

Upcoming Events

Associates' Day
 January 23, 2010
 Norfolk

SEP Module
 March 25, 2010
 Alexandria

Virginia Scientific Session
 March 26-27, 2010
 Alexandria

Internal Medicine 2010
 April 22-24, 2010
 Toronto

In This Issue

Governor's Notes1
 Members of the Chapter
 Receive National Recognition3
 New Fellows4
 Of Particular Interest
 To Young Physicians4
 Advocacy5
 ACP Enters eBook Arena6
 ACP Foundation Combats
 Medical Illiteracy with
 Patient-Centered Tools.....7



Governor's Notes

Medical Manpower Issues: In some ways, Virginia is an average state. The Association of American Medical Colleges recently released its 2009 State Physician Workforce Databook. As a whole, in 2008, the United States had 220 active physicians per 100,000 citizens, of which about 90/100,000 are in primary care (adolescent medicine, family medicine, general practice, geriatric medicine, internal medicine, internal medicine/pediatrics, or pediatrics) and about 80/100,000 are actively seeing primary care patients. In Virginia, we boast about 17,000 active physicians of whom about 6300 are actively managing primary care patients yielding 81/100,000, and of which 4.7% are DOs. Of our active physicians, 31% are women (10th nationally), 21% are IMGs (vs 24% nationally), and 23% of us are over age 60, while only 18% are under age 40. Okay, so pretty average, but not necessarily good.

How about the future? During the 2008-2009 academic year, we had 2489 medical students in the state, of whom 26% were in osteopathic medical schools. The number of medical students has increased by 47% since 1999. As of August 1, 2008, there were 2001 residents in the state, of whom 36% were considered to be in primary care specialties. 19% of these slots were filled by IMGs. Virginia's Graduate Medical Education (GME) positions have increased by only 4% since 1999 (we rank 43rd among states), and we now have 17% fewer GME slots than graduating students. It should be noted that only 35% of our graduating students practice in Virginia and 39% of our residents (we rank 39th).

Responding to concerns regarding a doctor shortage, the Legislature has required each of the medical schools in the state to increase class size. I am concerned that by increasing the number of medical students without increasing the number of GME positions, we will not increase the number of physicians who practice in the state. Moreover, it has been said that the percentage of IMGs who practice primary care is greater than the percentage of US medical graduates who do so (I have not seen the data). Should the increase in medical school enrollment decrease the number of residency slots filled by IMGs, we might actually see a paradoxical decrease in primary care physicians in the state.

Virginia Scientific Meetings: The 2010 Virginia Scientific Meeting will take place March 26-27, at the Westin Alexandria Hotel. The meeting will confer 15.25 hours of category one CME credit. Topics include: urinary incontinence, dementia, palliative care, gestational diabetes, crystal-induced joint disease, STD, superbugs, Barrett's esophagus, irritable bowel syndrome, LFTs, DVTs, prostate cancer screening, health care

reform, sleep disorders, and many others. There will, of course, be updates on the College's advocacy activities and the opportunity to express your views and concerns to the College. Online registration is available at www.acponline.org/chapters/va/news_meet.htm. The meeting will be preceded by a SEP module for recertification, presented on March 25 and providing an additional 6 hours of CME credit. Registration for the Scientific Meeting is \$300 and for the SEP module is an additional \$150. The Chapter Council debated and decided to maintain our drawing for attendees visiting all of our sponsors' booths. This activity encourages sponsors to support us.

As you may recall from the last Newsletter, the Chapter Council discussed and rejected the idea of pairing our scientific meetings with those of Pri-Med. I asked for opinions from the Chapter and received three responses. We now have an additional nine months of experience with Pri-Med, and I would once again like to consider the possibility of working with them in the future. We have indeed been competing with their sessions, which offer CME credits at a registration fee of \$35-\$75 compared to our \$300. Several sessions have been held in the Northern Virginia/Maryland area. I would really appreciate hearing from anyone who has attended one of these sessions, specifically regarding the quality of the meeting and its freedom from pharmaceutical influence. I can be reached at mfr6t@virginia.edu. In an attempt to keep our registration fee within reason, we have worked hard to obtain pharmaceutical support for the meeting, and, indeed, thanks largely to the valiant efforts of our Treasurer, **W. Benton Lewis, MD, FACP**, we rank 5th among all Chapters in the total amount of such support. Even with registration fees and the pharmaceutical support that we receive for our meetings, we do not break even. If you have not recently attended a Virginia Scientific Meeting, please tell me what we might do to make the meetings more attractive to you.

