

LEE COUNTY MEDICAL SOCIETY

Bulletin



THE VOICE OF LEE COUNTY MEDICINE

VOLUME 25, NO. 7

FORT MYERS, FLORIDA
Daniel R. Schwartz, M.D., EDITOR

NOVEMBER 2001

LEE COUNTY MEDICAL SOCIETY MEETINGS FOR 2001

General Membership Meeting November 19, 2001

Mandatory CME for Licensure

Royal Palm Yacht Club
2360 West First Street
Fort Myers, FL 33906

6:00 p.m. - Social Time/Dinner

PROGRAMS - (Start promptly)

7:00 p.m. - HIV/AIDS Update

Presenter: Rudolf J. Kotula, M.D.,
Infectious Disease

8:15 p.m. - Domestic Violence Update

Presenter: Amanda Evans-Goff, Consultant

CONTINUING MEDICAL EDUCATION CREDITS - 2 HOURS

"This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the Florida Medical Association and Lee County Medical Society. The Florida Medical Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians."

The Florida Medical Association designates this activity for a maximum of 2 hours in Category 1 credit towards the AMA Physicians' Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

This event is not commercially supported.

DECEMBER 10, 2001 HOLIDAY PARTY

The Veranda
2122 Second Street
7-11 p.m.

Music by: Scott Cossu, Jazz Artist
LCMS Members- No Charge
Guests, Spouses, New Members,
Applicants and Retired Members- \$40.00

Inserts

- 1 HIV/AIDS Domestic Violence Seminar
- 2 Florida Patient's Bill of Rights and Responsibility
- 3 The Good, The Bad and The Ugly in Legislation

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Happy Thanksgiving

President's Message

Value of "Ineffective" Treatment

Peter Blitzer, M.D.



Sometimes a physician will recommend ineffective therapy to a hopelessly ill patient simply because there is nothing better. As a drowning man grasps at straws, the patient often chooses to follow this recommendation. Years later, families will remain grateful for "all that was done", even though the patient died.

Is it wrong for a doctor and patient to hope that a treatment will be effective, when, in truth, this hope would be hard to support scientifically?

While reading *War and Peace*, by Leo Tolstoy, to my surprise I found the answer to this question, and this month I'd like to share it with you. Here is Tolstoy's description of the treatment of Natasha Rostov in 1812. Her doctors refused to recognize that their therapies were not effective.

"This simple thought could not occur to the doctors (as it cannot occur to a wizard that he is unable to work his charms) because the business of their lives was to cure, and they received money for it and had spent the best years of their lives on that business. But, above all, that thought was kept out of their minds by the fact that they saw they were really useful, as in fact they were to the whole Rostov family. Their usefulness did not depend on making the patient swallow substances for the most part harmful (the harm was scarcely perceptible, as they were given in small doses), but they were useful, necessary, and indispensable because they satisfied a mental need of the invalid and of those who loved her - and that is why there are, and always will be, pseudo-healers, wise women, homeopaths, and

allopaths. They satisfied that eternal human need for hope of relief, for sympathy, and that something should be done, which is felt by those who are suffering. They satisfied the need seen in its most elementary form in a child, when it wants to have a place rubbed that has been hurt. A child knocks itself and runs at once to the arms of its mother or nurse to have the aching spot rubbed or kissed, and it feels better when this is done. The child cannot believe that the strongest and wisest of its people have no remedy for its pain, and the hope of relief and the expression of its mother's sympathy while she rubs the bump comforts it. The doctors were of use to Natasha because they kissed and rubbed her bump, assuring her that it would soon pass if only the coachman went to the chemist's in the Arbat and got a powder and some pills in a pretty box of a ruble and seventy kopeks, and if she took those powders in boiled water at intervals of precisely two hours, neither more nor less.

"What would Sonya and the count and countless have done, how would they have looked, if nothing had been done, if there had not been those pills to give by the clock, the warm drinks, the chicken cutlets, and all the other details of life ordered by the doctors, the carrying out of which supplied an occupation and consolation to the family circle? How would the count have borne his dearly loved daughter's illness had he not known that it was costing him a thousand rubles, and that he would not grudge thousands more to benefit her, or had he not known that if her illness continued he would not grudge yet other thousands and would take her

Continued on page 3

LCMS NOMINATIONS FOR 2002 OFFICERS

The following slate of nominations for the 2002 officers of the Lee County Medical Society is presented for your consideration. The membership will vote at the November 19, 2001 general membership meeting. If you wish to nominate someone else for an office, please be sure to have that person's approval before nominating them from the floor.

PRESIDENT-ELECT Ralph Gregg, M.D.
SECRETARY Richard Murray, M.D.
TREASURER Douglas Stevens, M.D.

MEMBERS-AT-LARGE:

Daniel Dosoretz, M.D. (2003)
Richard Kilfoyle, M.D. (2003)
Ronica Kluge, M.D. (2003)

GRIEVANCE COMMITTEE CHAIRMAN
R. Thad Goodwin, M.D.

COMMITTEE ON ETHICAL & JUDICIAL

AFFAIRS: (3 year appointment)
Richard Murray, M.D. (2004)
Joseph P. O'Bryan, M.D. (2004)
Shahid Sultan, M.D. (2003)

FMA DELEGATE ALTERNATES:

Howard Barrow, M.D.
Daniel Dosoretz, M.D.
Peter H. Blitzer, M.D.
Valerie Crandall, M.D.
Norman Duerbeck, M.D.
Gerardo Gamez, M.D.
James Fuller, M.D.
Charles Homolka, Jr., M.D.
Ralph Gregg, M.D.
Brian Kim, M.D.

