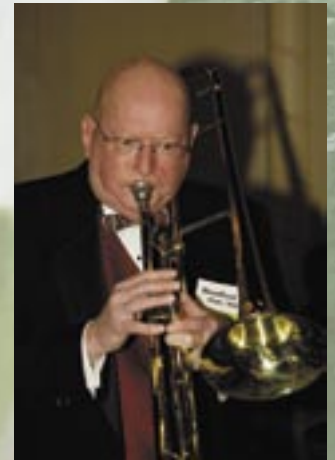


# Bulletin



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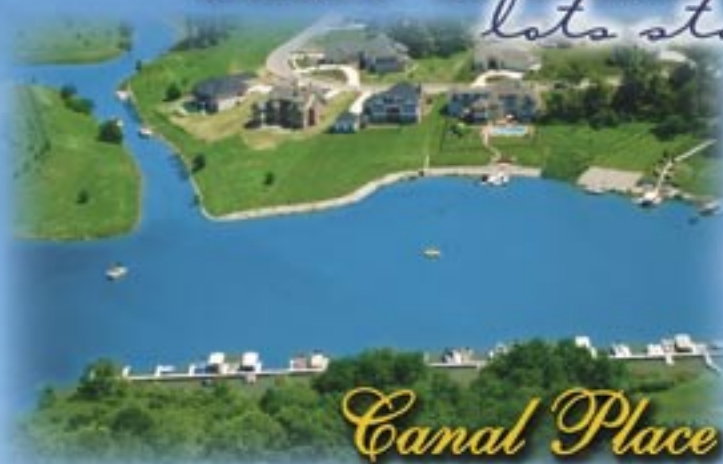


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Anthem is proud to participate in this program, which is run by the non-profit Indiana Health Information Exchange. In addition to bringing the health care community together, this program allows us to provide meaningful incentives to physicians. The following physicians and practices are already a part of Anthem's pay for performance program through the QHF program. Anthem applauds their leadership, recognizing that quality health does come first.

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Currently, Anthem's pay for performance program through the QHF program includes physicians in the specialties of Family Practice, General Practice, Internal Medicine, Pediatrics, and Obstetrics-Gynecology who are located in Boone, Hamilton, Hancock, Hendricks, Johnson, Madison, Marion, Morgan, and Shelby counties. But, this is just the beginning. Efforts are underway to increase physician and other health insurer participation, include other specialties and expand the program throughout Indiana.

For more information about the QHF program, visit [www.qualityhealthfirst.org](http://www.qualityhealthfirst.org) or call 317-644-1752 or 877-435-7343. If you're a physician interested in Anthem's pay for performance through the QHF program and your specialty and practice location are in the eligible areas, please contact your Anthem Network Representative.





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# Bulletin

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Associate Editor, *The IMS Bulletin*  
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*The Bulletin* invites news from and about members of the Indianapolis Medical Society. Copy deadline: First of the month preceding month of publication.

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We like to feature photographs or other artwork shared by IMS members on the cover of *The Bulletin*. Submit photographs, artwork, etc., to Beverly Hurt at the Society Office.

*The Bulletin* is your magazine. Share your views by submitting reprints of your published articles; articles written expressly for *The Bulletin*; quips; short stories; brief comments; ideas; cartoons, etc.

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## about our cover



Our cover honors Bradford Rawson Hale, Sr., MD, IMS Past President, current Director and former Board Chair. The background photograph was taken by Dr. Hale and used (to his delight) on a 2005 IMS Bulletin cover. The images on the cover and in the tribute article (page 8) are courtesy of photographers John R. Gentry, Jr., Wendy Kaveney (Mrs. Michael F.), Debbie Winchester and Marcia Hadley.



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# President's Page *John P. McGoff, MD*

A few weeks ago, we were witnesses to a truly momentous event in the annals of American history. Barack Obama was sworn in as the 44th President of the United States, the first African-American to do so. He was swept into office with a message of "Hope and Change." But due to the profound economic challenges facing the country, we should all "Hope we have some Change" left in our pockets after he fulfills all of his campaign promises. Sadly, many of those new, idyllic, first time, young voters will be shocked to find out that campaign promises are well, really just suggestions.

After his win in November, AMA Board of Trustee Chair, Joseph A. Heyman, MD, noted, "We think there's that window of opportunity next year to really accomplish something." The American Academy of Family Practice president, Ted Epperly, MD, went further and said he has never been so excited about a new president. (See comment above about overzealous expectations).

Throughout the campaign, candidate Obama pledged to save every family \$2,500 on their health care insurance premiums with a combination of tax increases (those making more than \$250,000) and savings from new information technology (IT), chronic disease management and decreasing administrative overhead. While I concur with the idea of trying to become more efficient, I am not certain that there is really \$200 billion in savings to be found. For the life of me, I never figured out how IT solutions as touted by Obama, Hillary and even Newt Gingrich could produce such phenomenal savings. In fact, the recent RAND study that had been purporting this has been poked full of so many holes, it won't hold water anymore.

Currently the United States spends \$2.3 trillion on healthcare, some 16% of the Gross Domestic Product (GDP). Nearly every healthcare expert believes there are tremendous opportunities for savings. One recent survey of health care executives stated that they believed upwards of half of these expenditures do absolutely nothing to improve health. So in reality, there is plenty of money in health care, it's just a matter of how it is being allocated. As I've asked in previous articles, why then do Americans rank 43rd in life expectancy and 29th in infant mortality?

If as physicians we step back and take a look at the typical cycle of life and our involvement, we will notice some striking simplicity. It all begins with an expectant mother, who if she follows closely the recommendations of her obstetrician or family physician, takes prenatal vitamins, does not smoke, drink or use drugs, she will in all likelihood deliver a healthy child. Through the early years of development, with close follow-up from a primary care provider, the usual immunizations and adherence to well-recognized general safety tips, that child should grow into a healthy adolescent.

Fortunately from age 18-40, if that same individual does not get hit by a bus or develop some malignancy, then little of the health care system is required except occasional episodes of care, i.e. fracture, pneumonia, appendicitis, etc. Interestingly the oft quoted number of 45 million Americans who are uninsured fall into this exact demographic. A coincidence?

As with any living organism, senescence sets in and the human body begins to develop those chronic diseases everyone likes to complain that we don't do enough about like hypertension, diabetes, emphysema, etc. Finally at the end of this life cycle, there is a tremendous flurry of medical activity especially in the last six months of most seniors' lives, that consume tremendous resources and produce little, if any results.

How does a better computer fix this system? There are certainly some efficiencies that can be shared between physicians caring for some 300 million Americans, as they sojourn this birth to death cycle. Our own Indiana Health Information Exchange (IHIE) is renowned nationwide for their work in providing IT solutions for physicians and health systems. But billions in savings?

Chronic disease management is as much a patient responsibility as it is a physician's. In some respects I feel that doctors are caught in the same trap as public school teachers. Everyone wants quality outcomes, whether it is in education or healthcare, but even if we have the most qualified teachers or physicians, the results will be less than stellar with uninterested parents or noncompliant patients. While Indiana University's basketball team may be at the bottom this season, the rest of our state's nearly six million Hoosiers proudly continue to place in the top ten for smoking and obesity.

Decreasing bureaucratic overhead would be a godsend for any physician's practice. A simple example of the contrary from an emergency physician's standpoint; if a little eighty-year-old grandmother comes in with an acute myocardial infarction; I have to be sure and ask about her smoking habits and cause of death of her parents. If these important, irrelevant facts of the social history are not documented, no matter how sick she is, nor how much energy I expend treating her, my level of service (E&M code) will be downcoded. This is the kind of absurdity that gives me no comfort when I hear about expanding Medicare to all patients as Rep Pete Stark, (D-CA) espouses.

Lastly, President Obama would like to expand coverage. Again while truly noble, I believe that no one in America should be bankrupted by any health crisis. The simple fact of the matter is that if you increase coverage, it will result in increased utilization and services. The only way to save money in that model is with price controls, and I don't see too many physicians buying into that process. Already more than 40% of physician practices take no Medicaid patients and 25% limit their Medicare participation. Try finding a physician to take care of these new patients, when the already pitiful reimbursement from government payers is lowered further.

