Jason M. Goldman, MD FACP, FL Chapter President/Governor

One of the most rewarding experiences of my professional career so far has been serving as your Governor and being able to represent the varied and diverse interests of our Chapter at the national level. This is an awesome responsibility and one that I do not take lightly or for granted. I have learned, from talking to our membership, that the needs and concerns are as diverse as our population. I want to focus on our local accomplishments, national accomplishments and the future. Recently, we had our annual meeting and, despite having to change dates for the threat of a hurricane, it was a tremendous success. We had a record number of presentations, credits for CME and MOC, financial support from vendors, attendance, and engagement of medical students and residents. We handled many relevant and timely topics such as medical marijuana and transgender health. The chapter continued its support of women in medicine with our women’s mentoring breakfast and was graced with the presence of Senator Gayle Harrell and ACP President Elect, Jacqueline Fincher. Our chapter has been truly innovative in our state meetings and this has definitely gained the attention and appreciation of the national organization. The festivities and camaraderie were evident and I was truly appreciative of the warm wishes from everyone as the rescheduling of the chapter meeting necessitated it being scheduled on my birthday. What better way to celebrate than with my colleagues and friends. On a somber note, the hurricane did not leave everyone unscathed as we all know that the Bahamas were decimated by this storm. I asked at the meeting and will reiterate the importance for everyone to contribute to the relief of our fellow members of humanity as liberally as their needs require and our abilities permit. The chapter will be making a contribution and I encourage individual members to contribute as well. Finally, I would ask for our membership to be recognized and for everyone to look at colleagues who are deserving of both local and national awards as well as those who are qualified for advancement to fellowship. Please consider nominating your colleagues for the many awards we have available and I am happy to assist in this endeavor.

On a national level, one of the responsibilities of your Governors is to promote resolutions at the board and try to change policy. We have been very successful on many levels and continue to make sure that the needs of the Florida Chapter are understood and acknowledged. Of particular concern is the maintenance of certification process that ABIM has put into place. The national leadership is engaged with ABIM and is diligently working to make the process as relevant and efficient as possible.

Changes in the MOC process will be occurring and more information will be forthcoming. Issues of improving practice regulations, patient care and physician rights as well as the promotion of gender equity and diversity are just some of the many issues taken up for discussion. As Vice-Chair of the medical practice and quality committee, I help to shape our policies regarding how we can best practice medicine in an ever increasing and over regulated system. The committee and the ACP is diligently working to create policy on what should be a blueprint for the best way healthcare can be achieved in this country.

Continued on page 2
Presidents Message continued from page 1
This is a monumental task but one that we, as an international medical society, can be proud of and show how Internal Medicine can lead the discussion on healthcare policy.

Recently, I have returned from Tallahassee to advocate on your behalf for the patients and the practice of medicine. It is always rewarding to be able to speak to our elected officials and be able to work with them for the common goal of improving healthcare. One of the important issues is scope of practice and your Florida Chapter is steadfast in its resolve that only physicians should be designated as doctors and be the ones to practice medicine. While extenders are important members of the health care team, they should not have independent practice and should always be under the supervision of the physician. Another objective is to modify the prior authorization system to make it easier for patients to get life saving treatment in a timely manner. Advocacy is not a spectator sport and I always encourage everyone to be involved in the process. Finally, looking forward to the future, we still have much to accomplish. As my term heads into the remaining months before transitioning to my accomplished colleagues, Drs. Hanline and Everett, I want to make sure we continue the level of excellence that the chapter is known for nationally. We must ensure that the medical students and residents continue to be involved in poster presentations and doctors’ dilemma. Our council of medical students and residents have been incredibly active and innovative in the programs they put on, the writing of resolutions and involvement in advocacy. Membership is critical to our success and I hope that everyone will be an ambassador for the ACP and encourage your colleagues to join their professional home. We are stronger together and the more membership we have, the greater our voice at every level. With that voice comes the responsibility of engagement and the need for advocacy. I will be traveling to Washington, as I do every year, to advocate on your behalf by participating in ACP Leadership Day in May. I encourage our members to consider getting involved in these worthy events and help to shape public policy. As always, we need to work with our colleagues in all specialities for the betterment of our practice and the patients we serve. To that end, please consider dual membership in the Florida Medical Association so we can increase the number of delegates at the annual meeting and also consider serving as an ACP delegate to the FMA so we can continue the great policy work that we have been engaged in each year. As stated in an African Proverb, if we want to go faster we go alone but if we want to go farther we go together. Let us continue to work together and be engaged in all our future endeavors. Thank you as always for this opportunity.