Eliot Hoffman, M.D.
Ronica Kluge, M.D.
Bruce J. Lipschutz, D.O.
Richard D. Murray, M.D.
Charles Morris, M.D.
Rick Palmon, M.D.
David M. Reardon, M.D. Chair
Daniel Robertson, M.D.
Julio L. Rodriguez, M.D.
Michael Rosenberg, M.D.
James H. Rubenstein, M.D.
Douglas Stevens, M.D.
Alan D. Siegel, M.D.
Joseph P. Walker, M.D.
Joel T. Van Sickle, M.D.
Steven R. West, M.D.

Previously elected members of the LCMS Board of Governors:

2002 PRESIDENT - Eliot Hoffman, M.D.
2001 PRESIDENT - Peter H. Blitzer, M.D.

MEMBERS-AT-LARGE:

Daniel P. Robertson, M.D. (2002)
Julio L. Rodriguez, M.D. (2002)
Charles Homolka, Jr., M.D. (2002)

PREVIOUSLY ELECTED MEMBERS OF THE COMMITTEE ON ETHICAL AND JUDICIAL AFFAIRS:

Michael Raymond, M.D. - Chairman
Andree Dadrat, M.D. (2003)
John Cossu, D.O. (2002)
Javier Sosa, M.D. (2003)
Brian Kurland, M.D. (2002)
Craig R. Sweet, M.D. (2003)
Stephen Smith, M.D. (2002)

As I Recall...

ROBLEY DUNGLISON NEWTON, M.D.

Roger D. Scott, M.D.

Born in Monroeton, PA July 17, 1870 (date taken from his passport) and named for Dr. Robley Dunglison, a Scotsman, who was physician to President Thomas Jefferson (a rare historical fact!). Dr. Newton graduated from the Philadelphia College of Pharmacy in 1894 and was licensed to practice medicine in PA July 20, 1896 - these facts are known as I have his sheepskin (really skins) diplomas. It is uncertain exactly which medical college he attended, but he did graduate before being licensed in 1896. He practiced in Philadelphia out of an office in his home at 6137 Horten Street (corner of Vine and Horten) until 1925. He married Jane Todd and had two children, Mary Elizabeth and James. James D. Newton became famous for his "Uncommon Friends" Edison, Ford, Firestone, Lindbergh, and early surgeon pioneer Dr. Alexis Carrell (we still use a Carrell Patch today).

Wedding bells rang for Jim Newton and Ellie Forde in 1942, and Charles A. Lindbergh was the best man in their wedding. What a wonderful and devoted couple they remained until Jim's death in November 2000 at age 94. Ellie lives on and became 102 on May 26, 2001! They had no children.

Mary Elizabeth married Dudley Geddes and their "girls," Mina. (Mrs. Mina Edison was Godmother) born 4/28/30 and Robley born 11/12/1931, were both delivered by Dr. Newton at the first Lee Memorial Hospital on Victoria and Grand.

In 1925 Dr. and Mrs. Newton came to visit their son, James, and fell in love with Ft. Myers. They never once returned to Philadelphia according to his own statements to his granddaughters. There is not a great deal of information available about his practice in Ft. Myers or in Philadelphia. Jim Newton told me a few years ago that his father had been a physician in Philadelphia and often as a child he (Jim) would hold a light or offer other help in treatment of patients in the home office. His father had worked with Dr. John B. Deaver (a well known surgeon in history) for whom the Deaver Retractor is named. Mr. Edison called Dr. Newton "my Florida Physician", and it was he who advised Mr. Edison to go North for better facilities when he became seriously ill leading ultimately to his death in 1931 in New Jersey. The "girls" relate that he was an excellent diagnostician as he could diagnose by "smell, feel, and examination." His cure for the common cold was to swim in the salt waters of the Gulf. The family called him "Doc", and he was the peacemaker when family squabbles occurred. He was jovial and played the guitar. Dr. Quillian Jones Sr. and Dr. Newton were good friends and frequently attended Rotary Club together.

In 1936 his office was listed at 1029 First Street and in 1937 he had moved to the Ft. Myers "Beach Hotel" - phone number 1178. He was 66 years old in 1936 when he bought the Beach Hotel (Built by Dr. Winkler in 1913 and later sold to Al Waite and then to Newton) and moved there as an Inn-keeper primarily and apparently a semi retired MD (the first one at the beach). He was still listed in the city directory up until 1954. Dr. Newton died April 4, 1955 and is one of the "early settlers" in Memorial Gardens (Jane joined him in 1966). Jane, Mary Elizabeth, Mina (& husband, Barney), and Robley continued to operate the hotel until it was sold in about 1963. Charles Lindbergh wrote: "I had never been with happier or more content people" - the Newton family.

A few months ago I found Dr. Newton's name in an old city directory and was able through Ellie Newton to contact the Doctor's granddaughters, Robley and Mina. Since then I have learned a lot about Dr. Newton, et al and found new friends in Robley (& Donald) and Mina.

Thanks "Girls" for your help and donations to our fledgling museum.

Didyano: Most of you have driven on Newton Street (the short street that runs from Llewellyn to the back entrance of LMH ER). Isn't it fascinating that while this leads to the hospital, it was named for James and not Robley!

LEE COUNTY MEDICAL SOCIETY
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Julio L. Rodriguez, M.D. (02)

MANAGING EDITOR

Ann Wilke, 936-1645

The editors welcome contributions from members. Opinions expressed in the *Bulletin* are those of the individual authors and do not necessarily reflect policies of the Society.

