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## Governor's Corner



### There's Something About... An Internist!

**E**ven at 60 years old, I still find myself feeling pretty lucky everyday realizing I have the privilege of being a physician. And to go one step further, there is something special about being an Internist. This is not to take away anything from Family Practitioners and Pediatricians, our surgical friends, or all the other specialties. Yet truly there's something about an Internist!

During my junior year in Med School, while rotating through other specialties, I learned that they call us "fleas". That is, we circle around an interesting case like a bunch of fleas on an old dog. I thought it was a little disparaging at the time, but after all these years, I think it is a good metaphor. People say they love being an Internist because of the thrill of the hunt, the fun of sleuthing the difficult diagnosis, and then the sharing of the story with our fellow Internists. We still circle around a tough case like fleas. Truly it's about the patients for whom we are challenged, that make it meaningful. But there's more to it.

It's about research, teaching, and a life-long never-ending love affair with education and learning.

It's about the inspiring colleagues, the conviviality, the professional connectedness, and the friendships that develop with others of like minds, who are in pursuit of the same goals.

It's about being a sub-specialist with the training and underpinnings of a general Internist, which then obviates the need to refer the patient away and thus fragmenting the care.

And it's about social responsibility by watch dogging government and social programs to enhance the practice of internal medicine. We need to do this so as to provide for the highest level of care for our patients.

This brings us to the American College of Physicians (ACP), your organization with a very long tradition for the pursuit of intellectual excellence, which was energized by the joining of the American Society of Internal Medicine (ASIM) in the mid '90s. The ASIM gave the combined organization, which is the ACP of today, the political strength and orientation needed to provide for the aforementioned social responsibility.

All this aside, it starts with taking care of sick people, sometimes very sick people. And when the patient is dying, it is in knowing how to help them through this last journey with compassion that makes an Internist special.

Say it again; it's about the patients for whom we are challenged, that make it meaningful. There's just something about an Internist!

## The Legacy Tribute Awards

Robert Suurmeyer, MD, FACP

One of the highlights of the recent South Dakota ACP Chapter Meeting in September was the honoring of three past ACP Governors who were recognized for their efforts in developing our state chapter in its early history. Through the diligent efforts of **Dr. Reuben Bareis**, the Legacy Tribute Award was created for: **Dr. John L. Calene** (1937-49), **Dr. Charles E. Morsman** (1949-58), and **Dr. Gordon G. Paulson** (1970-71). Following many letters, telephone conversations and e-mails, **Reuben** was successful in contacting family members who came from some distance to attend the presentation in Watertown and accept the awards. They included the son and daughter of **Dr. Paulson** along with his nephew **Dr. Rolf Paulson**, a past Governor of the ACP North Dakota Chapter. **John Calene, Jr.** traveled from his home in Hartford, Connecticut to the receive the award for his father. During the gathering he met **Dr. William Taylor**, who knew his father **Dr. John Calene, Sr.** from his many years in Aberdeen. As it turns out, **Bill's** son **William Taylor, Jr** also happens to live in Hartford, Connecticut. This makes for the sons of two Aberdeen, South Dakota internists who share their fathers name, both taking residence in the same east coast city! For **Dr. Reuben Bareis'** long years of service as our Chapter Historian, he also was given a Legacy Tribute Award and our many thanks for his work. For each of the Legacy Tribute Award recipients, a commemorative ACP Associate membership was given to a USD Internal Medicine resident in their name.



Left to Right: Virginia Priory and David Paulson (children of Dr. Gordon Paulson) Dr. Reuben Bareis, Dr. Rolf Paulson (nephew of Dr. Paulson), Marloe Bareis, John Calene, Jr. (son of Dr. John Calene) Holly Paulson, and Dr. Bill Taylor.

## ACP Health and Public Policy Report

Robert Allison, MD

The November elections have come and gone and the glory of the American experiment has happened again. As we finish celebrating our unique bloodless firestorm of politics that happens every four years, the physicians of South Dakota begin preparing for what these changes mean to themselves and their patients. Here are a few reflections of state and federal issues that will be facing physicians in 2009. (**Source of information: recent SDSMA – South Dakota State Medical Association – meeting in Chamberlain, SD – Nov 2008.**)

State issues will come forward early in the year as the Legislature meets in January. The Governor is expected to make requests for the uninsured and uninsurable patients in South Dakota. He is also expected to ask to expand the risk pool for children. Patient safety issues for transparency of pricing will be sought on a national level. Some statewide organizations are already developing their own proposals. There is no legislation planned on Native American health care, long term care, or employer health insurance assistance programs.