Governor-Elect Message
“Location, Location, Location” is the often-quoted mantra of the Real Estate agent. Having just returned from my first Board of Governors meeting in Tucson, Arizona, together with our current ACP Governors, Drs. Goldman and Hanline, it would seem that the mantra of our Florida Chapter might be “Priorities, Priorities, Priorities”. For as long as I have been a member of the ACP (since 1978), education and advocacy have been the overarching, major goals of the ACP. Priorities within each of these goals must be established and supported by members of each chapter, then fine-tuned and carried out by chapter leadership. Here are a few thoughts on relevant priorities that bubbled up from the Governors I met in chapters across the nation and the world. You knew that ACP has many chapters throughout the world, right? (I didn’t know that before this meeting but now I do and I’m even more impressed about the ACP as a result.) Within the goal of education, we have both chapter level and national/international level priorities. At the Florida Chapter level, we have unique challenges and opportunities. There are now 37 Internal Medicine residency programs in Florida (up from 10 in 2009) and 9 Medical Schools (up from 3 in 2000), including 7 allopathic and 2 osteopathic. The Florida Chapter is already the largest chapter in the country, so incorporation of large numbers of new resident physicians, medical students and faculty will challenge us in a very good way. Some granular questions related to growth might be: how to get more posters into our meetings; how to provide access to meetings given the geography of Florida; how to interact with membership using new social media options. Specifically, I would like to see our meetings include training courses in ultrasound for bedside use and include electronic displays to replace physical posters. National educational priorities might include developing a MKSAP for subspecialists (like a supplement to each of the specialty sections of regular MKSAP) in order to invigorate and encourage the nearly 60% of internists who are subspecialty trained but often not members of the ACP. In addition, working with the Society of General Internal Medicine (SGIM) and with the Society of Hospital Medicine (SHM) might yield common educational ground. Within the broad goal of advocacy, the Florida Chapter has staked out priorities that include: successfully defending, so far, against the scope-of-practice expansion efforts of pharmacists and advanced practitioners; supporting the rights of practicing physicians; and resisting pressures by various agencies to burden physicians with needless bureaucratic functions. Advocacy at the national level has centered on broadening health insurance coverage, collaborating with other physician organizations such as the AMA and bringing the ABIM-MOC policies into rational, affordable and practical procedures. One last point: the ACP at the national level has condemned the labeling of physicians as “providers”. We Governors all took an oath to never use the word “provider” when referring to physicians. I hope you will carry that message forward to the organizations you work with and for. It is now official ACP policy. I believe it is a matter of dignity and pride to use appropriate terms when referring to physician colleagues. The bottom line is that the ACP is an international organization of Internal Medicine physicians that starts at the grassroots level and works for the education and advocacy of the members and their patients.
2019 FL Chapter ACP Annual Scientific Meeting Highlights

Resident/Fellow Poster Competition

Research Division
First Place

Prognostic Nomograms for Predicting the 10-Year Probability of Mortality, Local Recurrence, and Metastasis in Bone Osteosarcoma

Ruoyu Miao, MD
AdventHealth Orlando

Clinical Vignette Division
First Place

Hypersecretory Paraganglioma Presenting as an Acute Aortic Dissection

Christian Lorenzo, DO
Florida State University—Sarasota

Medical Student Poster Competition

Research Division
First Place

Theoretical Cost Savings Analysis of Serving People who Inject Drugs at Student-Run Wound Care Clinic vs Emergency Department

Hardik Patel, MS III
University of Miami

Clinical Vignette Division
First Place

Emerging Major Adverse Drug Reaction to Statin Treatment: A Case of Anti-HMCGR Autoimmune Myositis

Wesley Joshua Earl, MS IV
Florida State University
Congratulations to the Doctors Dilemma Champions from University of South Florida who will represent the Florida Chapter in the Doctors Dilemma Competition at Internal Medicine 2020 in Los Angeles, CA in April 2020.