So buckle up! With the economy in a tailspin, the deficit growing uncontrollably and no realistic, meaningful plan for healthcare reform, this roller coaster has just left the station. We are all eagerly listening with anticipation to that clickety-clack, clickety-clack of the clogs, as we ascend that first steep set of tracks. There are many who have high hopes and great expectations. As we go over the crest though, hold on, because it's going to be a wild ride with many ups and downs and twists and turns, and if we are lucky, not a too-sudden stop at the bottom.

**IMS**





# A Tribute to Bradford Rawson Hale, Sr., MD

It is a rare quality possessed by only a few individuals who can walk into a room and immediately bring a smile to everyone's face. That was certainly the case with Dr. Brad Hale. He had an incredible zest for life and charisma plus. Watching him jam on his trombone at my Inaugural a few months back will be a moment I will always cherish. He was a

consummate professional and always put his patients first. His caring and kind demeanor reassured the anxious parents of his young patients. I know that I was tutored at the foot of a great mentor, and I will always be thankful for his devotion to the IMS, his leadership, but most of all, his friendship.

*John P. McGoff, IMS President*



*Shown posing for his Presidential Cover with the Alliance Steering Committee. No doubt as to experienced the most fun during this photo session!*



them right in and then he talked to them. Seriously, this is what impressed my friend the most. Brad did some tests, gave them a diagnosis, and helped them deal with a life long problem. He didn't cure anything, but he mourned with them their loss of a perfect child, and then he helped them see a possible future.

Brad also gladly accepted a friend of mine, who was a Project Health patient. For those uninitiated, a Project Health patient means that Brad was paying, in the form of his time and his staff's time, for the privilege of taking care of this patient. I use the word privilege because that is what he called it, "My privilege!" when I thanked him for seeing her. He did not just see her once; he took care of her. She called me distraught this week when Dr. Hale's office called to tell her, "Dr. Hale would no longer be seeing patients." She loved Dr. Hale, even though, on two separate occasions, he took her Driver's License away because she would go out partying, as twenty-something year olds tend to do, and have a seizure. Imagine a young person *liking* someone who talked about the importance of not drinking and getting a good night's sleep. Simply put, patients loved Brad because he loved them.

Finally, I looked forward to serving with Brad. We were on various committees together, and he made each meeting better for having been there. He would inject humor as well as insight. I probably enjoyed his humor more than his insight. When you go to a lot of doctor meetings, you get more than enough insight, but there is never too much humor. Brad was a serious problem solver who did not take himself too seriously.

The Indianapolis Medical Society is richer having had Brad's active voice. We enjoyed his zest for life, his talent for music, and his love of medicine. It is no wonder that there was a palpable disturbance in the Force. The Indianapolis Medical Society suffered a grave loss. Thank you Brad, for having made each of us a little better by your example! Simply put, we loved you, and we will miss you!

*Paula A. Hall, MD, IMS Foundation President,  
IMS Past President and current Director*

Brad was so exceptional. A bright, engaging, brilliant, talented humanitarian and friend has left a trail of beauty and substance for us to remember and emulate. I truly have not met another physician or individual that had such positive, unassuming, totally approachable yet self effacing presence. His dedication was to his patients with whom he would eagerly envelope with his compassion but also with his

If you did not feel the disruption in "The Force" the other day, then you simply were not paying attention. Sadly, Dr. Bradford Hale is not going to wake up and go to the office tomorrow. He is not going to hug his patients anymore. He is not going to take a couple of young, panicked parents with a seizing child and calm them with both the best of the *art* and the *science* of medicine. Medicine failed Brad when he passed from sarcoma, but Brad did not fail Medicine.

I first met Brad when he was my Staff Doctor on Methodist's Pediatric Wards. He called us his "posse" and he taught us so much! Pediatric Wards for a Family Medicine intern can be a "back of the bus" sort of experience. Brad saw me as "not a Pediatric intern" but rather as a student and a colleague that he could teach and from whom he could learn. I kid you not!!! Brad seemed to think he could learn something from me! I had a lot of really good teachers in my medical education, but I cannot think of another staff doctor who made me feel that way.

I had the pleasure of sending friends to Brad. You do not know "anxious" until you have had a friend who is a mother with a child who has been told that there is something "wrong" with her child's brain. I called Brad and he got



*IMS Past Presidents,  
Doctors Brad Hale  
and Donald J. Kerner  
during Dr. Marc E.  
Duerden's Presidential  
Inaugural*

*Dr. Hale receiving a service  
plaque for his service as IMS  
Board Chair from outgoing  
President, J. Mark Michael, MD*



*Continued on page 20.*



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# Bulletin Board

**Frederick B. Stehman, MD**, (gynecologic oncology), IU School of Medicine, was recognized as one of the best in his field by the most recent edition of *America's Top Doctors for Cancer*.

**Shahid Athar, MD**, was named St. Vincent Hospital and Health Care System 2009 Distinguished Physician. The award will be given during the annual physician dinner on February 21, 2009 at the Indiana Roof Ballroom.

**Theresa M. Rohr-Kirchgraber, MD**, Associate Professor of Clinical Pediatrics and Medicine, IUSM, has a book chapter, "Tinnitus" published in Mushlin & Greene's *Decision Making in Medicine*.

**Dean D.T. Maglinte, MD**, Indiana University School of Medicine, was Guest Editor of a Special Issue on Inflammatory Bowel Disease of *European Journal Of Radiology* 3-Jan-2009 DOI information:10.1016/j.ejrad.2008.11.02 (epub ahead of print). A review: Kohli MD, Maglinte DDT. CT enteroclysis in small bowel Crohn's disease. *Eur J Radiol* (2008), doi:10.1016/j.ejrad.2008.11.022 (epub ahead of print) was published in this issue.

**Rick C. Sasso, MD**, Indiana Spine Group, served as the Course Program Chairman for the Cervical Spine Trauma session at Cervical Spine Research Society's 13th Instructional Course in December 2008 in Austin, Texas. "CT and Biomechanical Analysis of Occipitocervical Stability Afforded by Three Fixation Techniques," study was presented at the Cervical Spine Research Society Annual Meeting held at the same time. Dr. Sasso was an invited faculty member presenting ten lectures at the AO Spine International Interactive Spine Courses held in Davos, Switzerland in December 2008.

**Allan M. Arkush, MD**, received the 2008 Humanitarian Award from the Mozel Sanders Foundation of Indianapolis.

**John C. Barker, MD**, received the Care Select Primary Medical Provider Service Excellence Award from the Office of Medicaid Policy and Planning.

**Richard L. Schreiner, MD**, received the Glen W. Irwin Jr., MD, Distinguished Faculty Award from the IUSM.

**Glenn J. Bingle, MD**, received the Laureate Award from the Indiana Chapter of the American College of Physicians.

**Robert J. Goulet, Jr., MD**, was presented the Lawrence H. Einhorn, MD Award for his work with breast cancer patients.

**Tina M. Harris, MD** (photo unavailable) received the Achievement in Professions Award from the Center for Leadership Development.

**Timothy J. Kelly, MD**, was named a Mental Health Hero by Eli Lilly and Co.

**Clarence H. Thomas, MD**, received the Care Select Primary Medical Provider Service Excellence Award from the Office of Medicaid Policy and Planning.

**Jack Farr, MD**, was the first surgeon in the United States to perform the new cartilage repair plug (CR-Plug) for repairing localized cartilage damage in the knee. Dr. Farr is currently enrolling patients in a clinical study designed to evaluate the benefits of the new procedure.

