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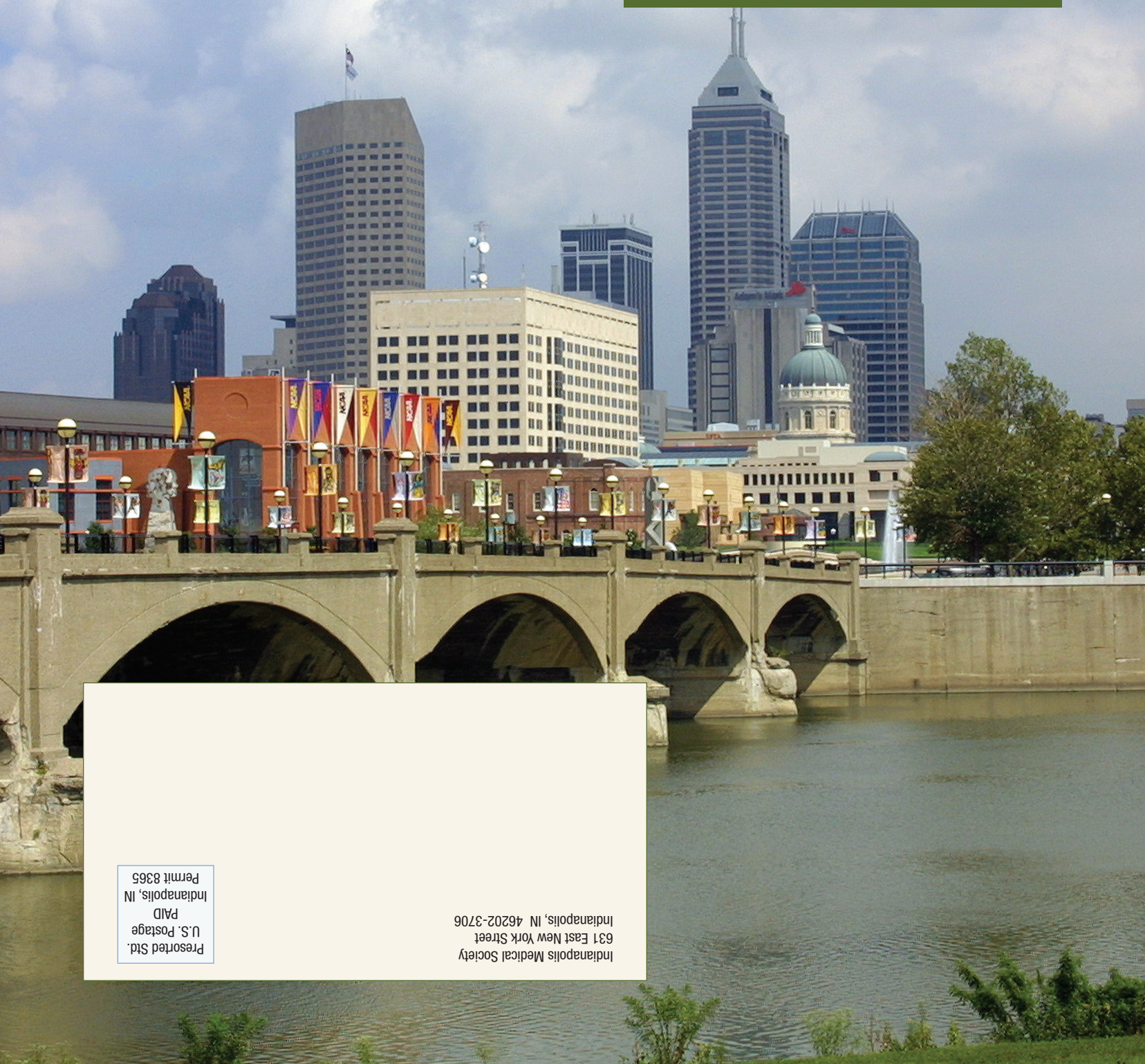
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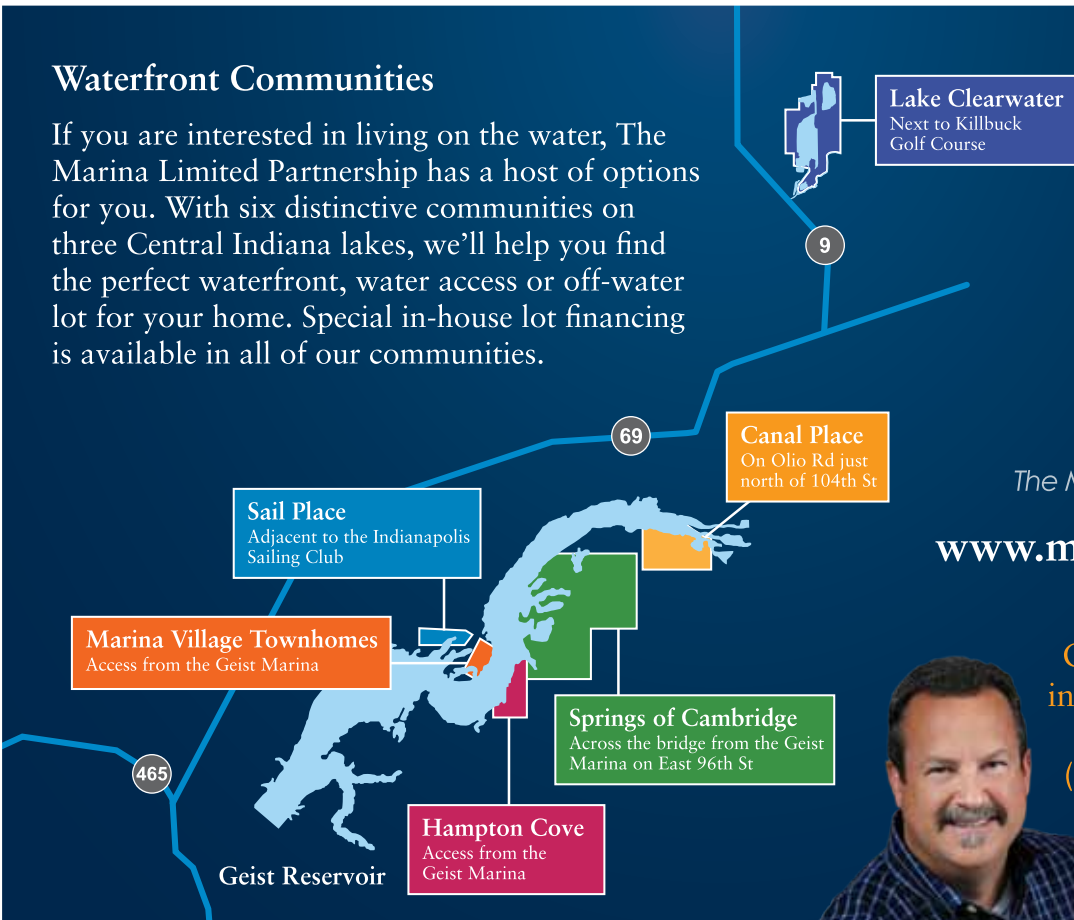
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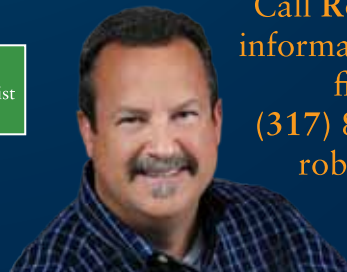
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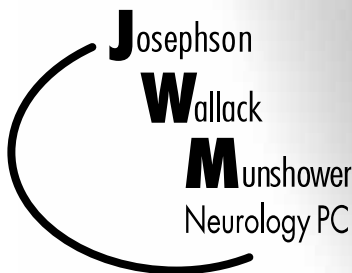
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in this issue