PRINTERS

Distinct Impressions 482-6262

Membership Activity

New Members

Abdul Aziz, M.D. – Rheumatology
John A. Bishop, M.D. – Hyperbaric Medicine
Angela Bryan, M.D. – Family Practice
John Conrey, M.D. – Nephrology
Tong C. Duong, M.D. – Plastic/Reconstructive Surgery & Hand Surgery
Saurin Shah, M.D. – Radiology

New Practice

Kim Spear, M.D. effective October 1, 2001 is pursuing medical research in the development of generic dermatologic products.

Richard Liu, M.D.

ENT Associates
3487 Broadway
Fort Myers, FL 33901
Tel: 939-2621
Fax: 939-3875

Retired

Norman L. Gamse, M.D. has retired from Active Practice. He has served Lee County for 31 Years; we would like to wish him well in his retirement.

LCMS STATS

September 17, 2001-October 15, 2001		
	Current	YTD
PHONE CALLS RECEIVED	593	4270
From Physicians and Office Staff	166	902
FOR REFERRALS	172	1299
For Background Checks	32	273
Filing Complaints	7	49
Regarding Non-Members	15	108
Regarding Alliance	12	99
Regarding CMS, FMA, and AMA	42	218
Miscellaneous Calls	146	1306
Applications sent to physicians	11	72
MEETINGS	15	110
Attended on behalf of LCMS	7	59
Society Meetings	8	51
DIRECTORIES DISTRIBUTED	25	589

2001 FMA

David M. Reardon, M.D., Chair, LCMS Delegation to the FMA

The Annual FMA Meeting was held in Miami on September 21 thru September 23 at Doral Resort and Spa. Despite the beautiful surroundings there was much work to do and many important issues to address. One of the reasons I keep returning, other than no one has asked me to stop, is that there are so many talented physicians in Florida dedicated to protecting our profession and tackling the difficult problems that threaten our ability to deliver high quality health care to our patients.

Our own delegation of 13 Lee County members was there in full force. In the six years that I have been a delegate I have seen our group mature from a quiet team reluctant to speak out in reference committees and on the floor of the house to a confident band defending Lee County resolutions and contributing to discourse at every level of the process.

This year the Lee County Medical Society submitted nine resolutions. I would like to acknowledge and thank those who recognize what many consider annoyances in our practices as problems or injustices that deserve the full attention of organized medicine and put these into words as resolutions. Drs. Julio Rodriguez, Eliot Hoffman, Jim Fuller, Doug Stevens and John Fenning contributed the following resolutions on behalf of the Lee County Medical Society.

In addition to working on your behalf on the above and other important problems facing medicine in Florida we were privileged to have Governor Jeb Bush address us. In the wake of our recent national tragedy the combination of pride, patriotism, concern and empathy were palpable in the Governor's discourse. Beyond his message regarding the national and state impact of the September 11 events it was clear that he is friend of organized medicine and has and will continue to work with the physicians of Florida to protect our patients and profession in every way he can within obvious budgetary and political constraints.

You should be proud of the efforts of your delegation. Please remember to thank them for their sacrifices. More importantly, I urge you to consider becoming more involved in your medical society. If we combine our efforts and distribute the workload we can accomplish a great deal.

- 01-06 Outpatient Surgery Schedule Coverage – Adopted
- 01-07 Retired Physician Representation – Not Adopted
- 01-08 Media Campaign/Physician Issues – Amended and Adopted
- 01-01 Patient Choice and Access – Not Adopted
- 01-03 "Off Label" Use – Adopted
- 01-05 Repeal of PMATF Tax – Adopted
- 01-02 Fair Business Write-Offs for Physicians – Not Adopted
- 01-04 Statewide Insurance Watch List – Not Adopted
- 01-53 Evaluation of FMA Chapter Concept – Amended and Adopted

FMA MEETING

Valerie Crandall, M.D.

I was privileged to, once again, be a delegate to the FMA. I was representative to the Legislative reference committee. The Committee was very concerned about the medical liability crisis in Florida. The FMA Task Force on Medical Liability has been instructed to address this problem by the development of a broad based legislative package to address Florida's medical liability crisis.

From a resolution presented by Lee County delegates, the FMA is to seek legislation prohibiting hospitals from requiring physicians to utilize pharmacologic and diagnostic agents "off label" without the physicians and patient's consent.

The FMA is to present legislation to mandate "gatekeeping" for HMO specialty services to be performed by Florida M.D.'s and D.O.'s only.

The FMA is to seek legislation prohibiting pharmacists from dispensing medications on the Internet or by telephone consultation.

Also, the FMA is to work with the appropriate agencies to establish a list of diagnostic codes for which more than one nursing home visit will be allowed per month.

In summary, your FMA is working for you. Thank you for allowing me to be your delegate.

FMA ANNUAL MEETING

Eliot Hoffman, M.D.

The LCMS delegation to the Florida Medical Association Meeting in September took time from their personal and professional lives to represent the physicians - and their families - of Lee County. Your representation was strong, from Dr. Steven West who serves on the FMA Board as Chairman of the Council on Legislation to Dr. Joel Van Sicker who served as a Reference Committee member, to the remainder of the delegation that gave and heard testimony regarding a multitude of issues important to physicians and the patients we serve.