**Josephson-Wallack-Munshower Neurology** is currently accruing patients for clinical studies involving Multiple Sclerosis, epileptic seizures, migraine headaches and orthostatic



Allan M. Arkush, DO



Shahid Athar, MD



John C. Barker, MD



Glenn J. Bingle, MD



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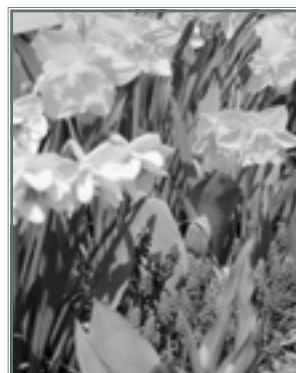


Clarence H. Thomas, MD

hypotension. For more information, contact Dr. Craig E. Herrman's Research Coordinator at 317-621-2288, ext. 1242.

**St. Francis Hospital & Health Centers** has been recognized as a Five Star Investor and a Five Star Community Investor in the fight against cancer by the American Cancer Society (ACS), Great Lakes Division, Inc. The awards recognize work sites and employers who are active in fighting cancer on multiple fronts through the ACS programs and services. Work sites must participate in a variety of ACS initiatives to earn recognition as an Investor. The Community award recognized the hospital's community programs for low or no-cost cancer screenings and smoking cessation programs offered to the public and their "Look Good, Feel Better," classes for women being treated for cancer.

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# Senior/Inactives *William H. Dick, MD*

December 3, 2008

## Speaker – Dr. Jan Ramer – Indianapolis Zoo Veterinarian

Dr. Jan Ramer is one of a group of about 300 veterinarians who specialize in caring for animals which are housed in zoos. She graduated from Purdue with a BS in Biology, worked as a keeper at a zoo in Chicago, and obtained her DVM from the University of Wisconsin in 1995. She is secretary of the American Association of Zoo Veterinarians and Director, Project Iguana, a multi-faceted Indianapolis Zoo Research and Conservation initiative to preserve endangered Rock Iguanas in the Caribbean.

As physicians we took care of the so-called higher animals – *Homo sapiens*. We have the same issues as do veterinarians when it comes to trying to understand the physiology and pathology of living animals. Veterinarians complete four years of graduate study and then take internships and residencies, with some taking further specialty courses, just as physicians do. Zoo veterinarians are involved in preventive care and general care. The Indianapolis Zoo is a medium-sized zoo with 1,800 animals. The staff consists of three veterinarians, a

PhD nutritionist and three veterinary technicians, who perform the duties of nurse and laboratory technician. There are two hospital keepers and also one veterinary intern, supported by Eli Lilly.

The function of a zoo veterinarian is preventive medicine, pre-shipment exams, trauma and illness, conservation programs, education and record-keeping. Animals are examined yearly; some can be trained to co-operate with the exam with positive rewards, such as food. Injections are another task and the ease of injection varies among species. Shooters are on standby in the examination of larger animals. Fortunately none has ever been shot. Darting of animals is more difficult than it looks on TV. Animals need a TB test in order to be shipped out of the zoo. With a dolphin, a veterinarian must accompany the animal.

Anesthesia is another interesting task, and as in humans, it can be challenging. Larger animals are intubated during surgery. With fish, anesthesia can be

*Continued on page 34.*



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| Andrew R. Greenspan, M.D. | Jennifer K. Morgan, M.D.    |
| David M. Loesch, M.D.     | Danielle M. Doyle, M.D.     |
| Thomas L. Whittaker, M.D. | Madeline M. Sgroi, D.O.     |
| James K. Hwang, M.D.      | Melody Sands, RN, CS, MSN   |
| Elsayed Aly, M.D.         |                             |

### Radiation Oncologists

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Ah ... the good old days when an investor would pay anything for a pre-construction condo in Boca Raton. Why? When finished, the condo would presumably be worth a quarter of a million dollars more and you'd carry it with borrowed money.

Wrong, in most cases. This has been a painful lesson for many people.

One of the more common behavioral mistakes that investors make involves euphoria. Nick Murray, author of *Simple Wealth, Inevitable Wealth*, says this is more than greed – people get completely blissed out and lose all sense of danger.

A definition of risk is the chance that an investment will lose value. When you reach out for higher and higher returns because someone else is getting them – and you forget that higher returns means taking more risk – you have entered the euphoria zone. You have been blinded to the fact that risk rises along with price.

According to Murray, panic – another behavioral mistake – follows, and sometimes accompanies, the euphoria stage. The higher the euphoria, the deeper the panic or capitulation. When prices start to fall, you lose composure and believe your investment price will never come back. You have to get out at any price.

If panic overtakes you, you'll need to make two decisions:

- First, you must decide when to sell.
- Second, you must decide when to get back into the market.

Your odds of being right on both decisions are very low.

We make other behavioral mistakes as well, says Murray. They include:

- Under-diversification – This involves the often costly narrowing of a portfolio to essentially one idea. This can be

a sector (example, technology stocks) or a company. If you work for Bear Stearns and invested the majority of your assets in the company stock, you found out the hard way of under-diversification.

"When you own one idea, all the lights go out and ... pretty quickly," says Murray.

- Over-diversification – This is when you dilute your investment value by trying to own everything. The root of this mistake is the inability to make choices. The solution is to focus a portfolio with a finite number of meaningful investments.

- Making portfolio decisions based on your cost basis – This means you let your cost basis dictate an investment decision just to avoid paying capital gains taxes. This is seldom prudent. When you let taxes drive the decision, you are likely to crash.

- Investing for yield instead of total return – This is the great behavioral mistake of the American retiree. Many go into retirement mistaking current yield as the only source of income. They end up buying a lot of bonds and not a lot of equities. The recent volatility in the bond market has surprised many investors.

The great long-term financial risk isn't loss of principal, but erosion of purchasing power. Many of us greatly overestimate the long-term risk of owning stocks, and more insidiously, underestimate the long-term risk of not owning stocks.

**IMS**

*Brian Wheeler is a registered representative of and offers securities, investment advisory and financial planning services through MML Investors Services, Inc., member SIPC. West Point Financial Group - 900 East 96th Street, Suite 300, Indianapolis, IN 46240. Phone (317)-469-9999*



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**Bradford Rawson Hale, Sr., MD**  
1939 - 2009



Bradford Rawson Hale, Sr. MD, 70, Indianapolis, died January, 8, 2009 at St. Vincent Hospice. Dr. Hale was born January 3, 1939 in Butte, Montana.

Bradford Hale, MD, a child neurologist in private practice with the American Health Network, served as the 131<sup>st</sup> President of the Indianapolis Medical Society from 2004-2005. He was associated with St. Vincent's Children's Hospital and was a Clinical Assistant Professor of Pediatric Neurology, Indiana University.

Dr. Hale earned his BA at Miami University, Oxford, Ohio in 1960 and his medical degree from Ohio State University, Columbus, Ohio in 1964. He served his internship at Miami Valley Hospital, Dayton, Ohio (1964-65), his Pediatric Residency at Children's Hospital, Columbus, Ohio (1967-1969). Dr. Hale was a Lieutenant in the United States Navy (1965-67). He was Board Certified in Pediatrics in 1970. Dr. Hale did his Neurology Residency at Ohio State University,

Columbus, Ohio (1969-1970). From 1970-1971 Dr. Hale was a Pediatric Neurology Fellow at Riley Hospital for Children, Indianapolis, Indiana. He was Board Certified in Neurology with Special Competence in Child Neurology in 1974.

Dr. Hale was one of the co-founders of the Muscular Dystrophy Clinic at Methodist Hospital and a special Consultant for the Muscular Dystrophy Association. He also is a Consultant for Epilepsy Awareness. He has served as a Consultant for the Diagnostic Teaching Center, Indianapolis Public School #2; the Muscatatuck State Hospital; Jennings County Hospital and the American Transitional Hospital.

His professional affiliations included the Indiana Neurological Society, Child Neurology Society, American Academy of Neurology, American Academy of Pediatrics, Indiana State Medical Association and the Indianapolis Medical Society. In addition to President, Dr. Hale served as Chairman of the Board of Directors (2001-2004), was a current IMS Director, Associate Delegate to the Indiana State Medical Association (1980-1983) and Delegate to ISMA from 1983 to the present.

Dr. Hale enjoyed the outdoors and some of his favorite activities included: camping, canoeing, hiking, playing his trombone and a multitude of other musical instruments.