Special Features

President's Page

The Heavy Burden of Mental Illness: Individual, Family, Societal, and Financial
Jeffrey J. Kellams, MD 7

Senior/Inactives

Speaker: Robert Vane – President Lincoln and General Grant
William H. Dick, MD 8

Project Health

Thank you, Dr. Dale A. Rouch
Carrie Jackson Logsdon, Director 14

In Summary

Insurance Complaint? 22

Departments

About Our Cover	5
Advertisers' Index	22
Bulletin Board	11
Classified Advertising	www.imsonline.org
CME & Conferences	20
IMS Leadership	18
In Memoriam	16
New Members	12

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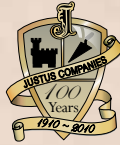


On our cover: This beautiful Indianapolis skyline photograph is courtesy of IMS Board Member and avid photographer, Dr. Christopher D. Bojrab.

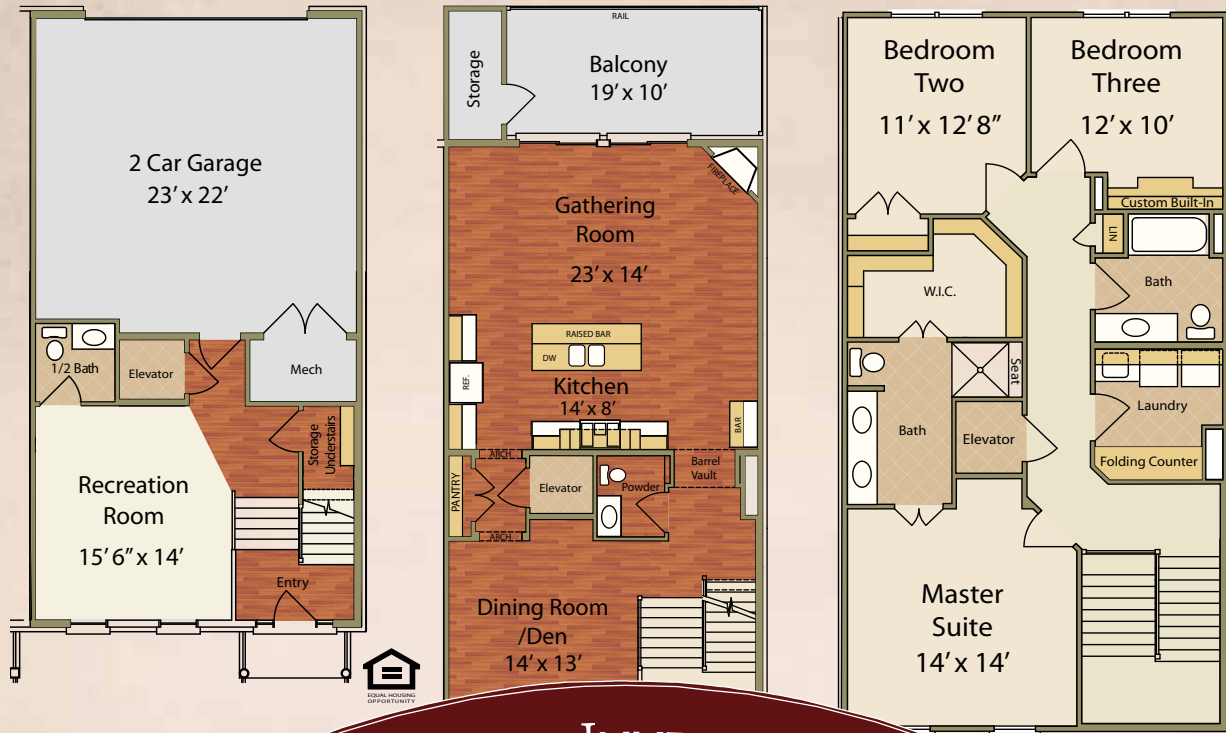
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President's Page *Jeffrey J. Kellams, MD*

