

## Upcoming Events

The American College of Physicians  
Internal Medicine 2009  
Philadelphia will host the year's  
Premiere scientific meeting for Internal  
Medicine - April 23-25

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## Governor's Message

This article will be my last newsletter as Governor of the Utah Chapter. I am delighted that **Corwin Edwards, MD, FACP** has assumed the role of Governor-elect and will become Governor following Internal Medicine 2009 session in April in Philadelphia, PA. I am sure Corwin will do an outstanding job for the Chapter and it's members.

Every year at the Chapter meeting I have tried to have us each accomplish three goals.

1. Meet an ACP member you have not met before.
2. Learn something that will help in treating your patients.
3. Do something to support the profession of internal medicine.

I have enjoyed very much accomplishing goal number one, and appreciated very much the affiliation with fellow ACP members. Every year at the Utah Chapter meeting and outside the meeting during other activities I am impressed with the quality of our membership, their dedication to their patients, and commitment to the profession of internal medicine. This year, **Gregory Stevens, MD, FACP** particularly inspired us by the awards that were granted in our Chapter and are fully described in the attached article. **Dr. Michael Vincent, FACP** received the Laureate Award and **Dr. Mansoor Emam** received the C. DuWayne Schmidt Volunteerism and Community Service award. We were also honored to have **Dr. Jay Jacobsen, MACP** recognized as a Master in the College and to recognize the new Fellows **Craig Harmon, MD, FACP** and **Richard Herold, MD, FACP**. In addition other new Fellows are: **Caroline Milne, MD, FACP** and **Harry Rosado, MD, FACP**. Membership in the ACP is a wonderful opportunity to associate with peers and establish solid friendships.

The second goal is to learn something to help our patients. I would like to thank **Kevin Johnson, MD**, and the scientific program committee for putting on an excellent Chapter meeting. A description of the Chapter meeting is included in a separate article in this newsletter. There was an outstanding series of presentations which are available to all members by logging on the website at [www.acponline.org](http://www.acponline.org). Those members who were not able to attend the Chapter meeting would benefit by going to the Chapter website and reviewing these presentations.

The last goal is to commit to doing something for the profession of internal medicine. I would encourage all members to think about a way that they can become involved in the profession of internal medicine. Some suggestions I might give are volunteering to participate in ACP Chapter activities, becoming involved as a member of the scientific program committee, serving the Chapter as an advocate with our liaisons in Washington either as a delegate to the

national Leadership Day, or as a Key Contact member, or serving the Chapter as a member of the council, or one of the associated committees. A marvelous example of these activities has been the recent activity by our associate program, by **Scott Woller, MD**. These activities are outlined in the newsletter. In addition **Drs. Molly Mooers, FACP** and **Beth Hanlon, FACP** have been leading our advocacy group. For the profession of medicine to be advanced as we all think it should and particularly to foster the important activities of the discipline of medicine and particularly primary care delivery by general internal medicine specialists we all need to be involved.

I know we will all be in good hands under the leadership of **Corwin Edwards, MD, FACP**. I look forward to continuing in Chapter activities and visiting with you at future meetings.

## SCIENTIFIC MEETING

**October 3, 2008**

**Kevin Johnson, MD**, Scientific Program Chair, and the scientific program committee organized an exceptional scientific meeting. During registration many took the opportunity to visit with colleagues. Following registration, the meeting took on a more serious note as the meeting began with **Dr. Gregory Elliott's** presentation. All the presentations were representative of the high quality members have come to expect at these meetings. The attendees also enjoyed the use of the audience-response system following several of the presentations. Please note that the presentations can be referenced by visiting the Chapter's website listed in the Governor's message. The program was as follows:

### Thromboembolic Disease

**C. Gregory Elliott, MD, MACP**

### Update on Cancer Screening

**Yul D. Ejnes, MD, FACP**

### Update of Stroke Management

**Elaine J. Skalabrin, MD**

### Update on Disaster Preparedness

**Andrew T. Pavia, MD**

### Update on Adult Vaccinations

**Makoto M. Jones, MD**

### Update on Headache Management

**Kathleen B. Digre, MD**

### Update on Cardiac Imaging

**Jeffrey L. Anderson, MD, MACP**

## SCIENTIFIC PROGRAM COMMITTEE

We would like to recognize **Kevin Johnson, MD**, Scientific Program Chair, and the program committee, **Beth Hanlon, MD, FACP**, **Richard Herold, MD, FACP**, **Helen Hollingsworth, MD**, **Christopher Maxwell, MD**, **Casey Owens, MD**, **John Kotter, MSIV**, **Michael Peterson, MD, FACP**, **Douglas Smith, MD, FACP**, **Scott Woller, MD**, and **Peter Yarbrough, MD** for their excellent choices of topics and speakers.