## It Is Time for Each of Us to Step Up and Honor One of Our Own!

### *Honoring Bradford R. Hale, Sr., MD, IMS Past President*



IMS Members are encouraged to remember Bradford R. Hale, Sr., MD, IMS Past President, with a tax deductible donation to the IMS Foundation. All funds raised will be used to name a room in Dr. Hale's honor and purchase needed AV Equipment. Dr. Hale was an

integral part of the steering committee who guided the renovation work of the IMS Headquarters Building. He would be overjoyed at the prospect of our having future meetings in the "Hale Room." And, heaven knows, no one appreciated noise more than Brad!

This is an extraordinary step that IMS has not previously taken in the past. All who were acquainted with him will agree that Brad Hale was an exceptional physician and human being.

Dr. Hale loved the Indianapolis Medical Society. He had myriad outside interests and leisurely pursuits; yet medicine remained at the top of his list, second only to his family. His enthusiasm and incredible joy for life were always on display regardless of his activity. However, he was first and foremost a physician. Hundreds of local and not so local physicians referred their pediatric patients to Brad for one reason ... HE CARED! He cared about medicine. He cared about his patients and he cared about his peers.

Sadly, we have lost Brad, but with your donation, we will remember his dedication to the IMS, his pursuit of the art and science of medicine, and his zest for life.

We encourage you to make a donation to honor an incomparable physician who gave so much of himself to your IMS.

*Paula A. Hall, MD, IMS Foundation President*



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## *Lindsay Kay Van Dyke, 1985 – 2008*

Lindsay Kay Van Dyke, daughter of Project Health's Director, Carrie Logsdon, died December 27, 2008. She was born July 25, 1985 and graduated in 2003 with honors from Zionsville Community High School, where she was a member of the National Honor Society. Lindsay was the first recipient of the Aaron and Cathy Coates Vocal Musical Scholarship. Always active, she was a member of the softball, basketball and golf teams at Zionsville.

Lindsay Van Dyke had a smile that would light up any room – maybe that's why she was studying to become a lighting designer in graduate school. She had a real zest for life; was not afraid of anything. There was no roller coaster too high and no airplane maneuver too difficult. She received her private pilot's license at age 18 and was a two-time winner of the "Right Stuff Award" from the NASA Flight and Space Camp in Huntsville, Alabama. She was also an accomplished equestrian, having attended Camp Tecumseh in Brookston, Indiana five summers.

The theatre bug bit her when Erin Twenty (Dr. John Twenty's daughter) babysat with her after school. Lindsay would walk from the middle school to the high school parking lot, get into Erin's car, lock the doors and wait until Erin got out of school. Then they went back in for Erin's show choir practice. In high school and the first year of college she also volunteered for the Artist's Studio in Fishers. While she had a beautiful voice, she preferred the backstage arena, particularly designing lighting and special effects.

Lindsay went on to Ball State University majoring in theatre design and lighting, graduated Magna Cum Laude, and received a full scholarship at the University of Cincinnati Conservatory of Music. She would have graduated in Christmas 2009.

During her summers she interned at Western Washington University, the Louisville Opera and the Cincinnati Opera last summer. Her goal was to be a lighting designer on Broadway. In fact, she never went to the beach on spring breaks – she went to New York City.

Her smile says it all – she found fun in everything. It was her cherished lighting design professor at Ball State who said, "the next time we see a beautiful sunrise or sunbeams breaking through the clouds, you can bet it is Lindsay up there in heaven on the lighting crew."

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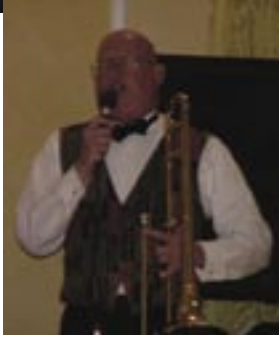
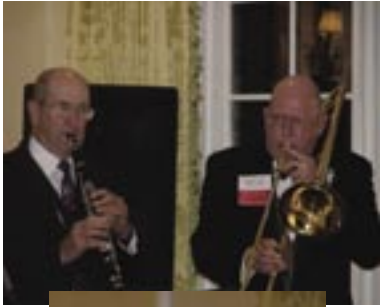
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## A Tribute to Brad Hale, MD *(Continued from page 8.)*



*Dr. Hale's Presidential Inaugural has him "jamming" with Tommy Mullinix and his band.*

*His infamous "mute" stuck to the top of his head.*

*Belting out a tune during his 2004 Inaugural*

wonderful sense of humor and youthfulness. He truly was the perfect pediatric caring doctor, for he was a wide eyed, accepting and curious child inside of a brilliant dedicated physician's body. My observation of Brad is that he refused to see spinach on the buffet of life; it was all dessert for which he was grateful to share and enjoy.

*Gregory N. Larkin, MD, IMS Past President, current Director*

Brad always made me smile.

*Alan R. Gillespie, MD, Director*

Dr. Brad Hale was the consummate Pediatric Neurologist. He was not only a brilliant diagnostician, but every patient I referred to him came back with glowing comments. He impressed both the child and parents. His ability to relate to children at their level – he was known to cavort with the child on the floor as a part of his neurological examination - and his commitment to making certain his patients got the best neurological care made Brad simply – THE BEST.

*Bernard J. Emkes, MD, IMS Past President*

Brad possessed a demeanor that was both infectious and whimsical. His delightful charm could both enlighten the dullest of meetings as well as make the most mundane of social gatherings an occasion to remember!

*Jeffrey J. Kellams, MD, IMS Secretary/Treasurer*

Bradford Hale was a man intoxicated with life. Every sight, sound, taste and smell was consumed and savored. Brad was all about the experience and the relationship. His infectious smile was irresistible. You could not say no to this man. We served together for several years in the IMS leadership, an organization he loved representing a profession he cherished. He loved his patients and valued his colleagues, and believed in giving back many fold the blessings he had received. The medical profession has lost a spirited spokesman and compassionate caregiver. His passing leaves a hole in my heart.

*John J. Wernert, MD, IMS Past President, current Director*

I met Dr. Bradford Hale 10 years ago at a party in Broad Ripple. He was already a Methodist Hospital Legend and I had heard about him for years when I was a nurse at Methodist. I had gone to Medical School with and was in

residency with his two sons Dr. Brad Hale, Jr. and Dr. John Hale at IU and working with his daughter, Nurse Ann Hale, at the Wishard Burn Unit. I was truly expecting a staunch, quiet, somber, pediatric neurologist who was a little shy and maybe a little geeky. What I found was a handsome, laughing, outrageously outgoing, life of the party, STAR who was actually wearing my (beautiful) best friend's long flowing hair on his head as a "living wig!" Dr. Hale, you are the best and I know you are in Heaven with the rest of the STARS – thanks for everything and everyone you have touched – *Bridget M. Sanders, MD, Director*

Life is so precious! We must always, always, appreciate what we have and especially our health. Sometimes, if not often, it just doesn't seem fair. He didn't deserve such an early demise. Brad always seemed to find something to smile about and bring a light side to serious issues, even if he didn't agree with opposite views being presented. Brad was truly a "bright light" at many Board meetings. I will always remember him, both professionally and socially, as a true friend who always seemed interested in others and what was important to them. I and we will miss him tremendously.

Sincerely and sadly, Steve

*Stephen W. Perkins, MD, Director*

I think this very short quote by *Dr. Joanne Hilden* says a whole lot. In case you do not know her, she is the Medical Director of Peyton Manning Children's Hospital at St Vincent. – *Bernard J. Emkes MD*

"There is a palpable sadness in our hallways today."



*His sheer "glee" at receiving a Kentucky Ham from incoming President John Wernert, MD*

*"One ham kissing another"... is what Brad dubbed this pix!*



*Additional gift from Dr. Wernert of "stump juice."*

*Another opportunity to sit in with "the boys in the band" @ Dr. Wernert's 2005 Inaugural.*



A sad moment for us and all of Indiana Medicine.