University of South Florida
Team members Benjamin Cloyd MD, Mahad Mohammed DO and Katherine Robinson MD pictured with Program Director Kellee Oller, MD FACP and FL Chapter Governor Jason M. Goldman, MD FACP

Calling All Doctor’s Dilemma Teams!
Get your Doctor’s Dilemma team ready now for participation in the March 28, 2020 FL Chapter competition.
CALL FOR ARTICLES

We are currently accepting submissions for our “Women in Medicine” series for future publications. Featured members may be medical students, residents or practicing physicians. Articles should include a photograph of the featured member.

Please send to DMoerings@floridachapteracp.org by March 30, 2020 for the Spring Newsletter
The United Nations Climate Action Summit was held in New York at UN Headquarters on 21-22 September 2019. This weekend prefaced the high-level meetings by heads of state and government officials from around the world that started on 23 September. Representatives from governmental and non-governmental organizations from around the world attended. Colleagues from the World Medical Association and World Health Organization were represented. A past president of the World Medical Association, Dr. Yoshitake Yokokura, of Japan, was also present. I was present as a representative of Physicians for Social Responsibility (PSR), the United States chapter of International Physicians for the Prevention of Nuclear War (IPPNW). PSR has two primary national aims – the prevention of nuclear war and climate change.

One of the tracks was on air pollution, entitled, “Climate Action for Health: Cut Emissions, Clean our Air, and Save Lives” moderated by Lucia Ruiz Ostoic, the Minister of Environment for Peru. There was also a special appearance, speech, and plea by Dr. Tedros Ghebreyesus, Director-General of the World Health Organization.

An informative and sobering presentation, a call to action, was given by Dr. Arvind Kumar, a leading pulmonologist in New Delhi, India. New Delhi has one of the highest levels of air pollution globally, a fact that I can personally attest to, with PM2.5 levels consistently many times over the maximum safe limit. In 2018, the average PM2.5 level was 14.3 times over the safe limit. This was equivalent to smoking 6.5 cigarettes per day. In fact, a teenager living his/her whole life in the Delhi Metropolitan Area (DMA) had the level of pollution and particulate matter in his/her lungs as a lifelong smoker, even if this teenager never smoked a single cigarette. Furthermore, from 1988 to 2018, the rate of lung cancer among non-smokers in the DMA rose from 10% to 50%, with the average age of diagnosis dropping from 50-60 to 30-40, even factoring in earlier diagnosis during this same time period, and increase in diagnosis in women rising from almost non-existent to 40%. The sobering statistic for populations is that based on previous studies, breathing polluted air was equivalent to smoking at a rate of 22 mcg/m² of pollutants, equal to 1 cigarette. This included newborns and children which has been found to result in neuroinflammation and reduced cognitive development. In adults, it increases the risk of stroke by at least 5 times. Additionally, air pollution results in infertility, miscarriage, preterm and low-birth-weight infants, and congenital abnormalities. Up to 7 million premature deaths per year worldwide have been attributed to air pollution according to the WHO. This is the reason that reducing air pollution and mitigating its effects is so critical and emergent.

Leaders from government and non-governmental organizations then provided examples of solutions, trials, and collaborations to tackle this. While the DMA may be one of the most extreme examples in the world, air pollution affects all of us. The mayors of Accra and Seville; the Ministers of Health, Environment/Climate, or Energy from the United Arab Emirates, Finland, and Norway; the European Union Commissioner for Environment; and the Directors of Healthcare Without Harm and the Clean Air Fund made presentations on work being done. Cities in Spain and in South America are working together to reduce air pollution by redesigning cities through decentralization of services, increasing bicycle and pedestrian lanes with improvement in access to social, occupational, and retail services through decentralization. Furthermore, some cities are utilizing pollution sensors with less expensive versions being developed so that the population can be notified accordingly. While these measures will result in some improvement in local pollution levels and future city planning/development, the causes of air pollution on a larger scale need to be addressed fully and urgently. Here, the national ministers provided examples of how their governments are committed to solutions. However, no specific examples beyond voluntary international agreements were provided. Partially because of this, the Clean Air Fund was created and was formally introduced to the world in the subsequent days at the United Nations to bring awareness and encourage pressure on governments to act.