Hospitals are requesting legislation on genetic counseling. A bill approved from the DOH (Department of Health) and BMOE (Board of Medical and Osteopathic Examiners) is being developed. The intent of the bill is to grant the BMOE oversight of genetic counselors in South Dakota to help protect the public, as well as to make referral and billing easier for hospitals and physicians. SDAHO (South Dakota Association of Health Care Organizations) will be presenting the bill.

Medical liability cap issues (Tort Reform) may surface. South Dakota Tort laws have been stable for years. Lawyers may be developing some type of bill to challenge limits. South Dakota is losing federal funding for immunizations and it is likely the DOH will request general funds for this program. The money may be generated by a bill from the Governor.

Last year certified nurse midwives received licensure thru the BMOE. Only one certified nurse midwife has been licensed. It is anticipated that lay nurse midwives will bring back requests for licensing for conducting home births. A prescription drug monitoring program is also being investigated. There may be federal dollars available to create these programs.

At the last SDSMA meeting we were fortunate to have the ear of **Senator John Thune** (R-SD). He discussed the transition occurring in Washington DC and discussed the emerging legislation for technology in health care. Physician payments are expected to come forward with the new **Obama** Presidency. He discussed his previous votes on these issues and some potential fixes that he thought could be reached thru compromise. He envisioned a removal of the SGR (Sustained Growth Rate) formulae in favor of using the Medicare Economic Index marker for costs. He discussed options for buying insurance across state lines and he is looking at the "*White Paper*" on health insurance that was released by **Senator Baucus** (D-MT). Overall he continues to support free market options for insurance.

1. **Below is a Summary of questions to the Senator from physicians:**

- a. Primary care access concerns? He gave approval to the idea that the payment system for physician services should be overhauled and that primary care should be valued more.
- b. Why didn't he vote for the physician payment issues? He believed that the free market programs had value and that partisan politics occurred in an attempt to unravel other philosophies.
- c. Can there be incentives to medical students to enter primary care – like loan forgiveness - and how can we move to a system where patients may receive rationed care? There are programs that are present that must be paid. He agreed that medical malpractice must be addressed. The decisions on access to all treatments will become a national debate.
- d. Can you speak more on malpractice reform? He spoke again about the fact that the data is compelling but the trial lawyers continue to be against these issues and are a strong lobbying group in Washington DC.
- e. Can you comment on the Massachusetts Health Care Plan? This system is becoming more costly to the system than previously expected. It is still being evaluated on whether it is beneficial or not.
- f. Can you discuss issues on end of life and the costs associated with this? He understands time limitations on patients and physicians and agrees that this would be important to consider.
- g. Chronic disease states should be reflected via personal responsibility to the patient. What do you think about this and how can we promote this back to the patient? He agrees that this is an issue. He quoted that this is the first generation in a long time that will not outlive there parents. He agrees that there are things that we should do to fix that.
- h. What would you like the physicians of South Dakota to do when they come to Washington DC?

**Answer: Be solution oriented and give feedback on solutions to your Senator. Don't just come with requests – come with plans on how to fix the problem.**

## Everyone Deserves Protection From Secondhand Smoke

*Rodney R. Parry, MD*

Having devoted my entire career to treating patients with diseases caused from smoking, I believe it's time for South Dakota legislators to immediately ban smoking in public places and workplaces. This would be the most cost-effective way to improve the health of all of us. Secondhand smoke is much more dangerous than many people believed even a few years ago. In 2006, the U.S. Surgeon General reported that no safe level of exposure to secondhand smoke exists. The Environmental Protection Agency has classified secondhand smoke as a known cause of cancer.

I know firsthand that secondhand smoke can cause heart attacks, asthma attacks and breathing problems. Government statistics state that more than 25,000 non-smokers die from the effects of secondhand smoke each year. Many more will experience health problems requiring a visit to the doctor, including 150,000 children under

the age of 18 months who will develop lower respiratory tract infections. One group of workers most at risk are employees at restaurants, bars and casinos. Their exposure to secondhand smoke is two to five times higher than office workers.

The detrimental effects of secondhand smoke not only caused pain and suffering for victims and their families they also increased the cost of health care. A comprehensive ban would reduce the financial impact at a time when health care costs continue to rise steadily. States with smoke-free workplaces report not only lower health care costs but also higher employee productivity and lower absenteeism.

Twenty-five states have prohibited smoking in public places and indoor workplaces. A recent survey conducted by a national polling firm showed that nearly two-thirds of those surveyed in South Dakota support a comprehensive law that would ban smoking in bars, restaurants, casinos and video lottery establishments. Support was strong no matter where people lived, what political party they belonged to, how much money they made or whether they were male or female.

South Dakotans are justifiably concerned about the negative impact of secondhand smoke. It's time for all of us to let our elected leaders know that we need all indoor workplaces and public places to be free from smoke.