*Richard D. Feldman, MD, Director*

Dr. Brad Hale will be remembered by those of us who have given of our time to help manage the affairs of the

*Continued on page 24.*



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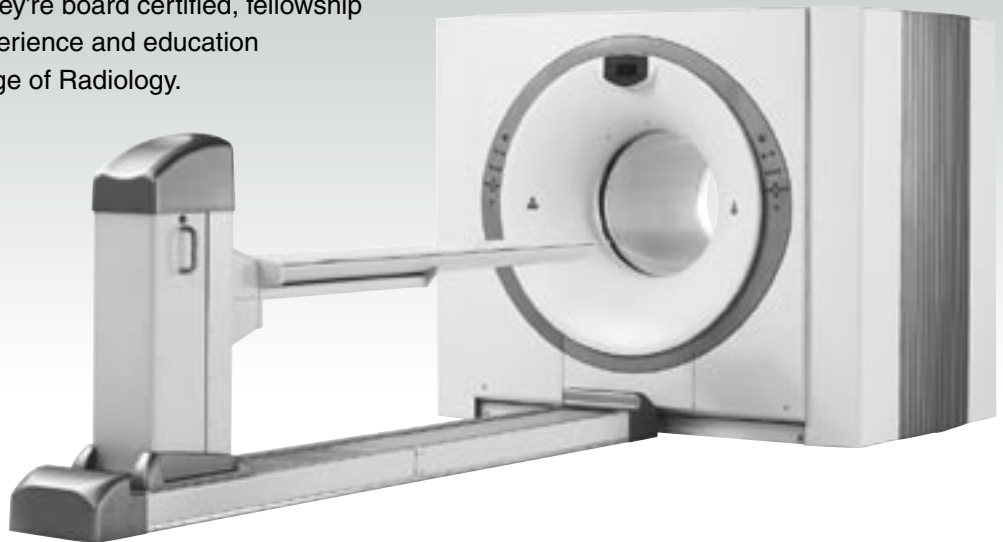
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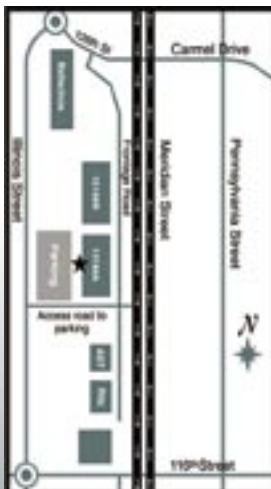
— Darcy

*"I arrived ahead of schedule, exam done ahead of schedule, out ahead of schedule! Very nice."*

— Anonymous

*"I appreciated the gentle, considerate treatment I received from everyone."*

— Caroline



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## Project Health/Project Diabetes



Carrie Jackson Logsdon, Director

### *Thank you, Louis B. Cantor, MD & MDwise, Inc.*

Louis B. Cantor, MD, is Project Health's Volunteer of the Month for February. Dr. Cantor is a native Hoosier and attended North Central High School. He said his father (who emigrated from the United Kingdom) had to go to work as soon as he got here at age 13, so there was no chance to go further in school. His mother had one year in college. "As a result, they both stressed that all of us get a good education and graduate from college," says Dr. Cantor.

Dr. Cantor became interested in biology at Indiana University and the department head gave him a job in the research lab – cleaning petri dishes. "I must have been good at it because they eventually let me run the lab." That experience led him to the Indiana University School of Medicine where he credits the husband of a cousin, Daniel Spitzberg, MD, with steering him to ophthalmology. Dr. Cantor did his internship at St. Vincent Hospital and residency with the I.U. Department of Ophthalmology. He credits the late Dr. Theodore Schlaegel (who took him to his first eye research meeting) and Merrill Grayson, MD, with helping him solidify his decision to stay in ophthalmology.

"Dr. Grayson told me I needed to get out of Indiana, complete a fellowship in glaucoma, then come back and I'd have a job waiting." Dr. Cantor did that fellowship at the Wills Eye Hospital in Philadelphia and came back to discover that there was nobody treating glaucoma in Indiana, except at Wishard Hospital. He is board certified. Now he is the Director of Glaucoma Services in the I.U. Department of Ophthalmology, and Professor of Ophthalmology Research and Education. He has also been Chairman of the American Academy of Ophthalmology's Basic Science and Clinical Service Committee since 1997.

"I believe deeply in service to our greater community. It is just something we all should do." Education of the

general public, the patients and their families is also at the top of his list. "Glaucoma is asymptomatic so our motto is *Get Eye Smart*. By the age of 40, everyone should have a complete dilated eye exam. If they aren't high risk and their vision or health hasn't turned for the worse then follow-up exams every three years is OK." Dr. Cantor said if everybody did that, we could catch glaucoma early and prevent a lot of blindness. Glaucoma is the third leading cause of blindness. "People at high risk should be examined every year. That means anyone who has a family history of glaucoma, diabetes, high blood pressure, is African American or Hispanic." "Patient education is the key for the whole family. It always worries me when patients come in by themselves. They need someone to take care of them, help them make medical decisions, drive them home and make sure they take care of their eyes."

He said people who are still in their 40's shouldn't automatically think they won't get eye disease later in life.

"Eye exams can help detect some brain tumors, multiple sclerosis, diabetes and stroke." In fact, two Project Health patients with deteriorating vision were diagnosed by ophthalmologists with multiple sclerosis. Dr. Cantor has handled some very unusual cases where glaucoma was not the only problem in the eye.

Project Health salutes Dr. Cantor and the entire practice at I.U. Eye Care for helping so many of our patients. THANK YOU!

*We want to thank MDwise, Inc. for their generous \$5,000 donation to support the mission and goals of the IMS Foundation's Project Health.*

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# A Tribute to Brad Hale, MD

(Continued from page 20.)

IMS. He was one who could be trusted to give wise counsel and present issues in a concise and cogent fashion. He was a friend to all and always willing to pitch in when tasks needed to be moved forward expeditiously.

The Indianapolis Medical Society has lost a friend and tremendous resource with Brad's passing.

*James V. Faris, MD, IMS Past President*

## **Brad Remembered:**

I've had the honor and delight to know Dr. Brad Hale for 30 years in many roles and circumstances:

### • **The Teacher**

◦ **Passionate, patient, creative, engaging, challenging, supportive.**

◦ I was Brad's first resident after he went into private practice in about 1978. That month was a highlight of my training. Observing such a talented professional at work and being able to deliberate and to practice under his guidance was an amazing opportunity which influenced my clinical interest and enthusiasm for the care of individuals with complex physical and neurobehavioral challenges. Working side-by-side with Brad for seven years in the 1980's at the MDA Clinic at Methodist was a joy and a continuing learning experience. Brad was a popular speaker at the annual ED-MED Conferences for almost a decade. His Grand Rounds were always standing-room-only and unlike any others. Brad valued his role as teacher as much as that of clinician.

### • **The Clinician (Pediatrician, Neurologist)**

◦ **Devoted, inquisitive, compassionate, deliberate, resourceful.**

◦ The news of Brad's passing came to me through a friend and grandparent of one of his long-term patients. She remembered Brad's astute clinical abilities, his compassion and honesty and his ability to elicit uproarious laughter. Brad's ability to relate to his patients (and families) augmented his intuitive facility in history-taking and examining.

◦ Patients and families also benefited from Brad's commitment to teaching as they were learners as well.

◦ Brad expressed that his patients and families were some of his greatest teachers.

• **The Advocate (IMS past-president, board member, ISMA delegate; Methodist/ Riley/ Clarian/ IU/ St. Vincent physician.)**

◦ **Committed, passionate, capable, collaborative, spirited.**

◦ All of us who participated with Brad in medical associations or medical staffs appreciated his concern for his patients and his fellow physicians. His observations and efforts contributed much to our community. As a spokesman for physicians, Brad's vexation at what he perceived as the overly complex, unfair or predatory behavior of some elements of the healthcare industry resonated beyond the physician community.

### • **The Father**

◦ **Loving, encouraging, proud.**

◦ Although a private person in this regard, Brad was clearly delighted and rewarded by the growth and achievements of his children and their families.