Milestones: I am pleased to announce that **Paul F. Florentino, MD, FACP**, Director for Medical Services, National Naval Medical Center has been elected to succeed me as Governor of our Chapter. Paul has contributed greatly to the Chapter as a member of the Council for many years. He has served as Program Chair for previous, highly successful Scientific Meetings and chaired a number of committees for the Chapter. I am grateful for his willingness to serve and know that he will contribute enormously at the national level as well. Paul will become Governor-Elect after IM2010 and will become Governor in April, 2011. The Chapter is in very good hands. I also thank our other candidate, **Ranjodh Gill, MD, FACP**, who has greatly contributed to the Chapter through his work as Director of our Associates' Program and Chair of our Nominating Committee. Well done, gentlemen.

It is with considerable regret that I inform you of the resignation of **John Tooker, MD, MBA, FACP** as the CEO and Executive Vice President of the American College of Physicians after more than seven years in this position. John has been an enormous resource and outstanding leader for the College, and many of you have heard him speak at national meetings. We are indeed fortunate that he has agreed to present the James M. Moss lecture at our March Scientific Meeting. This is subtitled "The Last Lecture" and consists of what one might wish to say if one knew that one could suffer no consequences from being very honest. Having worked with and much admired Dr. Tooker for several years, I can predict that this lecture will be quite outstanding, highly insightful, and definitely worth the price of registration.

Virginia's Resolution advocating the distribution of "green" reusable bags at national meetings was defeated at the recent Board of Governors' Meeting. This does not suggest that the BOG rejected the idea, but rather that this obviously excellent policy did not require a resolution. We are always interested in possible resolutions that might be presented to the Board of Governors and influence ACP policy. Please convey thoughts to me at mfr6t@virginia.edu

Chapter Facebook Page: **Glenn Jones, MD, FACP** has developed a Facebook page for the Chapter. It is titled ACP Virginia Chapter. If you are a member of Facebook, please become a fan of our page.

Chapter Dues: We plan to maintain our Chapter dues at \$60/year. Chapter dues are no longer optional, and our income from these dues remains fairly stable. Overall support of the Chapter from Headquarters has decreased in the face of the current economic crisis. Dues support such worthwhile Chapter activities as Associates' Day, which takes place in January of each year and provides a forum for our residents to present their work.

MEMBERS OF THE CHAPTER RECEIVE NATIONAL RECOGNITION

Several members of our Chapter have recently received important recognition from the College. Our Chapter benefits from a large number of exceedingly skilled and dedicated Members, Fellows and Masters.

Two of our own have become or soon will become Masters. Masters comprise a small group of highly distinguished physicians who have achieved recognition in medicine by exhibiting preeminence in practice or medical research, holding positions of high office, or making significant contributions to medical science or the art of medicine.

After completing his term as President of the College in 2009, **Jeffrey P. Harris, MD, MACP**, became a Master. Dr. Harris earned his medical degree at The Medical College of Georgia. He is certified in Internal Medicine and Nephrology. As President of the American College of Physicians, Dr. Harris represented the organization in many national and international forums. He was invited to participate in the White House Summit on Health Care and represented the ACP in testimony at several congressional hearings. His overseas speaking has included invited lectures before the Bangladesh Society of Internal Medicine, the Federation of Islamic Medical Associations, the Taiwanese Society of Internal Medicine, and the European Federation of Internal Medicine. He served on the Executive Committee of the Board of Regents, the Finance Committee, and the Strategic Planning Committee. As Immediate Past President, he continues to serve on the Board of Regents, the organization's main policymaking body. He served as Chair of the Health and Public Policy Committee and as a member of the Foundation Board of Trustees from 2004 to 2006. He served as the ACP Governor for Virginia and as Chair of the ACP Board of Governors. He has practiced internal medicine and nephrology since 1977. He is a Clinical Assistant Professor of Medicine at the University of Virginia School of Medicine. Dr. Harris has coauthored numerous position papers for the ACP.

Robert M. Strieter, MD, FACP, FCCP will receive a Mastership at IM2010. He is currently the Henry B. Mulholland Professor of Medicine and Chair of the Department of Medicine at the University of Virginia School of Medicine. Dr. Strieter received his medical degree from Michigan State University, College of Human Medicine. He is certified in Internal Medicine and Pulmonary/Critical Care Medicine. Before coming to UVA, he was Professor at the University of Michigan and subsequently Chief of the Division of Pulmonary and Critical Care Medicine and Vice Chair of the Department of Medicine for Hospitalist Programs at the David Geffen School of Medicine at UCLA. Dr. Strieter's bibliography contains pivotal publications in the field of inflammation, immunology, and angiogenesis related to cytokine and chemokine biology. His laboratory was the first to demonstrate that chemokines were expressed by non-leukocyte cellular populations. Moreover, Dr. Strieter's laboratory discovered a novel paradigm for the role of CXC chemokines in the regulation of angiogenesis. He determined that the CXC chemokine family was a unique family of cytokines that displayed disparate activity in the regulation of angiogenesis. Dr. Strieter's laboratory has identified the importance of circulating cells, referred to as fibrocytes, that are bone marrow-derived mesenchymal stem cells that traffic and home to the lung; and contribute to the fibroproliferative response to injury. These findings provide a new paradigm for the pathogenesis of fibroproliferative disorders in the lung.