## UTAH CHAPTER POSTER COMPETITION

**Scott Woller, MD** organized the poster competition that was held on Thursday, October 2, 2009. Each of the posters generated a lot of discussion and thought. First place was presented to **Barbara Jones, MD**.

**Barbara Jones, MD, PGY-3:**

*"Fever, Hemiparesis and a GI Bleed"*

**Chandramouli Banerjee, MD, PGY-1:**

*"Calciphylaxis Induced By Warfarin"*

**Scott Gabrielsen, MSII,**

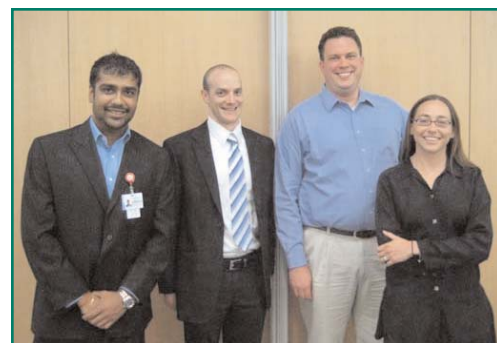
*"Serum Ferritin is Negative Correlated with Serum Adiponectin in Humans"*

**Cheryl Pirozzi, MD, PGY-3:**

*"An Unusual Neck Ache"*

**Ryan VanWoerkom, MSIII:**

*"Acute Pancreatitis: A Clinical Review and Update"*



From Left to right:  
Chandramouli Banerjee, MD, PGY-1, Ryan VanWoerkom, MSIII, Scott Gabrielsen, PhD, MSIV, Barbara Jones, MD, PGY-3

The judges for the evening were: **Douglas Adler, MD**, **Chris Maxwell, MD**, and **Russ Miller, III, MD**.

## UTAH CHAPTER AWARDS

This year the Utah Chapter awards committee and **Gregory Stevens, MD, FACP**, Awards Committee Chair, nominated two outstanding physicians to receive the Laureate and C. DuWayne Schmidt Volunteerism and Community Service awards. These physicians exemplify the mission and ideals of the ACP. The Chapter awards were given to **G. Michael Vincent, MD, FACP** and **Mansoor S. Emam, MD**.

### G. MICHAEL VINCENT, MD, FACP



**Dr. Vincent** studied medicine at the University of Utah. He completed his residency in Internal Medicine and Fellow in Cardiology at John Hopkins in Baltimore, MD. In 1971 he returned to the University of Utah as a Chief Medical Resident (1971-1972). He continued his academic career at the University of Utah where he went on to hold the position of professor of medicine. In 1975 he was appointed Chairman of the Department of Internal Medicine, at LDS Hospital, a position he held until his retirement in 2006.

Dr. Vincent has been the recipient of numerous honors including the American Heart Association Citation for International Service (1983); Researcher of the Year, (2000); and the Gold Caduceus Award for Outstanding Achievement, (2000, 2004).

Dr. Vincent is recognized as the leading authority on Sudden Arrhythmia Death Syndrome. He lead the research team which recorded the family histories of this disease and was instrumental in promoting the genetic research that led to the discovery of long QT. While the research and genetic testing were successful, Dr. Vincent was acutely aware that too many were still dying from SAD because of being undiagnosed or untreated. Dr. Vincent stated, *"There must be a better way to spread the information about LQT, and save the lives of these children and young adults."* This led him to become the Founder and Chairman of the Sudden Arrhythmia Death Syndromes Foundation. The Sudden Arrhythmia Death Syndromes Foundation is *"involved in the research, education, patient care and family support services regarding unexpected sudden cardiac death with children and young adults, with a focus on the long QT Syndrome."*

Dr. Vincent was also influential in the field of education. He worked tirelessly to see that the medical students and residents received the best education possible. Twice he was recognized as outstanding teacher of the year by the Housestaff, LDS Hospital. He was pivotal in such educational endeavors as revising the physical diagnosis program.