• **The Entertainer (Dixieland jazz trombone, double-belled euphonium, flute, recorder, musical saw, ...)**

◦ **Talented, versatile, inspiring, collaborative, creative, joyous.**

◦ My first musical experience with Brad was his virtuoso performance on the saw in his basement. Brad eventually purchased a double-belled euphonium we admired on a break from rounding, but I never heard him play it. Since then, I've been privileged to hear him play a flute duet with a resident, a recorder ensemble at Penrod and, on numerous occasions, the trombone. Medical meetings provided opportunities for Brad's fans to hear his exuberant licks on trombone with his Dixieland group. Over the years, one snappy Mississippi delta tune or another just escaped during a busy day. My last musical experience with Brad was an ad hoc performance on the saw at my urging in a hardware store where we happened to meet. It was greeted with requests for encores by the small but appreciative audience. Music permeated Brad's being and spilled out in an irrepressible and jubilant fashion just like Brad.

### • **The Neighbor**

◦ **Enthusiastic, unpredictable.**

◦ This aspect of Brad's life is known to me only through his recounting of a holiday event in "the distant past." The unannounced ceremonial firing of a brass mortar (the ThunderMug) in his neighborhood resulted in burglar-alarms and police sirens which prevented further performances.

• **The Outdoorsman (Fly-fishing, canoeing, camping, hiking, bicycling...)**

◦ **Ardent, skilled, tireless, adventuresome, wise.**

◦ One of my disappointments is our failure to share more of these experiences. Brad and I discussed them periodically, but never brought more than a Saturday's bike excursion to fruition. I can only imagine paddling a quiet lake, learning to fly-fish or sitting around a campfire under the stars enjoying the company of friends and the inimitable Brad.

### • **The Friend**

◦ **Constant, sincere, concerned, supportive, inspiring**

◦ Brad and I discussed the progression of our respective lives and careers many times over the years. He remained a trusted confidant and supporter and is already missed.

Brad,

Your unanticipated and untimely departure leaves a hole in the lives of your family and so many others. All of us you touched in small ways or great will carry memories of you to inspire us and spark a smile. I anticipate a glorious reunion on a brighter day with Dixieland jazz playing and fingers snapping. Thanks and farewell!

Your friend and colleague, John

*John C. Ellis, MD, IMS President-Elect*

"Brad was an energetic and optimistic person with a great love of life – his music, his family and friends, and his profession.

He has made many positive contributions to our Society, his patients, his students, and his colleagues.


All of us will miss him and his joyful sense of humor."

*Jon D. Marhenke, MD, IMS Past President, current Director & ISMA Immediate Past President*

We are all in disbelief that Brad has been taken from us much too early ... As many have said how much he will be missed ... His humour especially ...

*Peter L. Winters, MD, IMS Past President*

*Continued on page 30.*



**“When I woke up in Hook Rehab  
I had no idea how I’d gotten there.  
Thankfully, the doctors, nurses  
and staff had a plan to get me  
back where I belong.”**

Chad doesn't remember the day a passing car lost control and slammed a parked vehicle into his body. He has no recollection of the traumatic brain injury and coma that followed. But he does remember waking up six weeks later at Hook Rehab with a determination to go home. So, along with the doctors, nurses, therapists and staff, Chad began intense therapy sessions and attended countless group meetings focused on retraining his brain to remember, plan and respond. Today Chad's memory is improving; he's back at work and slowly resuming his life. "I still can't remember what happened to me," he confesses, "but I'll never forget the people who helped me get my life back."



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### Renewal season opens in April

All licensed physicians will be receiving renewal notices in the mail starting late April 2009. Please make sure that the Indiana Professional Licensing Agency has your most current address. Address changes can be emailed to [pla3@pla.IN.gov](mailto:pla3@pla.IN.gov) along with your license number. The renewal notice will look different this year. **It will be in the form of a letter and will be mailed in a window envelope.** The notice will inform you of the need to renew your current MD/DO license as well as your Controlled Substance Registration with the State of Indiana. I strongly encourage everyone to renew online by visiting [www.pla.in.gov](http://www.pla.in.gov) and select the "License Express" option. The renewal fees have remained the same.

For the last few years the MLB has participated on the Indiana University School of Medicine's Workforce Taskforce. From the discussion of the taskforce one element was considered critical and that was the data collected by the surveys administered during the renewal of health care providers. The surveys have been conducted every two years for the last decade and are instrumental in determining workforce development issues that face Indiana.

The online survey is administered by the MLB on the behalf of the Indiana Department of Health to capture current, relevant information about how the practice of medicine in administered in Indiana. Hardcopy surveys have become cost prohibitive to be administered therefore there is a need more than ever for renewals to be completed online. The survey is considerably shorter than in years past so should literally only take a minute.

As with any online transaction there are fees associated with renewing online. These fees are not collected nor in the control of the MLB and are a product of the credit card company and online provider. As you will find the fee is in addition to the renewal fee. MLB and IPLA are consistently working to reduce these fees as we recognize they pose a burden to completing an online renewal.

If you are renewing a CSR (controlled substance registration) in addition to your medical license please make sure you leave the section called "group" checked. This is not to renew a group of physician licenses it is to renew your personal group of licenses – your medical license and all controlled substances registrations you have that are current.


Thank you in advance for your time and consideration of submitting your renewal online and completing the survey.

If you have any questions or concerns regarding your renewal please contact the Medical Licensing Staff at [pla3@pla.IN.gov](mailto:pla3@pla.IN.gov)

### On-line license verification

The MLB has a new on-line secure official license verification system. Physicians, Hospitals etc. may go online and obtain an official license verification. The fee for each verification is \$10.00 along with a minimal processing fee. Licensees would also need to use this system for official license verification to be sent to another state licensing Board, via email, as we will no longer be processing the paper verifications. This service can be accessed at <http://www.in.gov/pla/license.htm>

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# CME & Conferences

## Community Hospitals Indianapolis

### Community Hospital East

2nd & 4th Chest Conference (Case Presentations)  
Wednesdays Room 3436, 7:00 - 8:00 a.m.

Every Tumor Board (Case Presentations)  
Tuesday Medical Staff Conf. Room, 12:00 - 1:00 p.m.

First Critical Care Conference  
Wednesday Medical Staff Conf. Room, 12:00 - 1:00 p.m.

Second Medical Grand Rounds  
Wednesday Medical Staff Conf. Room, 12:00 - 1:00 p.m.

### Community Hospital South

Fourth Medical Grand Rounds  
Thursday Conf. Rooms A & B, 7:30 - 8:30 a.m.

3rd Tumor Board (Case Presentations)  
Wednesday Conference Room A, 7:00 - 8:00 a.m.

### Community Hospital North

Second Tumor Board (Case Presentations)  
Wednesday Board Room, 12:00 - 1:00 p.m.

First North Forum  
Friday Board Room; 12:00 - 1:00 p.m.

### North Cancer Pavilion

3rd Case Presentations  
Wednesday Melanoma Conference, 7:00 - 8:00 a.m.

For more information, contact Valerie Brown, (317) 355-5381.

## Kelley School of Business

### The 21st Century Perfect Storm: Health Care, Energy and the Environment

Wednesday, March 11, 2009 9:00 am. to 2:00 pm.  
Indiana Convention Center

The 63rd Annual Indiana University Business Conference brings together a broad array of subject matter experts and top executives from major US corporations who will provide insights on how business can weather the storm and prevail in difficult times.

Speakers include: **David Brooks**, Columnist, *New York Times* and Analyst of *NewsHour with Jim Lehrer* and *All Things Considered*; **Susan Dentzer**, Editor-in-Chief, *Health Affairs* and Health Correspondent, *NewsHour with Jim Lehrer*; **Amory Lovins**, Cofounder, Chairman and Chief Scientist, Rocky Mountain Institute and Author, *Small is Profitable* and *Winning the Oil Endgame*; **Bill McKibben**, Environmentalist and Author, *Deep Economy* and *The End of Nature*; **Michael A. Evans**, Founder, President and CEO, AIT Laboratories; **Douglas Lattner**, Chairman and CEO, Deloitte Consulting LLP; and **Michael G. Rippey**, President and CEO, ArcelorMittal USA.