## Membership Committee Update

*Cathy Leadabrand, MD*

It is an exhilarating time for the membership committee! While many (including myself) have bemoaned the changes affecting Internal Medicine, in actuality this is an unprecedented opportunity to speak out and be heard on our issues. We urgently need to expand our state ACP membership, because the more members we have, the stronger our voice.

We are focusing on these goals:

1. Reach out to practicing internists (specialists and generalists alike) to join our group
2. Continue our sponsorship/support of internal medicine resident and student members
3. Invite nonphysician providers to join, as they represent an ever-growing segment of internal medicine care

We are employing several strategies to accomplish these goals

1. Improve ease of joining: Provide e-mail response to accept membership invitation, membership packets to hand out in our communities, etc.
2. Grassroots recruitment: We are establishing key people in major communities to recruit their colleagues (personal invitations by word of mouth are one of the most effective ways to gain members)
3. Increase SD ACP Meeting attendance: We are so excited to offer recertification modules at our September meeting at a beautiful site—this will offer both personal and professional growth.
4. Formal letters of invitation from our esteemed Governor: (for who can say no to him?)

This year the ACP has offered wonderful financial incentives to our chapter for increasing our membership by March 31, 2009, but aside from that, strengthening our ability to craft our profession through this organization is priceless.

Please feel free to contact any of the membership committee members if you would like membership packets to hand out to your colleagues or if you have any other suggestions for us:

**Cathy Leadabrand** – Chair

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**Richard Holm**

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**Suneet Verma**

[suneet\\_verma@hotmail.com](mailto:suneet_verma@hotmail.com)

## South Dakota Welcomes New Master John D. Barker, Jr., MD



It is a great pleasure to announce that **John D. (Jack) Barker, Jr., MD** was elected as Master in the American College of Physicians.

His contributions to first the SDSIM, as Sect/Treas, and then President, as well as SD ACP Governor are commensurate with all the responsibilities that go with those positions, and then some. But what makes him stand out is his work with the Medical Students and Internal Medicine Residents, which really brought them into the fold of the SD ACP organization for the first time, involving them in our state meetings, and truly encouraging the participation of our young future internists. It was during his Governorship that we saw for the first time in SD such involvement of the students and residents.

His two chapters in medical textbooks, his nine papers or abstracts, and his interest in the toxic hepatitis and large intestine motility disorders reflect **Jack's** research experience. But what makes **Dr. Barker** stand out is that he is a wonderful teacher and mentor. I have greatly enjoyed his presentations at not only ACP/ASIM meetings, but at SD State Medical Association meetings, at district medical association meetings, and at local and regional hospital CME meetings.

Whenever you want an update or summary of the cutting edge information about gastroenterology, Jack is the one to call. He has been a guest on our On Call Television multiple times, which is to provide public service educational by broadcasting across South Dakota Public Television. Of course he is the gastroenterology expert of experts for our region.

In addition he was the Chief of Medicine at the Sioux Valley Hospital, and has been involved in many hospital committees involving nutrition, infection, credentialing, Quality Assurance, By-laws, and medical education; all of which reflects his broad interest and involvement with the medical community.

Please join me in congratulating **Jack Barker**, a superb leader, teacher, mentor, for this position of Mastership in the ACP. He is truly deserving of such an award.

## 2009 ANNUAL MEETING

*KELLY STACY*

Come one, come all to the annual ACP meeting. It will be Sept 17-18, 2009 in Lead, SD. This year our fellow ACP members from Wyoming will be joining us in the heart of the Black Hills. We are going to have excellent speakers that are both local physicians and national speakers. And this year we are adding a new addition to the program. We are going to have 2 recertification modules with an audience response system. The modules will be geriatrics and ICU medicine. Once you have completed the course you just have to take the test and you will be one step closer to being recertified in internal medicine. So mark the dates on your calendar and hope to see you there.



*Donna Sweet, MD, MACP will speak at the 2009 annual meeting on Decreasing Transmission of HIV and Geriatric Medicine in a Hospital Setting*

The following ACP members donated money to the South Dakota ACP Associate and Medical Student Program:

**John Adams**

**Matt Bien**

**Luann Eidsness**-In Memory of **Richard Braithwaite**

**Phil Hoffsten**

**Don Humphreys**

**Priscilla Bade**

**Tom Braithwaite**

**David Elson**

**Rick Holm**-In Memory of **Charles "Scotty" Roberts, MD**

**Kishore Elaprolu**

**Aman Khurana**  
**Cathy Leadabrand**

**Eric Larson**  
**Michael Pietila**

**Rapid City Regional Hospital's Hospitalist Physicians**-In Memory of **John Calene, Gordon Paulson** and **Charles Morsman**-In Honor of **Rueben Bareis**