The strength of the FMA lies in the local county societies and their membership, and with the dues collected via membership, funds the legislative lobbying efforts that have in recent years been enormously successful in most of the key issues affecting the practice of medicine. If you haven't joined FLAMPAC or the 1000 club, you haven't done enough or spent enough to help ensure that the voice of the physicians of Lee County and the state of Florida are heard by the lawmakers in Tallahassee and HEHEDED!

IMPRESSIONS OF A FIRST
TIME DELEGATE

Cherrie Morris, M.D.

Being new to the political process, I wasn't quite sure what to expect, naïve is more like it. What is the purpose of this meeting anyway (besides some really fun social stuff, golfing and running into your buddies from last year)? What is the duty of the "delegate"? And where did all these resolutions come from?

Well, I'm usually a quick study and with a little help from more seasoned delegates, I think I figured it out (thanks, Alan and Ralph). You see, the resolutions are all the things we doctors get upset about, especially issues related to patient care. Any member of the FMA (like yourself) can write down the issue, send it to their county medical society and with a little rearranging into political format a resolution is born. Our county submitted several. The "delegates" speak on behalf of the resolution, initially to a committee (the resolutions are sorted out by type, like legislative, health education, finance), where the resolution either gets the thumbs up (accepted), thumbs down (not adopted) or needs to be amended (these seem to be the most controversial because they are discussed in the "house").

Now, the meat and potatoes of the meeting is the meeting of the House of Delegates. All the delegates, seated by county, are present. The speaker and vice speaker moderate the delegates as we try and gain support for, or speak against the resolutions not yet decided upon. When a resolution is accepted it is placed on the legislative agenda and then brought to the appropriate political arena (like the AMA, FMA bylaws, or the state). This is where you feel the real empowerment of having a voice. It is as simple as putting in black and white something you feel

strongly about, an issue that you complain about every day, and then having hundreds of doctors (hopefully) agreeing with you, the FMA supporting you and ultimately your legislators voting for you (by the way, that is why it is important to support doctor friendly legislators).

The meeting of course is interspersed with impressive speakers, like Governor Bush. And, yes there is time for socializing and family fun. Speaking of family, there is yet another powerful voice of support and action, the Alliance (the spouses of FMA members). They have an incredible agenda that supports and strengthens the FMA.

This was a wonderful and enlightening experience. You can make a difference, simply by getting involved. I strongly encourage new physicians to get involved, to support the LCMS, our Alliance and the FMA.

STIR THEM TO ACTION

James Fuller, M.D.

The most striking thing for me as a LCMS Delegate to the Annual FMA Meeting was to recognize the apathy of Florida doctors toward our impending demise! Maybe that is a little melodramatic, but not much. The early retirement of physician acquaintances from just a year or two ago were evident. The onslaught from competing disciplines to extend their areas of practice into ours is never ending. The attorneys continue to support their causes (including election of their candidates to public office) with generous financial support; we have a very poor showing. Our medical liability insurance will go up about 30% next year and who knows how much the year after! You may be assured the lawyers are supporting their agenda. We all need to support FLAMPAC and the 1000 Club financially and be more involved politically.

There is much we can do personally. We don't all have to go to Tallahassee; we have a captive audience in our patients. My exam room walls are plastered to the point of being tacky with bulletins and articles reflecting the problems our patients and we face. They make it easy to start a discussion, as the patients are usually the ones to start the dialogue. Even if they don't, my patients are already primed for discussion. Encourage them to write their legislators – stir THEM to action; most don't even know they have a voice.

Furthermore, we need to use our influence to actively recruit for our county society the large number of physicians who hitch a free ride on our efforts; shame them if necessary!

GOVERNOR BUSH ANNOUNCES
DR. JOHN AGWUNOBI AS NEW
DEPARTMENT OF HEALTH SECRETARY

Governor Jeb Bush announced his appointment of John O. Agwunobi, M.D., M.B.A., as Secretary of the Florida Department of Health. Dr. Agwunobi has been Acting Secretary since September 1, after former Secretary Robert G. Brooks, M.D., accepted a position at the Florida State University School of Medicine.

"Dr. Agwunobi has a passion for leadership and innovation and sees his role as one of true public service and an advocate of public health quality improvement," Governor Bush said.

"After considering several outstanding candidates for this position, I am certain Dr. Agwunobi is the right person to guide our state on a wide array of public health issues, especially as we enter a new era of preparing for potential threats of bioterrorism." Agwunobi has a wealth of experience in health care delivery, managed care, health policy and public health. He has served the people of Florida for the past year as Deputy Secretary and Deputy State Health Officer for Children's Medical Services. He has focused his efforts on improving access to healthcare and on improving the quality of certain Department of Health services.

"Dr. Brooks set the bar very high for public health, not only here in the State of Florida, but nationwide. I hope to set the bar even higher," said Dr. Agwunobi. "I am honored to be a part of Governor Bush's team." Agwunobi was born in Dundee, Scotland, and attended medical school at the University of Jos, Nigeria. In addition to his medical degree, Agwunobi holds an MBA from Georgetown University in Washington, DC, and is currently seeking his Masters of Public Health from the Johns Hopkins School of Public Health. He resides in Tallahassee with his wife, Jennifer, and their three children: Rachael, Abigail, and Seth, all of whom are very supportive of his commitment to helping improve the health of all Floridians.