Register by February 24, 2009 at <http://kelley.iu.edu.busconf>

## The Indianapolis Medical Society

### February

3 IMS Board, Society, 6:00 PM, Social; 6:30 PM, Dnr/Mtg.  
4 ISMA's Medicine Day at the Statehouse  
17 Executive Committee, Society, 6:30 PM, Sandwiches;  
Activate Nominating Committee.

### March

4 **Senior/Inactive Luncheon Meeting, Noon, Society**  
9 AMA President's Forum Grand Hyatt, Washington, DC  
(Pres & Pres-Elect) precedes Advocacy Conf.  
10-11 National Advocacy Conference, Washington, DC  
17 Executive Committee, Society, 6:00 PM, Sandwiches.  
Nominating Committee following EC.  
30 **Happy Doctor's Day!**

### April

7 IMS Board, Society, 6:00 PM, Social; 6:30 PM, Dnr/Mtg.  
20 **Alliance Delivery of Spring Bouquets & Truffles - Staff Appreciation Week**

## Clarian Health Partners

### IU - Methodist - Riley

Feb. 15-18 Hepato-Pancreato-Biliary Disease:  
The IU Multidisciplinary Approach  
The Westin Kierland Resort, Scottsdale, Arizona

Feb. 20 32nd Annual Arthur B. Richter Conference in  
Child Psychiatry  
Ritz Charles Banquet Facility, Carmel, Indiana

Feb. 21 Annual Meeting of the Indiana Society of  
Anesthesiologists and Anesthesia Update  
University Place Conference Center, Indianapolis

Mar. 13-14 Indiana Alzheimer Disease Center 2009  
Spring Symposium  
Indiana History Center, Indianapolis, Indiana

April 4 Colonoscopy and Endoscopy Technology Workshop  
University Place Conference Center, Indianapolis

April 4 Practical Pearls:  
General & Community Pediatrics 2009  
Ruth Lilly Learning Center, Indianapolis, Indiana

April 24 Diabetes Update  
University Place Conference Center, Indianapolis

May 20-21 The Second International Conference for  
Individualized Pharmacotherapy in Pregnancy  
IUPUI Campus Center, Indianapolis, Indiana

June 4-5 Garceau-Wray Lectureship  
University Place Conference Center, Indianapolis

July 17 Review and Interpretation of the 2009 ASCO Meeting  
University Place Conference Center, Indianapolis

Course dates and locations are subject to change. For more information, please visit <http://cme.medicine.iu.edu> or call 317-274-8353.

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## St. Vincent Hospital & Health Services

Feb. 2 & 4 ACLS Recertification  
Contact Kim Viehe at 338-6786  
5.0 credits

Feb. 3, 10, 17, 24 Internal Medicine Grand Rounds  
Cooling Auditorium  
Contact Willette Barnett at 338-3634  
1.0 credit

Feb. 3, 10, 17, 24 Musculoskeletal/Sarcoma Tumor Board  
Contact Mary Byrd at 338-2303  
1.0 credit

Feb. 3 & 17 Pediatric Grand Rounds  
Contact Kim Nardi  
1.0 credit

Feb. 16 & 17 ACLS Initial  
Contact Kim Viehe at 338-6786  
10.0 credits

Feb. 20 PALS Recertification  
Contact Kim Viehe at 338-6786  
4.5 credits

Feb. 26 & 27 PALS Initial  
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# Dizziness and Balance Disorders

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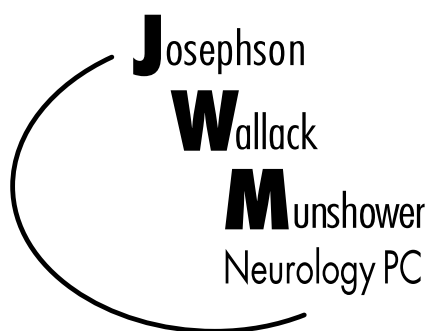
Any of these conditions can cause a person to fall, which can lead to broken bones, disability, the need for surgery or even death. If your patients suffer from any of these conditions, JWM Neurology can help:

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- **Gait Disturbances**

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2. Among older adults, falls are the leading cause of injury deaths. They are also the most common cause of nonfatal injuries and hospital trauma admissions.
3. Falls are the most common cause of traumatic brain injuries.
4. Most fractures among older adults are caused by falls.
5. A person's risk of falling increases with certain neurological conditions such as Parkinson's disease.



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Statistics cited from the Centers For Disease Control and Prevention and National Institutes of Health.

# A Tribute to Brad Hale, MD *(Continued from page 24)*

Brad's impact on those around him is quite evident in the thoughtful and eloquent tributes provided by his fond colleagues on the Board of the Indianapolis Medical Society. I will always remember Brad's smile, laugh, and quick wit. He thoroughly enjoyed giving back to the medical community and was an inspiration to all who were fortunate enough to know him.

*Stephen R. Klapper, MD, Director*

I will always remember Brad's invariable cheerfulness and happy demeanor. We will sorely miss him.

*J. Mark Michael, MD, IMS Past President, current Director*

Bradford Hale was a man who was gregarious and exciting to be with and you would never quite know what he might say next. My friendship was forged with Brad during our work together at the Indianapolis Medical Society. He was a delight to be with at a party and if you had a chance to spend some personal time with Brad, you would see a compassionate and thoughtful man who possessed great funds of knowledge.

I had the opportunity to spend some personal time with Brad when we went to Washington, DC, during an AMA Leadership conference. In addition to attending meetings, Brad and I left the hotel one early morning (5am) to walk about the DC area and "see the sites." I was impressed with his knowledge of US history and his kindness to everyone we met during our journey. Typical of Brad was his departing gift to me of a neck tie printed with a map of Washington, DC, to commemorate our day together.

It seems that the main experiences we take out of this life are the relationships we build with others. I will miss Brad and his friendship.

*Marc E. Duerden, MD, IMS Past President, current Director*

A friend once told me "It's nice to be important, but it's more important to be nice."

Brad was both. Very.

Chris

*Christopher D. Bojrab, MD, Director*

Brad Hale was one-of-a-kind. The cartoon stereotype of the white-coated, buttoned-down physician had never met Brad. With his larger-than-life personality, infectious smile, and animated gestures, he immediately captured your attention. He specifically played to his patient audience – children and their anxious parents – putting everyone at ease with his laughter, his caring and his dedication. People never eagerly seek an audience with a neurologist, especially a pediatric neurologist. And yet, Dr. Brad Hale seemed to make the bad times, not so bad.

Brad was a man of many layers and talents. He brought to the Medical Society and the Board of Directors a perspective often unique, needing a second look or providing an optimism sorely needed on some days. Beyond his clinical interests lay his talents with several musical instruments, particularly the trombone, performing (at a Medical Society function here and there), and friendships shaped around his long-standing involvement with music. He soaked up the outdoors, always looking for an opportunity to explore, experience, and enjoy. The medical community has lost an individual who played his own song, heard his own drummer. And now, although the air is silent, we still hear Brad's special tune.