Dr. Vincent's has made significant contributions to the field of medicine through his research and his influence in education. It is with great pleasure that the Utah Chapter of the American College of Physicians presents Dr. Vincent with the Laureate Award.

### MANSOOR S. EMAM, MD



**Mansoor S. Emam, MD** received his medical training at the University of Utah. He completed his internship at Norwalk Hospital an affiliate of Yale University. He returned to Utah where he completed residency programs in internal medicine and emergency care. Dr. Emam is an emergency physician at Intermountain Health Care. It was his experiences in the ER that motivated him to open the Maleheh Health Clinic for which he is being honored today.

As a young man Dr. Emam's goal was to become a physician so he could help other people. This goal was influenced by where he grew up; a small town in Iran where people had very little access to medical care.

As an ER physician he realized that cities and small towns have at least one thing in common, there are too many people who have limited or no access to health care. Dr. Emam's goal to open a free health clinic was motivated by the patients he was seeing in the ER. As a physician he understood these people needed two things: to be seen by a physician before their health problems escalated to the point they went to the ER, and a place where they could receive follow up treatment until they were healed. Dr. Emam noted that by having access to these two things, it would allow "individuals to have healthier more successful lives."

As Dr. Emam searched for a solution, he discovered there were no clinics in the area that served those who lacked health insurance or whose income did not qualify them for free health care. As he pondered the plight of these people he concluded that the only solution was to open a clinic that could meet their needs.

Dr. Emam was aware that to transform his idea into reality it would require numerous hours of hard work. Undaunted by the overwhelming task at hand, he even considered selling his home, Dr. Emam set out to obtain the necessary funding and volunteers that would be needed to run the clinic. His enthusiasm for the clinic was contagious and soon he had the money and volunteers needed to achieve his goal and in 2005 the Maleheh Clinic opened.

Dr. Emam serves as the medical director of the Maleheh Clinic and spends countless hours diagnosing and treating patients. For him it is worth it. He says that he is happier that he has even been in his life. He goes on to say "When looking at a problem don't say it's so broke I can't do anything about it. Rather, ask yourself what can be done to make things better. You can make a difference."

For his outstanding efforts, **Dr. Mansoor Emam** is the recipient of this year's C. DuWayne Schmidt Community and Volunteer Service Award.



#### JAY A. JACOBSEN, MD, MACP

**Dr. Jay A. Jacobsen, MACP** was elected by the Board of Regents to Mastership in the ACP. This distinct honor is bestowed upon a Fellow who has made significant contributions to medical science. Dr. Jacobsen is Chief of the Division of Medical Ethics at LDS hospital and is a leading contributor in the field of medical ethics to the ACP.

### **CHAPTER IN EXCELLENCE AWARD**

The Chapter was presented the Chapter in Excellence Award by the visiting College Regent **Dr. Yul Ejnes, FACP**.

### **STUDENTS**

#### **David Burrow, MSII, President**

The Internal Medicine Interest Group at the University of Utah's School of Medicine is off to a good start this year. Dr. Grant Cannon gave an introduction to Internal Medicine and the ACP to the students in September, which helped us increase the membership of the ACP student section here significantly. In October we co-sponsored a lunch talk with the American Medical Association Student Section. **Dr. Richard Sperry** spoke to us about Health Care cost, access and policy, and encouraged us all to examine the approaches being put forward, to see what we thought they could do to address the issues that we'll face as future physicians. For November we've invited an Internal Medicine Resident to come speak to us about applying to Residency programs, his experiences as a Resident, and things to consider when looking at sub-specialties. We've been in contact with IMIGs at other schools are beginning to plan to incorporate some of their ideas into our year as well. We're working on plans for a spring service project, a "Meet the Faculty" dinner, and possibly a residency fair as well. We're excited to be getting students involved and interested in Internal Medicine as a career, and enjoying the opportunities we have to meet and interact with Internists in the process.