Munsey Wheby, MD, MACP, will receive at IM2010 the Alfred Stengel Memorial Award for Outstanding Service to the American College of Physicians based upon his unusual loyalty and exceptional contributions to the aims and purposes of the College, as well as his outstanding influence in maintaining and advancing the best standards of medical education, medical practice, and clinical research. Dr. Wheby graduated from the UVA School of Medicine and subsequently certified in Internal Medicine, Nutrition, and Hematology. He has served as Chair of Medicine and Senior Associate Dean at UVA. His clinical focus was general hematology with emphasis on anemias including the diagnosis and management of patients with anemia, and he has published papers on mechanisms and regulation of iron absorption, on the pathogenesis of hemochromatosis, and folic acid and vitamin B12 metabolism in tropical sprue. He has received numerous awards from the University, including the Robley Dunglison Award for Outstanding Teaching, the Alumni Association Distinguished Professor Award, the Walter Reed Distinguished Achievement Award presented by the University of Virginia Medical Alumni Association, the Raven Award, and the Humanism in Medicine Award. He is a recipient of the Roanoke College Medal. His service to the College includes terms as Governor for Virginia; Chair, Chapters

Subcommittee; Member, Membership Committee; Chair, Board of Governors; Regent; President of the College; and Chair, Board of Trustees of the ACP Foundation.

NEW FELLOWS

We are delighted to welcome and congratulate the following new Fellows in the Chapter.

Valencia D. Adams, MD, FACP, Centreville

Karen K. Agrawal, MD FACP, Virginia Beach

Sameh G. Aziz, MD FACP, Roanoke

John E. W. Beach, MD, FACP, Winchester

Kimberly H. Bird, MD, FACP, Monterey

William M. Blaylock, MD, FACP, Roanoke

Julie L. Damman, MD, FACP, Norfolk

Deborah D Demicco, MD, FACP, Roanoke

Alan W. Dow, MD FACP, Mechanicsville

Zeba S. Geloo, MD FACP, Fairfax

Mary Helen Hackney, MD, FACP, Richmond

Deborah M. Henderson, MD, FACP, Charlottesville

Said B Iskandar, MD, FACP, South Boston

Mehdi Kazemi, MD, FACP, Roanoke

Susan Ellen Kirk, MD, FACP, Keswick

Christopher W. May, MD, FACP, Falls Church

John W. Pendleton, MD, FACP, Roanoke

Mark A. Schlepner, MD, FACP, Roanoke

Sherry A. Scheib, MD, FACP, Chesapeake

Alexander I. Spira, MD, PhD, FACP, Fairfax

Zohray M. Talib, MD, FACP, Herndon

Richard M. Wardrop, III, MD, PhD, FACP, Vinton

Gebrehana W. Zebro, MD, FACP, Alexandria

Abucar A. Abdulle, MD, FACP, Dale City

Circle Alcantara Warren, MD, FACP, Charlottesville

Alistair Bahar, MD, FACP, Lynchburg

Ebenezer Berko, MBChB, FACP, Ashburn

R. Allen Blackwood, Jr., MD, FACP, Roanoke

Christiana M. Brenin, MD, FACP, Charlottesville

Steven T. DeKosky, MD, FACP, Charlottesville

Rebecca A. Dillingham, MD, FACP, Charlottesville

Mark Christian Flemmer, MBBCh, FACP, Norfolk

Alyce M. Girardi, MD, FACP, Mclean

Ahmad T. Haq, MBBS, FACP, Martinsville

Molly A. Hughes, MD, FACP, Charlottesville

Steven Frederick Kator, MD, FACP, Arlington

Richard Y. Kim, MD, FACP, Leesberg

Bob Kocher, MD, FACP, Arlington

Ramesh Raman, MD, FACP, Vienna

Andrew S. Rhinehart, MD, FACP, Bristol

Edgard A Segura, MD FACP, Leesburg

Costi D. Sifri, MD, FACP, Charlottesville

Joselin D. Tacastacas, MD, FACP, Lebanon

Amy L. Tucker, MD, FACP, Charlottesville

Duane S. White, MD, FACP, Broadway

If you know of physicians who would be excellent Fellows of the College please contact me (mfr6t@virginia.edu) and let us consider direct admission to Fellowship or the Most Wanted Program.