The Heavy Burden of Mental Illness: Individual, Family, Societal, and Financial

As your soon- to- be immediate past president of the Indianapolis Medical Society, allow me to acknowledge my sincere thanks to the staff of IMS who really do the work of this organization and allow me to look presidential and act as a figurehead. Myself as president, the executive committee, and the IMS board of directors lean heavily on the IMS staff to continue the day to day operations of this finely tuned 163 year old organization. The past year has raced by all of us with lightning speed with increasing challenges that have to be addressed alongside and in addition to quality and attentive patient care. Electronic medical records, accountable care organizations, and national health insurance initiatives are only a few of the ala carte items that have had to be addressed in addition to the day to day care of patients. The speed of transition and the necessity of change just to stay up with the evolving landscape of medicine have all of us both perplexed and yet hopeful for the future of our profession.

As I mentioned in my presidential profile in the September, 2010, *IMS Bulletin*, I preferred to forego a formal presidential inaugural and utilize the money saved for psychiatric services needed within the community. That was accomplished. Future presidents may wish to return to a traditional inaugural. That is always an individual decision we must support for each new president. As I also mentioned in my profile I would be focusing on psychiatric issues in each of my monthly *President's Page* articles in the *Bulletin*. There were two reasons for this: first, I know psychiatry issues well; and, secondly, I felt this medium would provide an excellent opportunity to update my colleagues on some of the issues we confront as psychiatrists. This plan subsequently generated articles on "The History of Psychiatry in Indiana," "The Mental Health Center," "The Psychiatric Medical Home," "Suicide," "Homelessness," "Professional Groups Working with the Legislature," "Random, Irrational, Aberrant Behavior," "Bullying," "The New Wishard," "Physicians Also Need Assistance," "Accomplishments with Adversity," and my final President's Page entitled "The Heavy Burden of Mental Illness: Individual, Family, Societal, and Financial."

Deinstitutionalization, establishment of parity, increased public awareness of and acceptance of mental illness have all combined to increase the need for mental health diagnosis and treatment. About 15 percent of adults and 21 percent of children and adolescents in the U. S. utilize mental health services annually. During any one year period, 44 million Americans have a diagnosable mental disorder. The service these individuals need occurs through specialty mental health professionals via private care or mental health centers, primary care settings, social service settings including residential facilities, church programs, and state and county services. Lastly, self-help groups including peer assistance, twelve step programs, and the like are becoming increasingly utilized. State and local government have historically always been major payers for public mental health systems. Increasingly,

however, the federal government has taken on a progressively larger role as the impact of mental illness on human suffering and the gross national product has been realized.

The financial cost of mental illness is staggering. The costs are both indirect and direct. The recent indirect cost figures include a \$79 billion loss to the economy due to loss of productivity due to illness, as well as, an additional \$12 billion loss due to early death and another \$4 billion dollars in lost productivity due to incarceration. Twenty-five percent of incarcerated individuals have a mental illness diagnosis which impairs their ability to reason, behave, and stay out of jail. And yet we freely build more and more prisons in lieu of psychiatric treatment facilities to satisfy the public demand to get these people off the streets. The global burden of disease shows that 18% of disease is related to cardiovascular illness, 15% is related to cancer, and 15% is related to mental illness. The rest is miscellaneous. The World Health Organization states that three of the ten major illnesses affecting mankind are psychiatric: major recurrent depression, bipolar disorder, and schizophrenia. In addition incapacitating obsessive compulsive disease is right behind that trio of three. Tragically, the suicide rate with all of these is significant with 10% of those with schizophrenia and 25% of those with bipolar disorder eventually ending their own suffering via their own efforts.

Direct costs for treatment of psychiatric illness are equally impressive. Annual direct costs for treatment of mental disorders, substance abuse, and Alzheimer's disease and other dementias totaled more than \$99 billion. Of this \$69 billion was for mental health services, \$13 billion was for treatment of substance abuse, and \$18 billion was for management of Alzheimer's disease and other dementias. Annual total health care expenditures easily exceed \$943 billion. Seven percent of this is for mental health services. These expenditures include outpatient management, inpatient care, pharmaceutical costs, and the like. The latter of these, outpatient pharmaceutical expenditures, have been one of the fastest growing expenses for mental health services. This is, however, due to multiple factors: these medications are increasingly covered under general medical rather than mental health insurance benefits, more and more of these medications are prescribed by primary care physicians (in fact, primary care doctors prescribe more than twice as many psychotropic medications as psychiatrists secondary to their greater number of prescribers and greater number of patient contacts), greater medical recognition of the effectiveness of these medications and greater public acceptance and expectation that these medications will be prescribed by their psychiatrist or primary care physician. As a result, the volume of these medications being utilized has increased exponentially. For example, from 1985 to 1994 the number of patient visits during which these medications were prescribed increased from 33 million to 46 million.

Continued on page 22.



William H. Dick, MD

Speaker: Robert Vane – President Lincoln and General Grant



With the U.S. Civil War marking its 150th anniversary, it seemed appropriate to have a talk regarding the subject. Some say it's the most important event to happen in U.S. history. It surely united us and laid the foundation for the nation that we have become.

Robert Vane is a very good speaker and a most engaging fellow. He is a native Hoosier, who served in the U.S. Army and attended Indiana

University where he earned a degree in History and Political Science. He also holds a Master's Degree in Medieval History from IUPUI. He was the Communications Director for the Indiana Republican Party before he served as Deputy Mayor for the city of Indianapolis from 2008 to November 2010. He spoke to the Indianapolis Civil War Roundtable in 2006.