Internet Medical Resources

PREPARING YOUR PATIENTS FOR FLU SEASON

Internet Offers Many Informational Opportunities

by Michael Barnaby – Public Information Officer, Lee County Health Department

Yahoo! offers a great starting point for all things related to the 2001 flu season. A special section located at http://fullcoverage.yahoo.com/flu/Health/Flu_Season/ brings together many of the best resources available online:

- Start with MSNBC's "Influenza's Reach Over Time," which traces the flu from 400 B.C. (Hippocrates) to 1997 (Hong Kong). The presentation is made in small, easy to swallow capsules. Go to <http://www.msnbc.com/health>.
- Patients will fully realize the potential seriousness of influenza after visiting "The American Experience: Influenza 1918," presented by PBS. The 1918 epidemic is covered in a thorough, yet user-friendly manner - broken into sections, accompanied by photographs, and delivered factually while maintaining a human focus. The American Experience can be found at <http://www.pbs.org/wgbh/amex/influenza/index.html>.
- As always, the CDC offers complete subject information. Although thorough, beginning with "Clinical Features of Influenza," laymen may find it dry and labored. The Centers for Disease Control and Prevention is located at <http://www.cdc.gov>.
- However, the CDC also sponsors the National Immunization Program (NIP), a much more user-friendly website at <http://www.cdc.gov/nip/flu>. The NIP site is comprehensive and well organized, making information gathering less of a chore than the CDC site. Here also physicians can view the July 13, 2000 Morbidity and Mortality Weekly Report (MMWR) on Supplemental Recommendations of the Advisory Committee on Immunization Practices (ACIP), for the most current recommendations for administering the flu vaccine to high risk groups and to others.
- The National Foundation for Infectious Diseases website at <http://www.nfid.org/library/influenza> offers another thorough discussion of flu, geared to the layman. Although created through grants from Aventis Pasteur, Roche and Glaxo Wellcome, the site doesn't appear to slant any information (even in its Treatment and Research sections) towards any proprietary products, nor make mention of any products throughout the site.

DO THE RIGHT THING

Alan Siegel, M.D.

It was soon after the events of Sept. 11th that a group of physicians from around the state of Florida gathered in Miami for the annual FMA convention. It was hard to concentrate on the usual affairs of medicine and professional life during this difficult time. But we did it. In fact I think there was even an increased sense of commitment to do the right thing.

Twelve members of the Lee County Medical Society arrived and represented you at nearly every committee and meeting. We had a number of good proposals that were discussed by the House of Delegates—and several of these were passed.

The highlight of the convention had to be the address by Governor Jeb Bush to the entire House. This was followed by the Good Government Luncheon sponsored by FLAMPAC. Several legislators were there and they all gave the same message—medicine is an important issue in the political arena and the Florida Medical Association speaks with a powerful voice in the Legislature.

We all owe a debt of gratitude to Steve West, M.D., who has become a real leader on the legislation scene. Not only is he the chairman of the Legislative Committee for the FMA, but also he was at the Governor's right side during his entire presentation. We were all impressed!

Lastly, the camaraderie of the group was excellent as usual with literally every viewpoint being represented—primary care, specialists, private practitioners, employed physicians, solo practitioners, group practitioners. We were all proud of our Alliance members who have achieved both state and national recognition for their good work.

Organized medicine is alive and well. Join the team!

HIGHLIGHTS FROM THE ANNUAL MEETING

Steve West, M.D.

The highlight of this years FMA meeting at the Doral had to be my daughter Kathleen getting closest to the pin during the golf tournament.

Another very exciting event was the arrival of Governor Jeb Bush and his brief appearance before the House of Delegates. As your Chairman of the Council of Legislation I had the privilege of escorting the Governor with Jim Dolan president of FLAMPAC and Karl Altenburger the immediate past president of FLAMPAC to the Speakers podium in the front of the House of Delegates. Allen Siegel asking him the question regarding inadequate Medicaid funding is something I will remember for a long time.

The Good Government Luncheon address by the Governor, sold out standing room only was quite memorable. The Governor spoke eloquently about the challenges facing the state since the September 11 terrorist attacks. Tourism - Florida's main economic engine is suffering. The legislature will have to meet in special session this month to redo the budget because of less than anticipated revenues.

Many legislators who have sponsored FMA bills and fought the good fight for doctors and their patients received awards. Democrats and Republicans praised the Governor and his brother, the President, for the leadership and job they are doing. One award-receiving Democrat House member, Stacie Ritter, hugged the Governor for his leadership.

FLAMPAC during the Good Government Luncheon endorsed the Governor for re-election. He is truly surprised by this and is very proud and pleased with this early pledge of support. FLAMPAC endorsed Jeb Bush for the following reasons: 1. Jeb Bush has signed into law every piece of pro-physician, pro-patient legislation passed by the Florida Legislature during his tenure as Governor. This summer despite intense pressure from the HMO/Insurance industry the Governor signed the "All Products" bill (SB 836) into law. 2. Under Governor Bush, physicians have received an increase in Medicaid reimbursement for the first time in a decade. 3. Governor Bush, unlike previous Florida governors, consults the FMA on various administrative appointments including the appointment of the Secretary of Health, the Secretary of the Agency for Health Care Administration (AHCA) and the Board of Medicine. Both Secretaries are physicians. 4. Governor Bush supports tort reform. Unlike any of his Democrat opponents, who are heavily financed by the trial lawyers, Governor Bush will not veto a medical liability reform bill if it passes the Florida Legislature. The Governor supports efforts to limit frivolous lawsuits against physicians.

In the very near future FLAMPAC is planning a statewide physician fundraiser for the Governor. If you are interested in participating in this event please contact Tim Stapleton (800) 762-0233, Fax (850) 224-4424 or email flampac@medone.org.