OF PARTICULAR INTEREST TO YOUNG PHYSICIANS

The Virginia Chapter's Council of Young Physicians, founded in 2007, is composed of two physicians from each of the four state ACP regions. This Council meets to address the needs of the younger practicing clinicians within the state. Last year, under the leadership of **Craig Cheifetz, MD, FACP**, the CYP prepared a compendium of financial and practice-management advice for young physicians. This publication has been submitted for an ACP Evergreen Award. This year, **Zachary Shook, MD**, holds the reins. The CYP is undertaking the hosting of panel discussions at many residency programs throughout the state. The programs would be aimed at senior residents and would provide the opportunity for residents to ask the panel about differences in practice models such as the characteristics of private practice vs. academic medicine, hospitalist vs. outpatient medicine, etc. Topics might include contracts, office/corporation organizational structure, salaries, work hours, academia in private practice, and anything else of concern. Programs could be tailored to the

needs of individual residencies, including time, venue, etc. Panels would include practitioners from a range of situations. Members of the Chapter who are interested in participating should contact Dr. Shook (zmshook@verizon.net)

ADVOCACY

William Fox, MD, FACP, Chair, Health and Public Policy Committee

Since the last newsletter, events in Washington have been unfolding at a dizzying pace. By the time you read this, the president may have already signed the biggest piece of healthcare legislation in a generation. However, as of the writing of this article, reconciliation of both the House and Senate versions of healthcare legislation has yet to occur in Conference Committee. In an historic vote on Christmas Eve, the Senate passed "*The Patient Protection and Affordable Care Act*," HR 3590. In so doing, they joined the House of Representatives, who had previously passed their version of healthcare reform, HR 3962, "*The Affordable Health Care for America Act*," back on November 7. While not considered perfect bills, the ACP did support passage of these pieces of legislation, as they advanced several major priorities for which the ACP has long fought. Some of the more significant components of these bills include:

- expanding coverage to 96% of legal residents (House version), or 94% of legal residents (Senate version),
- providing sliding scale tax credits to lower income individuals to purchase insurance on the Health Insurance Exchange,
- instituting market system reforms that will prevent insurance denials based on preexisting conditions,
- supporting primary care with a 5% increase (House) in Medicare reimbursement for E/M services for primary care physicians (10% in physician shortage areas) or a 10% increase (Senate)
- Investing in reforming health care delivery and payment systems by funding such things as a national pilot project for the patient centered medical home.

Virginia congressmen who voted in favor of the House bill are Representatives **Connolly** (VA -11), **Moran** (VA-8), **Perriello** (VA-5), and **Scott** (VA-3). Those voting against include **Wittman** (VA-1), **Nye** (VA-2), **Forbes** (VA-4), **Goodlatte** (VA-6), **Cantor** (VA-7), **Boucher** (VA -9), and **Wolf** (VA-10).

Both Virginia Senators voted in favor of the Senate legislation.

In Conference Committee, a final, unified version will have to be crafted from the two pieces of legislation, which now have some significant differences. Issues to be addressed include the public option (included in the House, but not in the Senate, bill), and funding mechanism (the House bill taxes the wealthy Americans and the Senate version levies a tax on so-called "Cadillac" health insurance plans.)

Not addressed in the legislation are ACP's other priorities including robust medical liability reform and a permanent fix to the SGR formula. The SGR fix, however, was addressed in a separate legislation, HR 3961, which the House of Representatives passed in mid November. This bill would forgive the some \$250 billion accumulated debt that has accrued as a result of the short term year-to-year fixes Congress has enacted since 2003 and replace it with an adjusted formula that is expected to provide positive updates for the next ten years, according to the Congressional Budget Office. Passage of this bill in the House of Representatives was an extraordinary achievement and represents years of lobbying by the ACP and other physician organizations. It passed 243 to 183 overall. The Virginia delegation voted along party lines, with **Boucher, Connolly, Moran, Nye, Perriello** and **Scott** voting in favor, and **Cantor, Forbes, Goodlatte, Wittman** and **Wolf** voting against.