*Jamie S. Street, MD, IMS Past President*

When I reflect upon my collegial relationship with Brad Hale I immediately recollect his joyful exuberance for life. While my association with Brad was mostly during IMS

*Continued on page 37.*

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# Indianapolis Medical Society

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## Delegates to the State Convention, September 2009, Indianapolis

*The year shown in parentheses indicates year in which the term expires following the conclusion of the ISMA Annual Convention.*

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Vacant

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Robert M. Hurwitz (2011)  
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Marc R. Kappelman (2011)  
Alan P. Ladd (2011)  
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Mary Ian McAteer (2011)  
Clement J. McDonald III (2011)  
James D. Miner (2011)  
Maria C. Poor (2011)  
Richard H. Rhodes (2011)  
)

## Alternate Delegates to the State Convention, September 2009, Indianapolis

*The year shown in parentheses indicates year in which the term expires following the conclusion of the ISMA Annual Convention.*

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Leanne M. Fortner (2009)  
Robert J. Goulet (2009)  
Charlene E. Graves (2009)  
Paul K. Haynes (2009)  
Randy A. Hock (2009)  
Terry L. Layman (2009)  
Robert Michael Pearce (2009)  
David M. Ratzman (2009)  
Jeffrey M. Rothenberg (2009)  
Bridget M. Sanders (2009)  
David J. Scruby (2009)  
Steven Richard Smith (2009)  
H. Jeffery Whitaker (2009)

F. Keith Bean (2010)  
Benjamin J. Copeland (2010)  
Woodrow A. Corey (2010)  
Sheila M. Gamache (2010)  
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Mark M. Hamilton (2010)  
Timothy L. Hobbs (2010)  
Andrew A. Johnstone (2010)  
RoseMarie Jones (2010)  
Martin Kaefer (2010)  
Jeffrey J. Kellams (2010)  
Anthony W. Mimms (2010)  
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Ronald L. Young, II (2010)

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E. Michael Keating (2011)  
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John D. MacDougall, 1987-1988  
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Alvin J. Haley, 1980-1981

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**Senior/Inactives** (Continued from page 12.)



bubbled into the tank and bathed over the gills. The walrus has a very difficult time with anesthesia, with 50% of them dying during surgery. The cause is unknown and research in this area is ongoing. Few zoos keep walrus. Veterinarians must be vigilant to watch for West Nile virus

and avian flu. The tortoise can get bladder calculi. Indeed, one was taken to Methodist Hospital and treated in the Urology surgery suite. A recent wound in an elephant was treated with unpasteurized honey after multiple antibiotics failed – the wound eventually healed.

The conservation program has focused on the Madagascar lemur, walrus, dolphin, elephant, white rhino and iguana. The thyroid gland in the dolphin is deficient in iodine because of the difference in fish diet in the wild and in the zoo. Many of the dolphin babies have thyroid goiter and some die from this problem. They are treated with supplemental iodine. The walrus is being studied for their dive lung physiology. They can hold their



breath for 20 minutes in the wild but have to be trained to even hold their breath for 10 minutes in the zoo.

The first African elephant to survive in a zoo in the U.S. after artificial insemination occurred at the Indianapolis



Zoo. "Zoo's are all about reproduction," Dr. Ramer told us. The Zoo has now had two baby elephants survive after artificial insemination. Elephant semen cannot be frozen and must be shipped the same day to Indianapolis after the female elephant has had the second of two LH peaks. Dr. Ramer showed many slides of the insemination process that would be off

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limits and x-rated in her talks to third grade classes. Performing artificial insemination on a 10,000 pound animal is as difficult as one can imagine. Even locating the cervix of the female elephant can be a challenge.

As director of Project Iguana, Dr. Ramer has spent time in the Dominican Republic and the Cayman Islands,

studying two different species of the *Cyclura* iguana. These studies in the wild are designed to help endangered animals survive captivity. Two research papers have been published about these iguanas.

She also called attention to the Indianapolis Prize, a \$100,000 award that is given annually by the Zoo to a person who makes a significant contribution to animal preservation.

Dr. Ramer taught us many things about animals that we did not previously know. It was interesting to see how blood is drawn in the different species and how exams are performed. The study of the sexual cycle can aid in the process of artificial insemination. Veterinarians have the same issues that physicians do in trying to understand animal diseases – there is so much more to know!

Note: I wish to thank Dr. Gerald Kurlander for his assistance in taking notes about Dr. Ramer's fascinating talk.

**IMS**

*Animal photographs courtesy of the Indianapolis Zoo*



*Our speaker, Jan Ramer, DVM, poses with Dr. Gerald J. Kurlander, left, and Dr. William H. Dick, right, during the December 3, 2008 meeting.*



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# A Tribute to Brad Hale, MD

(Continued from page 30)



*"Serious up, boys, this is for the cover!"*

*"Power struggle" ensues during cover shoot.*



Board activities and social functions, I was also aware of his many talents for music, entertainment and outdoor activities, especially as they involved children. His joy for these endeavors was contagious. He was a gentle giant who cherished the children he attended in his medical practice. He lamented the incursion of bureaucracy, regulation and "business" into the medical profession and placed "doing the right thing" in caring for his patients above all else. He exhibited the highest standards of medical practice as a caring presence and represented our profession most admirably.



*Ground Breaking. Dr. Hale was an integral part of IMS Building's Renovation Committee.*

I recall an occasion when as IMS President he was a member on an Indianapolis Business Journal Power Breakfast panel. His opening comment was a pointedly humorous analogy between a table favor for the event and our current health care reimbursement system. He voiced that the object was shiny, very attractively packaged and desirable, but no one could discern how it worked. He then did a masterful job during the panel discussion of comparing this perception to the nature of our current day health care reimbursement system.

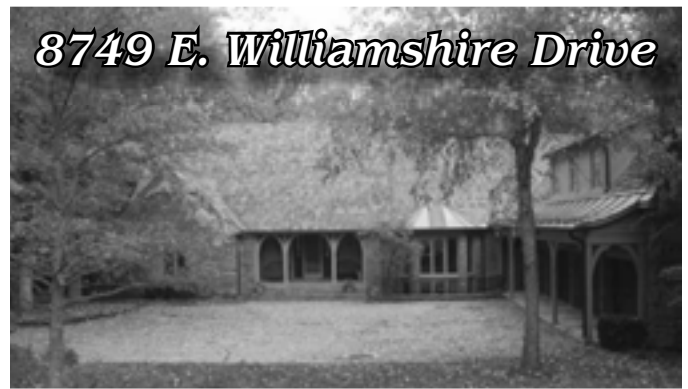
The medical profession was made happier, richer and more colorful by Dr. Hale's dedicated involvement. He will truly be missed.

*Gerald C. Walthall MD, IMS Past President*

What beautiful tributes to such a special man. Brad has touched so many lives. I will always remember him jamming with the band at Dr. McGoff's inaugural last Fall- what a treat to hear him play his trombone and witness his pure joy!

Brad, we will miss you more than words can ever say.

*Heidi M. Dunniway, MD, IMS Immediate Past President*



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We will sorely miss our dear colleague. Brad Hale was, in his years of training and afterward, as full of life as any human I have known. Each day his smile and greeting would bring a smile from every patient and acquaintance that he encountered. His love of life, medicine and learning was unparalleled. He improved the lives of all the people he encountered.

He was never a stranger to anyone he met. Happy travels Brad.

*Michael T. Stack, MD, Director*



*"Just happen to have my horn in the car," he remarked @ Dr. John McGoff's 2008 Inaugural - here he joins Gus Spenos Quartet.*

*IMS Past President, current Director, and IMSF President, Dr. Paula A. Hall, "heralds" Dr. Hale's arrival at Dr. John McGoff's 2008 Presidential Inaugural.*



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If you haven't visited [www.imsonline.org](http://www.imsonline.org) in a long time, you are missing something wonderful! The site has been (and may still have a few changes to go) undergoing a renovation! As with all construction, delays are inevitable; but soon it will be running smoothly. As we finish the process, please send your comments at [ims@imsonline.org](mailto:ims@imsonline.org).

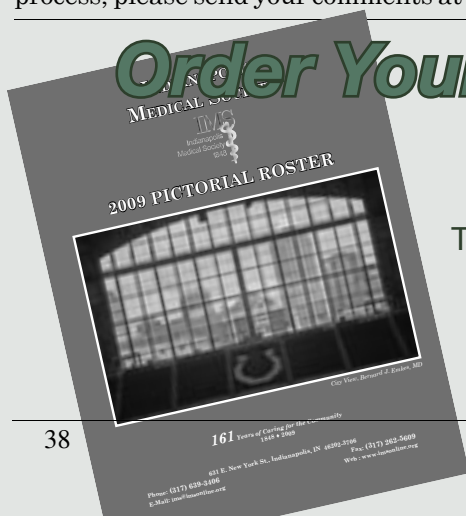
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