Robert Vane brought three guests to the program, including Mr. P.E. MacAllister, who is a history expert. P.E. owned MacAllister Machinery; he has appeared on public TV countless times, usually leading a group on an overseas history tour of some kind.

Mr. Vane began by comparing Abraham Lincoln and Ulysses S. Grant. They were both from the "west," came from humble backgrounds, and were called failures in their early life. Both were modest, soft spoken, and had great respect for their fellow human beings. Both were also very determined individuals. He asserted that it was the partnership of Abraham Lincoln with U.S. Grant that really won the war.

Lincoln is the favorite President of most historians. He was the best writer; the best commander-in-chief and the best military strategist of all U.S. Presidents. Grant was the first Lt. General in the U.S. Army since George Washington held that rank. According to Mark Twain, Grant's autobiography is the best Military Autobiography ever written. They were both great men.

Mr. Vane used numerous quotes from generals and soldiers on both sides of the conflict, newspapers and other individuals. This technique gave his talk an impact it otherwise would not have had. Now for some of the history.

Robert Vane informed us that Lincoln wanted a general who could free the Mississippi River to Northern commerce; liberate the pro-Unionist area of East Tennessee; defeat the Army of Northern Virginia and capture Richmond. General Grant gave the President all of these.

For years Lincoln suffered with one general and another, none of whom would really engage the enemy. Then in February 1862, Forts Henry and Donelson in Kentucky fell to Grant's army. He insisted on unconditional surrender, earning him the nickname, "Unconditional Surrender" Grant playing on his initials.

Mr. Vane exclaimed that Lincoln "created the modern conception of the office of commander-in-chief. Lincoln invoked the 'war powers' of the presidency." Vane insisted that there is no such power contained in the Constitution.

Then we come to Shiloh in Tennessee. Another Grant victory. Gen. Sherman helped save the first day, which did not go well. But on the next day, with Grant in the lead, the Union Army prevailed. There were more casualties at Shiloh than at all the American wars before that battle. Vane insisted that Shiloh made the war; the tide turned after that. Lincoln knew that he had a general at last. There was a great cry from some political circles concerning the huge number of casualties at Shiloh. They asked for Grant to be cashiered. Lincoln said that he could not spare him: "He fights."

Grant was not really an unknown force. He was an expert horseman at West Point and served with distinction in the Mexican War, twice earning brevet promotions for bravery.

Confederate General Richard Ewell knew Grant. Vane said that Ewell warned a friend, "There is one West Pointer, I think in Missouri, little known, and I hope that the Northern people will not find out. I mean Sam Grant. I knew him well at the Academy and in Mexico. I should fear him more than any of their officers I have yet heard of. He is not a man of genius, but is clear-headed, quick, and daring." Confederate General James Longstreet warned anyone who would listen that "Grant will fight us every hour of every day until the end of the war."

The successes of Vicksburg, East Tennessee and the Wilderness campaign in Virginia followed, with the end coming at Appomattox. Lincoln retained the power to make peace. Lincoln and Grant discussed that peace at City Point in southern Virginia in early 1865. Grant allowed Lincoln to ride his prize horse Cincinnati, a favor granted to no other man. Both Grant and Lee showed great respect and kindness at the surrender ceremony in April 1865.

One week later, Lincoln was assassinated. This saddened everyone, including Grant. At the head of the casket at Lincoln's funeral, Grant wept bitterly for his dear friend and President, Abraham Lincoln. General William Tecumseh Sherman may have said it best, that the President "had more of the elements of greatness, combined with goodness than any man I have ever known."

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Bulletin Board

Jeffrey A. Greenberg, MD, Indiana Hand to Shoulder Center, participated in the Stryker Course, Texas Tech University in April. His lectures: "Treatment of Distal Radius Fractures" and "Internal Fixation of Metacarpal and Phalangeal Fractures." He also presented the lecture, "The Evolutionary Inefficiency of the Distal Radio-ulnar Joint," at the Stromberg Lecture of the Chicago Hand Society in May 2011 as an invited guest lecturer. He was Course Chairman/Lab Supervisor at the Fort Lauderdale Learning Center, Stryker course in May with lectures, "PIP Fracture Dislocation" and "Treatment of Scaphoid Fractures." At the June 2011 Montana Hand Society Meeting, his lectures were: "Evolution of the Distal Radio-ulnar Joint," "Treatment of Distal Biceps Ruptures," and "Treatment of Distal Radio-ulnar Joint Arthritis and Salvage of Failed Treatments."

Jared R. Brosch, MD, neurology resident at IU, authored the paper "Seizures Triggered by July 4th Fireworks in an 8-Year-Old Girl With Perinatal Stroke," published in the *Journal of Child Neurology*, July 2011

Rick C. Sasso, MD, Indiana Spine Group, served as a faculty member at the Fourth Annual Global Dubai Spine Masters Course, "Spine Trauma Masters Update." The course was held in May in Dubai, United Arab Emirates. Spine surgeons from 70 different countries attended this educational course. Dr. Sasso gave three lectures encompassing cervical and thoracolumbar fracture treatment techniques. Dr. Sasso also moderated the session, "Thoracolumbar Spine Trauma: Complex Case Discussion."

Tod C. Huntley, MD, CENTA (Center for Ear Nose Throat & Allergy, PC) was a faculty member at the World Robotic Symposium, the second annual meeting of the Society of Robotic Surgery, in Miami Beach, July 27-28. He presented an invited paper, "Pathways and pitfalls in establishing a robotics head and neck surgical practice," was a member of the expert panel discussing "Management of sleep apnea with transoral robotic surgery," and moderated the Head and Neck Robotic Scientific Session on "Transoral Robotic Surgery and da Vinci Robotic Thyroid / Parathyroid Surgery." Within the past month Dr. Huntley also recently proctored da Vinci robotic pharyngeal surgical procedures at Yale Medical Center and at Brigham and Women's Hospital, and gave an invited talk on robotic thyroid surgery at Illinois Masonic Medical Center."