It is of note that recent research has shown that air pollution, particularly among the wealthiest nations, is increasing, contrary to what scientific consensus strongly recommends occur as soon as possible. For example, in the United States, in 2018, there were an additional 10,000 deaths attributed to air pollution, specifically PM2.5 pollution, compared to 2 years prior. This was after a decline to almost half from 2000 levels across two presidential administrations from two different political parties. The Trump Administration was instrumental in this due to deregulation of environmental protections and industrial standards, according to rigorous analyses. Even if the increase in wildfires in the western United States during the preceding 3 years were considered, the rise in air pollution would continue.

Therefore, as physicians who encounter the effects of climate change regularly, including air pollution, particularly here in Florida, it is our responsibility to advocate for our patients’ health to our respective governments. Decentralization, pedestrian and bicycle-friendly cities, and pollution sensors are a start but even as the mayors and ministers present at the Summit stated, it is not enough or comprehensive.

Ankush K. Bansal, MD, FACP, FACP, SFHM, MRCP (London), CFLC
Treasurer, Florida Chapter, American College of Physicians
Associate Member and Representative to the General Assembly – World Medical Association
Board Member – Florida Chapter, Physicians for Social Responsibility
Co-Chair and Co-Founder – Florida Clinicians for Climate Action
Co-Chair and Co-Founder – Palm Beach Chapter, Climate Reality Project
Congratulations to New Florida Masters

**Steven L. Cohn, MD MACP**
Dr. Cohn is Professor Emeritus of Medicine, University of Miami Miller School of Medicine, Miami, Florida. Previously, he was the Medical Director of the UHealth Preoperative Assessment Center and Medical Consultation Services at Jackson Memorial and University of Miami Hospitals, where he implemented a comprehensive model that included clinical services and education for house officers. Before coming to Miami, he had a similar role at Kings County Hospital and was also the Division Chief of General Internal Medicine and Associate Medical Director for Performance Improvement at the State University of New York–Downstate Medical Center in Brooklyn, New York. He has been very active in the American College of Physicians, both on the State and National level, presenting at meetings and participating on committees since 1997. Dr. Cohn is the author/editor of three textbooks and has written 33 book chapters, 50 publications, and 35 online media presentations and featured articles. He has been active in the Society of Hospital Medicine and Society of General Internal Medicine and is a board member of the Society for Perioperative Assessment and Quality Improvement. He has given over 400 presentations and is widely recognized as an expert in the field of perioperative medicine.

**George D. Everett, MD MACP**
Dr. Everett is the Program Director for the Internal Medicine Residency at Florida Hospital. He has dedicated his life to medical education and building the next generation of physicians. For his superior teaching style, he has received numerous teaching awards, including the Florida State University College of Medicine Outstanding Clinical Faculty Educator, the University of Central Florida College of Medicine Best Internal Medicine Clerkship Teacher Award, and the ACP Florida Chapter Outstanding Teacher Award. He has served as Program Director for the Internal Medicine and Medicine-Pediatrics Residency Program at Orlando Health, as well as Chairman for their Institutional Review Board. He was the Internal Medicine Section Chair for Florida Hospital’s Orlando Campus and serves on several committees at this institution. He chairs the Graduate Medical Education Committee at the ACP Florida Chapter, has been a member of the Governor’s Council for many years, received the Laureate Award, and is the Governor-elect designate. Dr. Everett’s passion for research and scholarly activity is reflected in his robust body of publications and grants. He provides free medical care to uninsured patients through Shepherd’s Hope and participates in Florida Hospital’s Medical Missions to Ethiopia and Peru.
Florida Chapter 2019 Awards

2019 Laureate Award

John G. Langdon, MD FACP

Laureate Award winners are long-standing and loyal supporters of the College who have rendered distinguished service to their chapters and community and have upheld the high ideals and the professional standards for which the College is known. The Senior Florida physician has demonstrated through his or her example and conduct, a commitment to excellence in medical care, education, or research and service to their community and ACP.

