barfi, MD



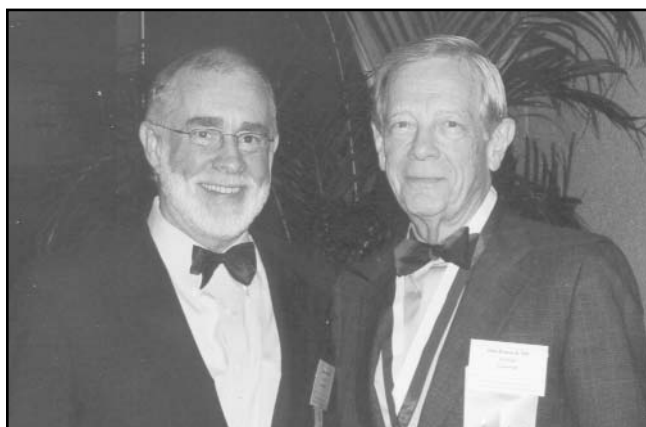
Jason Baker, MD



Farnoush Abarghoui, MD,
1st Prize, Clinical Vignette
Poster Competition.



Jill Young, MD



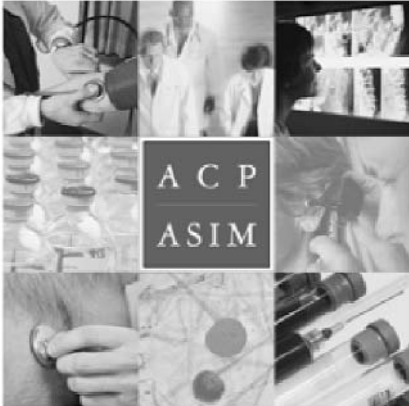
(Left) Stephen Jones, MD, FACP, *Governor, Oregon Chapter* congratulates John Benson, Jr., MD, MACP after he received the Chapter Laureate Award for 2003.



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ACP-ASIM

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**Oregon Chapter Scientific Meeting
Eugene Hilton Hotel
Eugene, OR
November 6-8, 2003**

Governor's Newsletter

BG-2091

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