Henry Feuer, MD, Methodist Sports Medicine/The Orthopedic Specialists and Goodman Campbell Brain and Spine, presented the "Overview of the History of Concussions and the New Laws" and "Sideline Evaluation Guidelines, What's New in the NFL" to open a session at the 46th Annual Riley Hospital for Children Pediatric Conference, preparing physicians for the new Indiana state law for management of sports concussions. He presented "The Consequences of Repetitive Brain Injuries" at the 3rd Federal Interagency Conference on Traumatic Brain Injuries in Washington, D.C.

John J. Wernert, MD, IMS Past President, Associate Clinical Professor of Psychiatry, received the John B. Schofield Volunteer Faculty Award for 2011 for his outstanding commitment for over 22 years to the Department of Psychiatry mission of education. This award was presented at the Department Graduation ceremony on Friday, June 24, 2011.

Teresa M. Rohr-Kirchgraber, MD, Associate Professor of Clinical Pediatrics and Medicine, Indiana University School of Medicine, was named the Clinical Director, IU Health Center for Excellence In Women's Health at Wishard as of July 1, 2011.



Jared R. Brosch, MD



Aaron A. Cohen-Gadol, MD



Christopher B. Doehring, MD



Henry Feuer, MD



Vincent L. Flanders, MD



Jeffrey A. Greenberg, MD



Tod C. Huntley, MD



Denise L. Johnson Miller, MD



E. Michael Keating, MD



Teresa M. Rohr-Kirchgraber, MD



Rick C. Sasso, MD



Marc P. Underhill, MD



John J. Wernert, MD

Aaron A. Cohen-Gadol, MD, Goodman Campbell Brain and Spine, published the following articles in the April issue of *Journal of Neurosurgery: Spine*: "Anatomical study of the third occipital nerve and its potential role in occipital headache/neck pain following midline dissections of the craniocervical junction" and "Morphometry of the outlet of the foramen magnum in crania with atlantooccipital fusion." In addition, he published the following article in the May 2011 issue of *Neurological Research*: "Techniques of intraoperative monitoring for spinal cord function: their past, present, and future directions."

News from Franciscan St. Francis Health ...

Christopher B. Doehring, MD, vice president of medical affairs for Franciscan St. Francis Health, has received a master's degree in medical management degree from Carnegie Mellon University.

E. Michael Keating, MD, presented the latest procedures in joint replacement and arthritis treatments at a hip and knee replacement seminar in Lebanon on August 4, 2011.

Denise L. Johnson Miller, MD, discussed general breast health, breast cancer misconceptions and steps women can take to prevent disease at a July event in Indianapolis.

News Northwest Radiology ...

Two new interventional radiologists have joined Northwest Radiology. **Marc P. Underhill, MD**, and **Vincent L. Flanders, MD**. Dr. Underhill, a graduate of Boston College and the Indiana University School of Medicine. He most recently was an interventional radiology fellow at Henry Ford Hospital in Detroit. Dr. Flanders, a graduate of the University of South Florida and the Duke University School of Medicine. He recently completed a fellowship in interventional radiology and abdominal imaging at Harvard Medical School's Massachusetts General Hospital.

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Southeast Anesthesiologists
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Anesthesiology
University of Health Sciences,
Kansas City, MO, 2005



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Hepatology
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Internal Medicine, 2008
Gastroenterology
Indiana University, 2005



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Physical Medicine & Rehabilitation
Indiana University, 2007

Sullivan, Jeremy T., MD
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Internal Medicine, 2002
Pediatrics, 2003, 2011
Medical Management
University of Tennessee, 1998

Welch, Julie L., MD
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Aaron Cohen-Gadol, MD
Complex brain aneurysm and brain tumor surgery

Jeffrey Crecelius, MD
Disorders of the spine

Andrew DeNardo, MD
Interventional neuroradiology

Christopher Doran, MD
Interventional pain management

Henry Feuer, MD
Sports neurosurgery

Daniel Fulkerson, MD
Pediatric neurosurgery

Randy Gehring, MD
Disorders of the spine

Peter Gianaris, MD
Brain tumors (neurosurgical oncology)

Eric Horn, MD
Complex spine surgery

Steven James, MD
Brain and spine surgery

Saad Khairi, MD
Artificial disc replacement; scoliosis

Donald Layton, PhD
Neuropsychological testing, adults & children

Thomas Leipzig, MD
Cerebrovascular and brain tumor surgery; spinal stenosis and disc disorders

Nancy Lipson, MD
Physical Medicine and Rehabilitation

Shannon McCanna, MD
Complex and minimally invasive spine surgery

Itay Melamed, MD
Endovascular surgical neuroradiology

James Miller, MD
Brain tumors

Jean-Pierre Mobasser, MD
Minimally invasive spine surgery

Paul Nelson, MD
Pituitary tumors and spinal disorders

Troy Payner, MD
Brain aneurysms; trigeminal neuralgia; skull base tumors

Eric Potts, MD
Complex spine surgery

Michael Pritz, MD
Cerebrovascular and skull base surgery

Richard B. Rodgers, MD
Minimally invasive spine surgery

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Scott Shapiro, MD
Brain tumors; aneurysms; AVMs; minimally invasive and complex spine surgery

Jodi Smith, MD
Pediatric neurosurgery

W. James Thoman, MD
Minimally invasive spine surgery

Michael Turner, MD
Implantable therapies for neuromodulation and pediatric neurosurgery

Jose Vitto, MD
Interventional pain management

Derron Wilson, MD
Interventional pain management

Thomas Witt, MD
Stereotactic radiosurgery; epilepsy and movement disorder surgery

Robert Worth, MD
Epilepsy surgery

Ronald Young, MD
Adult & pediatric brain and spine surgery



Project Health



Carrie Jackson Logsdon, Director

Thank you, Dr. Dale A. Rouch



Dale A. Rouch, MD, Tower Surgical, is Project Health's feature physician for August. He was born in Bremen, Indiana, and delivered by Otis Bowen, MD, who was his family doctor all of his life. He credits Dr. Bowen with giving him the inspiration to go into medicine. Dr. Rouch grew up in Lakeville, Indiana, one of eight children. His father farmed mint initially and later added grains. They no longer own the family farm because, he says, "when his father died no one wanted to take it over."