**David Burrow**

**Alison Oakes**

**Greg Baird**

**Internal Medicine Interest Group Officers**

Visit the Chapter Website at  
[www.acponline.org/about\\_acp/chapters/ut](http://www.acponline.org/about_acp/chapters/ut)

## MEMBERSHIP

Membership is a vital part of the Utah Chapter. I would encourage all those who have not paid their dues to do so. Through membership you receive many benefits on the national and local level. Some of the benefits include:

- Free subscriptions to Annals of Internal Medicine, ACP Internist, and ACP Journal Club
- Local and national advocacy efforts to ensure that health care legislation reflects the needs and interests of internists and our patients.
- Significant discounts on MKSAP®, and Internal Medicine 2009.
- A complete array of practice management guidelines and assistance through the College's Center for Practice Improvement and Innovation.
- Free subscriptions to Annals of Internal Medicine, ACP Internist, and ACP Journal Club
- Significant discounts on MKSAP®, Internal Medicine 2009, and the Utah Chapter's annual scientific meeting
- A complete array of practice management guidelines and assistance through the College's Center for Practice Improvement and Innovation.

### On the local level your dues support:

- Sending delegates, including medical students and associates, to Washington DC for Leadership Day. Last year **Tyler Williams, MD** and **Ryan VanWoerkom MSIII** were successful in communicating to the Utah representatives the need for congress to increase the reimbursement fees of internal medicine physicians so more medical students would select internal medicine as a career.
- Associate's poster competition.
- Sending the winner of the associate poster competition to present at the national level.
- Discount to the annual scientific meeting.

Please pay your membership dues by calling the 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](http://www.acponline.org/membership/dues/renew).

I thank you for your continued membership in ACP and the Utah Chapter. With your continued support, ACP will continue to be the strongest and most active professional organization working on behalf of the internal medicine community.



### Electronic Medical Records Project

Since 2004, HealthInsight, the quality improvement organization for Nevada and Utah, has helped over 200 physician practices overcome barriers to adopting and effectively using electronic medical records (EMR) in order to improve patient care. This assistance was first made available at no

cost to adult primary care providers in Nevada and Utah through funding from the Centers for Medicare & Medicaid Services (CMS). The Utah Medical Association (UMA) extended HealthInsight's free EMR adoption consulting services to additional practices through a generous grant from their foundation in April 2007. The State of Utah provided additional funding since July 2007, and has recently extended the project for July 2008 to June 2009 for HealthInsight to continue assisting primary care practices (including OB/GYN and Pediatrics) that serve Utah's Medicaid population.

19 practices from the 2007-2008 funding year adopted an EMR. Over 25 practices in Utah that are considering EMR adoption are currently enrolled in the 2008-2009 project.

As part of this UMA/UDOH EMR project, the HealthInsight HIT (health information technology) team will help physician offices plan for, choose, and adopt EMR systems. After an initial readiness assessment of clinic needs and goals, HIT team members will offer a variety of services including:

- Workflow analysis to analyze and improve current work processes and pinpoint areas that can be simplified once the practice adopts an EMR

*Continued on mail panel*

- Selection tools to help narrow vendor choices and facilitate clinic directed vendor demonstrations, based on each clinic's goals and needs
- Referrals for site visits and phone calls to clinics that already have EMR systems
- Tools and consultant references for contract negotiation assistance

HealthInsight, the UMA, and the Utah Department of Health hope that practices taking advantage of these free consultation services will overcome the many barriers to successful adoption of an EMR system and that the use of these systems will improve care provided to the population of Utah.

For more information: contact **Gary Berg** at 801-892-6675, [gberg@healthinsight.org](mailto:gberg@healthinsight.org) or see [http://www.healthinsight.org/hcp/doqit/phy\\_practice.html](http://www.healthinsight.org/hcp/doqit/phy_practice.html)

### ***About HealthInsight***

*HealthInsight is a private, non-profit quality improvement organization (QIO) whose mission is to catalyze the transformation and improvement of the health care system. In our thirty-year history, HealthInsight staff has worked with the health care community on initiatives to improve the quality of care delivered in Nevada and Utah. In doing so, we have become a trusted and neutral facilitator of health care improvement.*