On the Senate side, fixing the SGR appears to be an uphill battle. In mid October, S 1776, the companion bill to HR 3961, died when it failed to garner enough "cloture" votes to end debate. **Virginia Senators Warner** and **Webb** were two of the senators voting against cloture. They cited a lack of a way to pay for the fix as the main reason for their opposition. Hopefully, the Senate leadership will revisit this issue now that it has been passed by the House. In the meantime, both the House and the Senate passed a temporary measure delaying the scheduled 21% cut until March 1, 2010 allowing time for Congress to develop a longer-term

payment fix as part of healthcare reform.

While there is a great deal focus on national healthcare reform, state issues are equally important to practicing physicians this year. The ACP-Virginia Chapter has been working with The Medical Society of Virginia (MSV) to advance its interests, most recently at the MSV annual meeting in late October. The legislative priorities for the MSV for the coming legislative session include:

- Maintaining the medical malpractice cap in its current form with no increases.
- Preventing cuts to Medicaid reimbursement, despite a projected state budget shortfall of \$1.5 billion for 2010.
- Monitoring and responding to scope of practice issues relating to nurse practitioners, naturopaths, chiropractors, and others.
- Improving the Commonwealth's mental health system

One of the most successful ways to educate and influence state legislators is to attend one of the MSV "White Coats on Call" sessions, occurring in early 2010 when the state legislature is in session. During these sessions, you receive briefings on the issues and have the opportunity to interact directly with your representatives. The dates are as follows (note these districts are not congressional districts, but MSV districts. You can find your district by going to <http://www.msv.org/MainMenuCategories/Advocacy/GettingInvolved/WCOC/MSV-District-Map.aspx>):

District 1: Feb 2, Feb 11

District 2: Jan 19, Feb 25

District 3: Jan 27, Feb 23

District 5: Feb 9, Mar 4

District 6: Feb 1, Mar 2

District 7: Feb 2, Mar 4

District 8: Feb 4, Mar 2

District 9: Feb 1, Feb 25

District 10: Jan 26, Feb 11

While this program is organized through the Medical Society of Virginia, and not the ACP, the issues are germane to our membership. Last year, a significant turnout helped put pressure on legislators to ban smoking in restaurants—a major legislative achievement—which took place December 1. If you can get away from your practice for a day, you will find the experience of advocating for your profession both educational and exciting and I urge you to attend.

AMERICAN COLLEGE OF PHYSICIANS ENTERS eBook ARENA

Readers can now search and view content online and purchase electronic books

Philadelphia, April 28, 2009 -- More than 40 books published by ACP Press, the book publishing program of the American College of Physicians, are now available for purchase in digital format at www.acppressebooks.com. At ACP's new electronic publishing site, visitors can search the full text of an entire book, view sample pages online before making a purchase, and purchase digital copies of books at reduced "eBook" prices. "We wanted to better meet the needs of customers who like the accessibility and other benefits of electronic books, and www.acppress-ebooks.com enables us to do that," said **Steven Weinberger, MD, FACP**, ACP's Deputy Executive Vice President and Senior Vice President for Medical Educations and Publishing. "It's helping the College meet its goal of providing information in whatever form the customer wants." Digital book purchasers can store, read, and manage their eBooks in an easy-to-use personalized electronic bookshelf. Utilizing the iPublishCentral platform by Impelsys, ACP's eBooks are published using Flash technology that creates an electronic version of each page identical to the equivalent page in print. Users can bookmark pages, add notes, email a selected page to a friend, and place a link to an eBook on their personal blogs or Web sites. The abilities to purchase individual chapters of a book and to download an eBook for offline reading are coming soon. A visitor can also search and view content online, and then purchase the print version of the book through convenient links to ACP's print product catalog (www.acponline.org/acppress).

www.acppress-ebooks.com was launched on April 22, 2009, making more than 40 eBook titles available online. Best sellers like Drug Prescribing in Renal Failure, How to Report Statistics in Medicine, Medical Care of the Pregnant Patient, The Quotable Osler, and more are now available in digital form.

ACP FOUNDATION COMBATS MEDICAL ILLITERACY WITH PATIENT-CENTERED TOOLS

Nine out of Ten US Adults have difficulty understanding basic health information and services. To combat this problem, the ACP Foundation creates innovative and culturally appropriate materials for patients such as HEALTH TiPS, videos and Everyday guides for patients and their families. HEALTH TiPS are 2-sided 4 x 6 patient takeaway sheets containing easy-to-understand messages that physicians and other health care clinicians commonly address with their patients. They are available in English and Spanish as well as in electronic format with graphics for download. There are over 20 topics available such as High Cholesterol, Hypertension, Smoking, Depression, Osteoporosis, Pain, Diabetes and Osteoarthritis. To order your free HEALTH TiPS, download copies, or to learn more about patient centered tools, please visit <http://www.acpfoundation.org>