He describes his childhood as "chores, always chores!" His oldest brother served 20 years in the Navy and later earned his doctorate from Purdue in land surveying and engineering. One sister is a teacher in Indianapolis, two sisters are nurses one in South Bend and another in Casper, Wyoming. Another sister is a lawyer with a doctorate in psychology, who works for Boeing in Seattle and was part of the Sea Launch Projects, launching satellites from the ocean. Still another sister is a social worker for a middle school in northern Indiana. And he has a younger brother, a musician, who was invited to perform with Jefferson Starship in early July. "It was sort of a mini-Woodstock in Northern Indiana. Trouble is, not enough people showed up," says Dr. Rouch.

From this very large family, Dr. Rouch is the only physician. After entering pre-med at I.U., he graduated from the I.U. School of Medicine and went on to intern at Methodist Hospital in internal medicine and general surgery. He did his residency in general surgery again at Methodist and completed a fellowship in hepatobiliary/hepatotransplant surgery at the

University of Chicago Pritzker School of Medicine. Dr. Rouch received the William Sobat Distinguished Teacher Award for Surgery Education in 1997 and 1999. He also received a "Sagamore of the Wabash" from the late Governor O'Bannon for public service contribution in the field of Liver Transplantation in 1998. When asked why he came back to Indianapolis after his fellowship he says, "It was a really nice place to live and raise children." And he carried on the family legacy of a big family.

Dr. Rouch's wife is Debra Bergman, MD, Carmel Cosmetic and Plastic Surgeons, and between the two of them they have five children. Their oldest daughter graduated from New York University with a degree in economics, is an economic analyst in Manhattan and working on her MBA at Wharton. His son, Josh, is a senior medical student at I.U. and "will probably go into surgery." Josh went on a mission as a medical student in Honduras and will be going to Kenya in December and January. Josh lived with a Honduran family that spoke no English, so he picked up Spanish very fast. Then he served as the interpreter for a group of physicians from Iowa. Daughter Stephanie graduated from Vanderbilt in special education and is in the Peace Corps in Grenada. Another daughter graduated from Nashville's Belmont University in music theatre and this summer has her first professional performance in "Footloose" at the Memphis Playhouse on the Square. And last, but not least, Evan is a junior at I.U. In their free time they like to bicycle, snow ski in the winter, and Dr. Rouch likes to play golf at Crooked Stick.

What a life! And because of his surgical skills, some of our patients have their lives back. Words just cannot express how grateful Project Health and these patients are to Dr. Dale Rouch!



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In Memoriam



Anise T. Burki, MD
1941 - 2011

Anise T. Burki, MD, served the Indianapolis community for the past 33 years. Dr. Burki passed away June 28, 2011, she was born September 2, 1941 in Jilander, India.

Dr. Burki graduated first in her medical school class of 1963 from Nishtar Medical College. After working briefly in Pakistan, she completed her internship at Samaritan Hospital, Troy, New York and her four-year pathology residency at Pontiac General Hospital in 1973. She completed her Fellowship in Hematopathology at the William Beaumont Hospital in Royal Oak, Michigan.

After moving to Indianapolis in 1978 she served as a pathologist at Winona Hospital. From 1982 to 2011, Dr. Burki practiced family medicine on West 10th Street.

Dr. Burki had been a member of ASCP, CAP College of American Pathologists, International Academy of Pathology and the Indiana Association of Pathologists, Inc.



Please submit articles, photographs, Bulletin Board items, CME and other information to mhadley@imsonline.org by the first of the month preceding publication.



Seated Left to Right

- Morgan Tharp II, M.D.
- Keith Logie, M.D.
- Andrew Greenspan, M.D.
- M.S. Murali, M.D.

1st Row Standing

- Hillary Wu, M.D., Ph.D.
- Madelaine Sgroi, D.O.
- Melody Sands, APRN-BC
- Danielle Doyle, M.D.
- G. Irene Minor, M.D.
- Tracy Price, M.D.
- Elsayed Aly, M.D.

Back Row

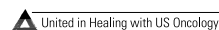
- Paul DesRosiers, M.D.
- Sead Beganovic, M.D., Ph.D.
- Harold Longe, M.D.
- Thomas Whittaker, M.D.
- Bryce Lord, D.O.
- Jennifer Morgan, M.D.

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Welcome, Dr. Martin!



On August 8, 2011, Benjamin G. Martin, M.D., Urologist, joined Urology of Indiana.

Originally from Dayton, Ohio, Dr. Martin is a graduate of Miami University, Oxford, Ohio, where he graduated Cum Laude with a B.S. in Computer Systems Analysis. He earned his medical degree from the University of Cincinnati College of Medicine, Cincinnati, Ohio. He completed his General Surgery internship as well as his Urology residency at the University of Alabama at Birmingham (UAB), Birmingham, Alabama, where he was the recipient of the Urology Resident Research Award in 2009.

Dr. Martin is a member of the American Urological Association and the American Association of Clinical Urologists. His areas of special interest include general urology, stone disease, urologic oncology and robotic surgery.