MY 26TH YEAR AT THE FMA ANNUAL MEETING

Ann Wilke, Executive Director, Lee County Medical Society

"Thank you" to all of our members who responded to our invitation to submit issues, which our delegation put into resolution form. We had a very successful campaign thanks to our delegates who spoke to each resolution in committee - several on the floor of the house.

Dr. Joel Van Sickler served on Reference Committee Number II, Finance and Administration and heard testimony on many issues. That Committee then made recommendations back to the full House of Delegates. Thanks Dr. Van Sickler.

A special "Thank you" goes to Dr. David Reardon, Chair who organized and helped author many of the resolutions and making this a very successful meeting. Our delegation "nite out" was a wonderful event put together by Ana and Ralph Gregg our hosts. If you see any of our delegates in the next week or so, please thank them for representing you and taking time out of their busy practices.

This was my 26th FMA House of Delegates - There were a lot of new faces this year, which will result in new ideas. The steadfast delegates were there too, to lend their wisdom. It is always a pleasure to represent the Lee County Medical Society, which is very active and well thought of around the state. Thank you.



Howard Barrow, M.D. Valerie Crandall, M.D. James Fuller, M.D. Bruce Lipschutz, D.O. Julio Rodriguez, M.D. Joel Van Sickler, M.D.



Peter Blitzler, M.D. Ralph Gregg, M.D. Elliot Hoffman, M.D. Cherrie Morris, M.D. Alan Siegel, M.D.



David Reardon, M.D.
Chair of Delegation

Steven R. West, M.D.
FMA Board of Governors District E
Chair FMA Legislative Committee

President's Message - From page 1

abroad for consultations there, and had he not been able to explain the details of how Metivier and Feller had not understood the symptoms, but Frise had, and Mudrov had diagnosed them even better? What would the countess have done had she not been able sometimes to scold the invalid for not strictly obeying the doctor's orders?"

The next time you see one of your fellow physicians treating a patient in a nearly hopeless situation, remember what Tolstoy's reaction might have been. Your colleague, the patient, and the family may not be acting rationally, but they are human.

2001 FMA ANNUAL MEETING WRAP UP

By Sandra Mortham, EVP/CEO FMA

The 2001 FMA Annual Meeting was a huge success with participation by our member physicians surpassing that of recent years. The House of Delegates accomplished many goals and a good time was had by all attending the wine tasting reception, installation banquet and golf tournament. Dr. H. Frank Farmer was installed as the 125th President of the Florida Medical Association and we all look forward to a very productive year for medicine under his leadership. Governor Jeb Bush was our keynote speaker at the FLAMPAC Good Government Luncheon and did a wonderful job speaking to calm the fears of Floridians in light of the recent terrorist attacks. If you missed the meeting this year, you will want to plan ahead for next year's meeting. Speaker Rick Lentz is already working to make our 2002 meeting more exciting!

There were 65 resolutions introduced to the House of Delegates of which 48 were adopted as submitted or amended. Watch for updates on the FMA website, www.fmaonline.org. Two resolutions were referred immediately to the new board for action. One was the resolution introduced by the IMG Section and Dade County Medical Association, calling for the formation of an Emergency Preparedness Task Force. Dr. Farmer and the board immediately appointed Bernd Wollschlaeger, M.D. as the Chair of this task force. Other members include the secretary of the Department of Health, John O. Agwunobi, M.D., the President of the Florida College of Emergency Physicians Nabil El Sanadi, M.D. and other members of the FMA. This task force has been pressed into immediate action in light of the recent Anthrax cases in Palm Beach County. Watch for the October issue of the FMA Quarterly for a booklet that contains diagnosis and treatment guidelines for biological and chemical terrorism.

Another exciting outcome of the Annual Meeting was the formulation of a joint branding logo to be used by the County Medical Societies and the Florida Medical Association. The County Medical Society Executives unanimously approved the use of the logo. A group of County Medical Society Executives met in the FMA Tallahassee office, a few weeks prior, to formulate the branding concept. This group introduced the new "First To Fight" logo to the meeting of the County Medical Society Executives. The Florida Medical Association and County Medical Societies, First to Fight - for your patients, your profession, and YOU! Other ideas included a membership blitz, where members of each medical society contact non-members to inform them of what the FMA and County Medical Societies are doing to protect them. Dr. Farmer, Dr. Lentz, and Dr. Cline were all present for the introduction of the First To Fight logo and concept.

The House of Delegates also finalized the 2002 Legislative Agenda. The issue of Scope of Practice infringements will be a top priority this year, along with tort reform and patients' choice. The legislative staff has been working diligently with members of the House and Senate for sponsors of key bills. This session will be a difficult year because of redistricting, budget issues, and the recent tragedy. Hence, we will need your help to ensure that all of the key issues are heard and passed this session. We are already accepting applications for the Doctor of the Day. An application is available on the FMA website, www.fmaonline.org.

Remember to check the FMA website for updates on the biological and chemical terrorism situation, as well as current news and information. Look for the new online CME course on biological and chemical terrorism that should be available in November. The FMA is also working with the Florida Board of Medicine to provide online licensure renewal. Look for details to come.

New Member Applicants

APPLICATION FOR MEMBERSHIP

Active members are requested to express to the Committee on Ethical and Judicial Affairs or Board of Governors any information or opinions they may have concerning the eligibility of the applicants.