**David Rossing** - In Honor of **Robert G. Rossing, MD, PhD**

**William O. Rossing**  
**Robert Suurmeyer**  
**Candy Zeigler**

**Darrell Plumage**  
**Robert Talley**  
**David Zeigler**



*Preetha Nair, MD - 2008 Resident Clinical Vignette Winner*



*2008 Annual Meeting*

## PRESS RELEASE

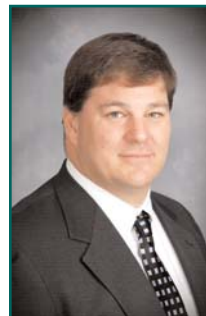
The South Dakota Chapter of the American College of Physicians is pleased to announce that Sioux Falls physicians **Aman Khurana, MD** and **Eric Larson, MD, FACP** were named 2008 SD ACP Young Physicians of the Year at the annual ACP Scientific Meeting held September 11-12, 2008 in Watertown, SD.

The SD ACP is the representative organization for South Dakota Internists, also called "Doctors for Adults". This group includes 233 members of General Internists, Hospitalists, and other Subspecialty Internists in our state. Subspecialists would include Nephrology, Endocrinology, Cardiology, Gastroenterology, Pulmonology, etc. South Dakota's membership ranks consistently in the top five percent of all states

**Congratulations Drs. Khurana and Larson!**



**Aman Khurana, MD**  
*Education: Gajara Raja Medical College, MBBS, 1997*  
*Residency: Coney Island Hospital, Brooklyn, NY 2003*  
*Current Position: Hospitalist, Sanford University of South Dakota Medical Center since 2003*  
*Division Chief, Hospital Medicine, Sanford University of South Dakota School of Medicine*  
*Family: Wife: Namita; Son: Krish*



**Eric Larson, MD, FACP**  
*Education: BA - Augustana College; MS - South Dakota State University, MD - University of South Dakota*  
*Residency: University of South Dakota*  
*Current Position: General Internist Sanford Clinic*  
*Academic Associate Professor, Sanford School of Medicine*  
*Internal Medicine Residency Coordinator, Sanford School of Medicine*  
*Family: Wife, Jennifer; Children: Isak 9, Britta 7, Siri 4*

## College Targets Emerging Leaders at IM 2009

If you are planning to attend IM 2009 in Philadelphia this year, consider going early so you can attend one of the new leadership development pre-courses offered on Wednesday, April 22. "*Essential Competencies for the Emerging Leader*" was offered for the first time last year, and was very successful. It combined plenary presentations with small group discussions to help develop competencies in self-assessment, effective communication, team building, and negotiation. To find out more, or to register, go to [https://www.acponline.org/atpro/timssnet/meetings/tnt\\_meetings.cfm?action=long&primary\\_id=PRE904](https://www.acponline.org/atpro/timssnet/meetings/tnt_meetings.cfm?action=long&primary_id=PRE904).

An advanced course is also available: "Leadership Competencies: Beyond the Basics." Again using plenary presentations and small group interaction, the faculty will focus on skills needed to create a shared vision, think strategically, empower others, and manage change. More information and registration are available at [https://www.acponline.org/atpro/timssnet/meetings/tnt\\_meetings.cfm?action=long&primary\\_id=PRE905](https://www.acponline.org/atpro/timssnet/meetings/tnt_meetings.cfm?action=long&primary_id=PRE905).

**You can also register by phone at 1 800 523 1546, ext. 2600.  
Member cost is \$289**

### **Other leadership topics covered during IM Week include:**

Leadership and Career Advancement for International Medical Graduates; Teaching Residents and Fellows to Teach; New Ideas for Reforming the US Health Care System; Communicating between Generations; Effective Negotiation Skills; Resolving Competing Imperatives; Presentation Skills for Physicians; Teaching, Learning, and Assessing Medical Professionalism; How to Run a Meeting, Manage Time, and Develop Consensus.

All of these courses count towards earning a LEAD (Leadership Enhancement and Development) Certificate. For more information on this award go to:

[https://www.acponline.org/education\\_recertification/resources/leadership\\_development/certificate/](https://www.acponline.org/education_recertification/resources/leadership_development/certificate/).

To find out how you can get more involved in our own chapter's leadership, go to <http://www.acponline.org/lead>, and click on ACP Chapter Activities or contact me at [rickholmster@gmail.com](mailto:rickholmster@gmail.com)

**Visit the chapter website at  
[www.acponline.org/about\\_acp/chapters/sd](http://www.acponline.org/about_acp/chapters/sd)**