Dr. Martin will concentrate his practice on the northeast side of Indianapolis. He will see patients in our Community Hospital North and Noblesville offices. **To schedule appointments with Dr. Martin, please call 1-877-362-2778.**

With the addition of Dr. Martin, Urology of Indiana is comprised of 33 urologists and urogynecologists who see patients in 18 office locations in central Indiana. The practice traces its roots to 1887, and provides complete diagnosis and medical and surgical treatment of all conditions of the genitourinary system affecting men, women, and children.

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John J. Wernert (2013)

*Appointed from the President's Advisory Council

Delegates to the State Convention, September 16-18, 2011, Marriott Hotel

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

Mary D. Bush (2011)
G. Gregory Clark (2011)
Carolyn A. Cunningham (2011)
David R. Diaz (2011)
Jonathan A. Fisch (2011)
Bruce M. Goens (2011)
Robert M. Hurwitz (2011)
Paul D. Isenberg (2011)
Marc R. Kappelman (2011)
Alan P. Ladd (2011)
Daniel E. Lehman (2011)
Mary Ian McAteer (2011)
Clement J. McDonald III (2011)
James D. Miner (2011)
Maria C. Poor (2011)
Richard H. Rhodes (2011)

Linda Feiwell Abels (2012)
Christopher D. Bojrab (2012)
Kathy S. Clark (2012)
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Alan R. Gillespie (2012)
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C. William Hanke (2012)
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H. Jeffery Whitaker (2012)

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David M. Mandelbaum (2013)
John P. McGoff (2013)
Tim E. Taber (2013)
John J. Wernert (2013)

Alternate Delegates to the State Convention, September 16-18, 2011, Marriott Hotel

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

Christopher B. Doehring (2011)
Ann Marie Hake (2011)
Robert E. Holt (2011)
Douglas J. Horton (2011)
E. Michael Keating (2011)
Ramana S. Moorthy (2011)
Michelle W. Murphy (2011)
Mercy O. Obeime (2011)
Rudolph Y. Rouhana (2011)
Lynda A. Smirz (2011)
Allison E. Williams (2011)

Nancy R. Baird (2012)
Jennifer J. Bucki (2012)
Stephen R. Dunlop (2012)
John Duplantier (2012)
Robert S. Flint (2012)
Norrissa N. Howard (2012)
Mark U. Kyker (2012)
Terry L. Layman (2012)
Patrick J. Lotti (2012)
Mark R. Ogle (2012)
David M. Ratzman (2012)
Jeffrey M. Rothenberg (2012)
Beata E. Samuel (2012)
Steven Richard Smith (2012)
Abideen Yekinni (2012)

Robert J. Alonso (2013)
David S. Batt (2013)
Daniel J. Beckman (2013)
Craig S. Cieciora (2013)
Marc E. Duerden (2013)
Brian W. Haag (2013)
Mark M. Hamilton (2013)
Andrew A. Johnstone (2013)
Jeffrey J. Kellams (2013)
Frank P. Lloyd, Jr. (2013)
Andrew L. Morrison (2013)
David L. Patterson (2013)
Kenny E. Stall (2013)
Ronald L. Young, II (2013)

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Jon D. Marhenke 2007-2008
Bernard J. Emkes, 2000-2001
Peter L. Winters, 1997-1998
William H. Beeson, 1992-1993
George H. Rawls, 1989-1990
John D. MacDougall, 1987-1988
George T. Lukemeyer, 1983-1984
Alvin J. Haley, 1980-1981

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Friday, September 23

4th Annual Orthopedic Symposium

JW Marriott Hotel, Indianapolis



Guest Speaker:

J.W. Byrd, MD

Presents:

**Hip Arthroscopy
in Athletes**

Dr. Byrd is the
team physician
for the Tennessee
Titans and has

served as physician for the U.S. Olympic Team. Dr. Byrd is active in clinical research and has developed several surgical techniques and instruments that have revolutionized orthopedic surgery. He has authored numerous book chapters and articles.

General Program Description:

The Methodist Sports Medicine team will present program topics dedicated to the hip and knee with particular focus on hip injuries, hip arthroscopy patient selection and management options for total hip replacement and proximal hamstring tears. Our team will also discuss conservative care options for the osteoarthritic knee, patient selection and current indications for cartilage restoration procedures and advances in anterior cruciate ligament surgery. The theme will carry over to our afternoon breakout sessions, each specifically designed for physicians and rehabilitation specialists.

For more information, contact:

Patti Hunker, 317.817.1227

phunker@methodistsports.com

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CME & Conferences

Community Health Network

Community Hospital East

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.

Third Neuro Grand Rounds
Wednesday Medical Staff Conf. Room, 12:00 - 1:00 p.m.
Months of January, March, May, July, September, November

Community Hospital South

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

Community Hospital North

First Pediatric Grand Rounds
Wednesday Multi Services Rooms 1, 2 and 3
7250 Clearvista Dr. 7:30 - 8:30 a.m.

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

Community Heart & Vascular/ Indiana Heart Hospital

First Disease Management Conference:
Wednesday rotates CHF & EP Case Presentations
TIHH MCV Boardroom Videoconference to
CHVp South Conf. Rm. 7:00 - 8:00 a.m.

Third Ken Stanley CV Conference
Wednesday TIHH MCV Boardroom Videoconference to
CHVp South Conf. Rm. 7:00 - 8:00 a.m.

Fourth Imaging Conference:
Wednesday rotates Cath & Echo Case Presentations
TIHH MCV Boardroom Videoconference to
CHVp South Conf. Rm. 7:00 - 8:00 a.m.

Cancer Conferences 2011

Community Hospital East:

First East General Cancer Conference
Tuesday Medical Staff Conf. Room, 12:00 to 1:00 p.m.