LASZLO CSURY, M.D. - PATHOLOGY

Medical School: Semmelweis University of Medicine, Hungary (1984)

Internship: Jahn Hospital, Budapest, Hungary (1984-91)

Residency: Long Island Jewish Medical Center, Long Island, NY (1991-1993)
State University of New York, Brooklyn, NY (1994-98)

Fellowship: H. Lee Moffitt Cancer Center, Tampa, FL (1999-2000)

Board Certification: American Board of Pathology, Dr. Csury is in practice with Gulf Coast Pathology at 1620 Medical Lane, Ste 100, Fort Myers.



JOHN DOYLE, M.D. - CARDIOVASCULAR ANESTHESIOLOGY

Medical School: St. George's University, St. George, Grenada (1983-89)

Internship: Yale University School of Medicine Danbury Hospital, Danbury, CT (1989-90)

Residency: Long Island Jewish Medical Center, Long Island, NY (1990-93)

Board Certification: American Board of Anesthesiology, National Board Echocardiography, Perioperative Transesophageal echocardiography. Dr. Doyle is employed by Medical Anesthesia and Pain Management at 2472 Congress Street, Fort Myers.



JOHN GREEN, D.O. - FAMILY PRACTICE

Medical School: Southeastern College of Osteopathic Medicine, Davie, FL (1986-90)

Internship: University of Medicine and Dentistry, Stratford, NJ (1990-93)

Residency: Long Island Jewish Medical Center, Long Island, NY (1990-93)

Board Certification: American Osteopathic Board of Internal Medicine. Dr. Green is employed by Family Health Centers at 8750 Gladiolus Drive #6, Fort Myers.



JULES PREUDHOMME, M.D. - ANESTHESIOLOGY AND PAIN MANAGEMENT

Medical School: Stanford University Medical School, Palo Alto, CA (1983-87)

Internship: Beth Israel Medical Center, New York, NY (1987-88)

Residency: Boston University Medical Center, Boston, MA (1988-91)

Fellowship: Brigham and Women's Hospital, Boston, MA (1991-92)

Board Certification: American Board of Anesthesiology in Anesthesiology and Pain Management. Dr. Preudhomme is in practice with PhyMed Pain and Rehab located at 823 East Cape Coral Parkway, Cape Coral.

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BEWARE OF CROOKED MEDICAL CONSULTANTS

By Linda R. Minck

Unscrupulous medical consultants (i.e. reimbursement specialists, business advisors, accountants and attorneys) can cause providers to engage in risky practices and/or to become the focus of an investigation merely by virtue of association with the consultant. The Department of Health and Human Services ("DHHS") Office of Inspector General ("OIG") recognizes that responsible consultants play an integral role in developing and maintaining practices that enhance a client's business objectives, as well as in improving the overall integrity of the health care system. The OIG believes that most consultants, like most providers, are honest and the vast majority of relationships between providers and consultants are legitimate business activities. Unfortunately, small minorities of consultants engage in improper practices or encourage abuse of the Medicare and Medicaid programs. Beware of that minority. The OIG warns: "In general, if a consultant's advice seems too good to be true it probably is."

The DHHS OIG issues Special Advisory Bulletins when the agency has a high level of concern about a subject. In June 2001, the DHHS OIG issued a Special Advisory Bulletin to alert providers to certain consultant practices (including marketing practices) that may raise concerns for providers and may put the Medicare and Medicaid programs at increased risk of abuse. The Special Advisory Bulletin is online: www.os.dhhs.gov/proorg/oig/fidalt/consultants.htm.

The DHHS OIG laid out a list of "questionable practices" by consultants of which providers should beware:

- **Illegal or Misleading Representations.** Some consultants may make illegal or misleading statements or representations about their relationship with the Medicare program, the Centers for Medicare and Medicaid Services ("CMS"), or the OIG. For example, consultants may misrepresent that they have inside or special access to the OIG or to OIG materials. In other cases, consultants may misrepresent that their services or products are approved, certified, or recommended by Medicare, CMS, the DHHS or the OIG. Such claims are misleading and potentially harmful to well-meaning providers.
- **Promises and Guarantees.** Some consultants may explicitly or implicitly promise or guarantee specific results that are unreasonable or improbable. In some cases, consultants may resort to improper means to effectuate these promises or guarantees, such as submitting false claims or preparing false cost reports on behalf of a client. This misconduct potentially subjects both the consultant and the provider to liability under the False Claims Act.
- **Encouraging Abusive Practices and Aggressive Billing.** Some consultants may knowingly encourage abuse of the Medicare or Medicaid programs. In some cases, reimbursement specialists or other consultants advocate that their clients engage in aggressive billing schemes or unreasonable practices that are fraudulent or abusive of the Medicare or Medicaid programs. This conduct potentially subjects both the consultants and the client to liability under the False Claims Act.
- **Discouraging Compliance Efforts.** Some consultants may make absolute or blanket statements that a client should not undertake certain compliance efforts or cooperate with payor audits, regardless of the client's circumstances. Left undetected and, therefore, unchecked and uncorrected, improper billing or other conduct may exacerbate fraud and abuse problems for a provider in the future.

The DHHS OIG indicated that some of the marketing practices described in the Bulletin may not themselves rise to the level of fraud and may not be illegal in all cases, but all of the practices increase the risk of abuse of the Medicare and Medicaid programs. The Special Advisory Bulletin, in conclusion, said "Consultants who abuse their position of trust pose a risk to their provider clients, the Federal health care programs, and to themselves". It urged "providers to be vigilant and to exercise judgment when selecting and relying on consultants". Providers must remember that hiring a consultant does not relieve the provider for ensuring the integrity of the consultant's dealing with the Federal health care programs. Unfortunately, the provider has the criminal and civil liability risk exposure even if the provider acted on the advice of a consultant.