2019 Chapter Excellence Award

Congratulations to the Florida Chapter for receiving the Gold Level of the 2019 Chapter Excellence Award! The award recognizes truly extraordinary chapters that surpass excellence in chapter management. In order to achieve the Gold Level of the Chapter Excellence Award, chapters must meet over 51 criteria including such activities as having a legislative action plan or agenda, holding a volunteerism/community service activity, holding multiple stand-alone meetings, having revenue sources outside of dues and meeting registration fees, implementing a strategic plan, implementing a formal recruitment and retention plan and measuring outcomes, conducting various activities for Medical Students, Residents and Early Career Physicians. Special thanks to those chapter members who assisted in all of these endeavors! For their hard work and dedication, we received this award.
**Outstanding Contributions to Advancing the Careers of Women in Medicine**

Karen A. Echeverria-Beltran, MD FACP

This award recognizes an individual who has furthered the careers of women medical students, residents, and/or physicians through mentoring and leadership development for the career advancement of women.

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**Early Career Physician Award**

Jose R. Valery, MD

This award is given to a member of the Florida Chapter who is 16 years or less from medical school graduation, highly respected by his/her colleagues for outstanding clinical & leadership skills, and who has been a role model in the community. This individual should have distinguished themselves in service to patients, the physician community, and the community at large. The awardee should be an educator to patients and the overall medical community as well as an active member of ACP who has contributed meaningfully to the efforts of the chapter.
Internist of the Year

Daniel Tambunan, MD FACP
A physician who has demonstrated outstanding leadership and dedication to the practice of internal medicine.

Outstanding Teacher of the Year

Manoucher Manoucheri, MD
A physician who has demonstrated outstanding leadership and dedication to medical education.

Volunteerism and Community Service Award

Ankush K. Bansal, MD FACP
A physician who has distinguished themselves in voluntary service in the area of medicine like a commitment to continuing education, which is an established tradition for internists and the College.

Community Based Teacher of the Year

Howard E. Voss, MD MACP
A physician who has demonstrated outstanding leadership and who has contributed to the education of medical students, residents and fellows as an office based internist.

Congratulations!
FL Chapter ACP Chapter Service Award

Naresh Pathak, MD FACP FAAHPM

In recognition of meritorious service to our state and the medical profession.

FL Chapter ACP Legislator of the Year Award

The Legislator of the Year Award recognizes the member of the Florida Legislature who has shown the greatest commitment to physicians and patients.

Throughout her sixteen years in the Florida House, along with her current position as Chair of the Senate Health Policy Committee, Senator Harrell has tirelessly worked to protect the practice of medicine and score the greatest possible care for Florida’s patients.

Senator Gayle Harrell
Aging and Immunity: 
The Important Role of Vaccines

We often focus on the immunity of children, but as patients age into adulthood and seniority, following recommended immunization guidelines is essential to their overall well-being. Vaccines for illnesses such as pneumococcal disease, tetanus, and shingles can help combat the deterioration of immunity that many patients will experience as they age.

In the 2016 National Health Interview Survey, more than one-third of adults 65 years and older did not report receiving a pneumococcal or tetanus and diphtheria vaccination, and nearly two-thirds did not report receiving a herpes zoster (shingles) vaccination.

The lower number of aging adults who are up to date on recommended immunizations can be an open door to preventable health problems. By actively engaging with aging patients, providers can help close that gap and ensure better lifelong health.

How do vaccines help support adults’ health as they age?

As patients age, their bodies’ ability to respond to immune system challenges becomes less effective, according to research published in Frontiers in Immunology. These changes, known collectively as immunosenescence, is one reason why the severity of many infections is greater in elderly patients compared to younger adults. There are many preventative activities patients can participate in to strengthen their immune system. The most commonly needed vaccines for older adult populations include influenza, pneumococcal disease, tetanus and herpes zoster vaccines, according to the Advisory Committee for Immunization Practices (ACIP).

Which vaccines are most critical for older patients?

The Centers for Disease Control and Prevention (CDC) notes that booster shots are an important aspect of maintaining a patient’s immunity. The tetanus and diphtheria booster is recommended every 10 years for adults.