Linda R. Minck is an attorney with the firm of Porter, Wright, Morris & Arthur, LLP in Naples, Florida practicing solely in the area of health care law, with a strong emphasis on physician representation.

MINI-INTERNSHIP PROGRAM

On October 8 & 9, 2001, the LCMS provided a two-day mini-internship program in which the following physicians and Lee Memorial Board of Directors and business professionals participated:



Standing from left to right: Peter Blitzer, M.D., President LCMS, Thomas Kowalsky, M.D., General/Vascular Surgeon, Bruce Lipschutz, D.O., Internist, Alan Siegel, M.D., Mini-Internship Coordinator, Linda Brown, ARNP, Member LMHS Board of Directors, James Green, Grant Writer, Member LMHS Board of Directors, Abbott Kagan, M.D., Orthopedic Surgeon. Seated left to right: Mary Ellen Dorsett, Dorsett & Dorsett Associates, Inc., Rosemary

HOW TO HAVE A SUCCESSFUL NEW HIRE

Tips & Techniques from Economedix, LLC

Fall marks the beginning of a new year. Not on the wall calendar but certainly on our professional, academic and social calendars. This is a time when practices are gearing up and often hiring new staff. Getting the wrong person in a position can be one of the most costly mistakes a practice can make. Here are some Tips & Techniques to help you make a good choice.

1. Write the job description for the position based on the primary tasks the person needs to be responsible for in the position. Include secondary tasks that may need to be taken care of by this person but are normally primary tasks of another position.
2. Decide what level of expertise, skill and experience you need in the person you want for this position. If you do not have time and other resources for training you will need to have a higher level of skill and experience. You will also have to pay more.
3. Survey other practices to find out what the pay rates are for the position. Your pay rate must reflect the requirements you have for the person. If you are willing to take an entry level person and provide training, you will be able to recruit at the lower level of the pay range. If you must have experience and skills, you will have to be near the top of the range. These people already have a good job. You need to provide an incentive to leave it.
4. Advertise as widely as possible. Use newspapers, your own website (you do have one, don't you?), job bulletin boards such as www.monster.com, etc. The position should be reasonably descriptive and specify any requirements such as coding skills, licenses, certifications, experience, etc.
5. Make it easy to respond to the ad. Request a resume be faxed, e-mailed or mailed to you. Do not take phone calls at this time.
6. Prioritize the resumes based on the requested skill sets and experience. Neatness counts. Inaccuracies, sloppiness, inattention to detail on the resume will give you some insight into how this person will take care of your important tasks. Do three sorts on the resumes: qualified, unqualified and those with some potential. Your qualified resumes will get the first attention.
7. Phone each of your qualified applicants and do an initial brief interview. Find out if they are still available, what they are currently doing and why they are interested in the position. Listen carefully to how they sound and how directly they respond to the question. They will score points for being poised, self-confident and directly responsive to the questions. Extra points for asking their own relevant questions.
8. Interview the top three candidates. Focus on accomplishments, your needs and their abilities. Pay attention to everything. Did they arrive on time? Did they dress well (this is as good as they will ever look)? Were they prepared? Do they meet your needs? Ideally or minimally?
9. Do some relevant testing. If you are hiring a coder give them a coding quiz. If you are hiring a receptionist have them do a filing test. If you need someone who knows your computer systems have them demonstrate a task such as putting in a new patient.
10. Check references. Always!
11. Make your selection. Do not notify others yet. Let the candidate know they need to have a background screening prior to final acceptance. Any offer is contingent on the confirmation of all information the person has provided. After you have a person who has started, you can notify the other candidates.
12. Follow them closely during the orientation and training period. Provide positive feedback throughout.

Practice Management Tips and Techniques
Volume XV - October 12, 2001

Conner, Member LMHS Board of Directors, Suzanne Bartels, Assistant to LMHS Board of Directors, Nancy McGovern, RN, Member LMHS Board of Directors. Not present: Eleanor Blitzer, M.D., and Michael H. Weiss, M.D.

The interns were invited to the General Membership Meeting on Monday, October 8, 2001, and for a debriefing breakfast at Lee Memorial Hospital on Wednesday morning, October 10. The debriefing breakfast provided an opportunity for the interns to share their thoughts and feelings about their experience. Mr. Jim Nathan, CEO, Lee Memorial Health System, attended the breakfast along with Ms. Karen Krieger, Manager, Media Relations, LMHS.

A few comments from the participants were:

"I was impressed by Dr. Weiss' joy in his practice. He seems to love every moment's interaction with his patients and spends more time teaching than I would have expected. Thank you for allowing me to participate."

Linda Brown, ARNP, Member LMHS Board of Directors

"I would recommend this program to others. It is an excellent way to let the general public see behind the scenes. Most of the views held about healthcare come from shared misinformation. This program presents the reality that people need to know to appreciate the quality of care available to them."

Mary Ellen Dorsett, Dorsett & Dorsett Associates, Inc.

"There were no overwhelming surprises, however the mini-internship did give me a new dimension of understanding. Dr. Blitzer is an extremely busy physician and it's nice to see how she manages her time and maximizes her exposure with patients and the community at large (i.e. Reach out and read program)."

Rosemary Conner, Member LMHS Board of Directors

Our thanks to Dr. Alan Siegel, who was the program coordinator, and to the entire physician faculty.