In addition to diseases for which childhood immunity can wear off, there are also several vaccine-preventable diseases that patients are at a higher risk of contracting later in life, including shingles and pneumonia. The CDC estimates that there are one million cases of shingles reported each year in the U.S., and nearly a third of all Americans will develop shingles in their lifetime.

Given these risks, the CDC now recommends that all adults over 50 receive the two-dose shingles vaccine Shingrix, while Zostavax may be used in particular cases for patients 60 years of age or older.

Aging patients should also be immunized against the major types of pneumococcal disease, which include pneumonia, bacteremia, and meningitis. Fortunately, recent ACIP recommendations reported by Healio indicate that herd immunity may play a role in helping to protect older patients. Previously, ACIP recommended all adults over 65 years old get the pneumococcal conjugate vaccine Prevnar13. As of late June 2019, ACIP voted to recommend that the vaccination decision be left to providers and patients jointly, as pediatric use of Prevnar13 has indirectly reduced cases in older adults.

How can providers help improve vaccine rates among aging patients?

From education to patient reminders, providers can play a critical role in improving and maintaining their patients’ immunity in later years. Below, we highlight a few ways providers can help improve vaccination rates amongst their adult patients:

Recommend: Provider recommendations have power. In a survey from the National Foundation of Infectious Diseases (NFID), 55% of respondents said that they would not receive a vaccination unless it were recommended by their doctor. Particularly with the new ACIP pneumococcal recommendations, it is important for providers to accurately assess older patients’ needs and give the best advice for their health.

Educate: Providers can alert patients to diseases they may be newly at risk of contracting due to their age. A NFID survey found that only 20% of respondents were extremely or very familiar with pneumococcal disease, and only 43% were extremely or very familiar with shingles. Patients are more likely to be immunized if they know about their potential risk of contracting these diseases.

Contact: Reach out to patients ahead of their scheduled appointments to let them know that it’s time for their vaccines, instead of asking them if they would like to be vaccinated during the appointment.

By offering the right education and support, providers can ensure that every patient is protected from vaccine-preventable illnesses throughout their lifetime.

For more information, please contact Cindy Berenson or Jeff Winokur at 800-741-2044 or info@atlantichealthpartners.com.
MARK YOUR CALENDAR!
2020 Florida Chapter ACP
Annual Residents & Medical Students Meeting
March 28, 2020
Doubletree by Hilton Orlando Downtown – Orlando, Florida

Meeting Highlights

- Residents & Medical Students Formal Poster Competition
  **Accepting online abstract submissions until January 22, 2020
  - Luncheon & Awards
  - Doctor's Dilemma™ Competition

Hotel Accommodations

Doubletree by Hilton Orlando Downtown
60 S Ivanhoe Blvd ~ Orlando, Florida, 32804

ONLINE RESERVATIONS: https://book.passkey.com/e/50032945

Phone Reservations: 866-247-3571 or 407-425-4455 Option #1 referencing the group name: FL CHAPTER ACP code: F29

Group Room Rate - $135 S/D
GROUP RATE CUTOFF: FRIDAY, MARCH 13, 2020
Reservations made after cutoff will be accepted on a space available basis and may not be eligible for the group rate.

For additional information:
FL Chapter Office: 904-355-0800
Dawn Moerings—DMoerings@floridachapteracp.org
Bridget Anderson—BAnderson@floridachapteracp.org
The Florida Chapter American College of Physicians would like to express appreciation to the following companies for their Sponsorship of the 2019 Annual Scientific Meeting:
The Florida Chapter American College of Physicians would like to express appreciation to the following companies for their support of the 2019 Annual Scientific Meeting:

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INVITATION TO FL & GA CHAPTERS RECEPTION
Florida Governors Jason M. Goldman, MD FACP and Manning H. Hanline, Jr. MD FACP, cordially invite you to the Florida & Georgia Chapters Reception on Thursday, April 23, 2020 from 8:00 pm – 9:30 pm (Following convocation Ceremony) at the J W Marriott Los Angeles at LA Live (Headquarter Hotel). Join us for networking and to honor new Fellows and Masters as well as Medical students and Residents representing Florida in ACP’s Doctor’s Dilemma & Abstract Competitions.

April 23—25, 2020
Los Angeles, CA