Second East Chest Cancer Conference
Wednesday Cancer Registry Conf. Room, LL 22,
7:00 to 8:00 a.m.

Community Hospital North

First & Third North Multidisciplinary Breast Conference
Tuesday 8040 Clearvista Parkway, Suite 500, 7:00 - 8:00 a.m.

Third North General Cancer Conference
Wednesday Reilly Board Room, 12:00 to 1:00 p.m.

Fourth North Chest Cancer Conference
Wednesday Reilly Board Room, 7:00 to 8:00 a.m.

Community Hospital South

Second South Chest Conference (site specific-lung)
Monday Education Center Rooms 5&6, 7:00 - 8:00 a.m.

First South Multidisciplinary
Wednesday Breast Cancer Conference
Community Breast Care Center South,
533 E. County Line Rd., Ste. 101, 8:00 - 9:00 a.m.

Third South General Cancer Conference
Wednesday President's Board Room, 12:00 to 1:00 p.m.

North Cancer Pavilion

Third Melanoma Cancer Conference
Wednesday CHN Cancer Pavilion Conf. Rm., 7:30 to 8:30 a.m.

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

Indiana University Health

IU - Methodist - Riley

August 12 Ethics in Early Childhood Fields: A Moral
Psychological Approach
Ruth Lilly Learning Center, Riley Outpatient Center
Indianapolis

August 19 The Second Annual Eugene & Marilyn Glick
Vision and Research Symposium
Glick Eye Institute Building
Indianapolis

Sept. 23 2011 Orthopedic Symposium for Physicians and
Medical Professionals
JW Marriott
Indianapolis

Sept. 23 John P. Donohue Twelfth Annual Visiting
Professor Series
University Place Conference Center
Indianapolis

Oct. 7 Successful Team Approach to Bariatric Surgery
IU Health Bariatric Center, Indianapolis

Course dates and locations are subject to change. For more information, please visit <http://cme.medicine.iu.edu> or call 317-274-0104.

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Gene Moneymaker

CME & Events

Indiana Spine Group

Back Talk: A Comprehensive Review and Practical Approach to Spinal Diagnosis and Treatment

November 11 – 12, 2011

Renaissance Hotel, Medical Academic Center, Carmel, Indiana

Indiana Spine Group is hosting their fifth annual spine symposium. This symposium is for primary care physicians and health care practitioners, and will provide the latest information for the diagnosis and treatment of your patients with spinal problems and abnormalities. New this year are clinical workshops on Saturday. Visit <http://indianaspinegroup.com/backtalk/2011/backtalk.html>

To receive conference announcements and a brochure, please send your email and mailing address to info@indianaspinegroup.com or call (317) 228-7000.

This activity has been approved for AMA PRA Category 1 Credit. Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending.

Indianapolis Medical Society

August

2 IMS Board, Society, 6:00 PM, Social; 6:30 pm, Dnr/Mtg.

September

8 Senior/Inactive Luncheon Meeting, Noon, Society

16-18 ISMA CONVENTION, MARRIOTT HOTEL

20 Executive Committee, Society, 6:00 PM, Sandwiches

October

4 IMS Board, Society, 6:00 PM, Social; 6:30 PM, Dnr/Mtg.

November

6 ISMA Board of Trustees, 9:00 AM, state headquarters

6 IMS Advisory Breakfast, 7:30 AM ...prior to ISMA BOT

12-15 AMA Interim, New Orleans, LA

15 Executive Committee, Society, 6:00 PM, Sandwiches

Indiana Psychiatric Society

Drugs, Psychosis and Ethical Dilemmas in the Treatment of Children, Adolescents and Young Adults

Hosted by the Indiana Psychiatric Society and the Indiana Council of Child and Adolescent Psychiatrists

September 17, 2011, 8:30 am - 1:00 pm

Downtown Indianapolis Marriott Hotel

Held in conjunction with the 162nd Annual Indiana State Medical Association Convention

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Registration/conference information at www.pdallc.com

Early bird discount expires August 31

Addictions disorders in children and young adults are highly concerning for patients, families, and communities. They cause significant functional issues and exacerbate other psychiatric morbidities. As adolescents grow and transfer to general outpatient psychiatric clinics, they enter a critical period, a known time of risk for emergence of psychotic disorders. Ethical questions can arise as adolescents become more autonomous and various systems interact.

This symposium will focus on diagnosis and treatment of addictions in children and adolescents, including how addictions can contribute to the emergence of early psychosis. Information on identification and treatment of early psychosis will be included, and ethical considerations addressed. Speakers will present a balanced program of lectures and case scenarios.

Target audiences: Psychiatrists, Primary Care Physicians, Nurse Practitioners, Mental Health Providers, Physician Assistants, Hospitalists, Physicians of Other Specialties.

Questions? Contact Sara Stramel at 888.477.9119 or lizgroupllc@yahoo.com

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President's Page *(Continued from page 7)*

Lest we become too consumed with facts and figures and financial concerns about mental illness and its treatment we can never ignore the equally significant psychological impact that mental illness has on both the client and the family. Imagine being a child or teenager with a mentally ill parent. How does that youngster describe to his or her peers why their parent acts or talks strangely at times? How does that child feel about never inviting classmates to their home for fear of an embarrassing behavior or comment from their parent? Does that child worry that they too may be afflicted with a similar fate as an adult? Does that child conclude that they have somehow been responsible for their parent's illness? Perhaps that child purposely decides that the safest action is to simply withdraw and isolate and subsequently begin appearing strange to others as well.

In the reverse direction the parents of a child with a mental illness deal with many of the same issues and ask themselves multiple questions: What have I done wrong as a parent? Did I do something I should not have done during pregnancy? Have I passed along "bad genes" to my child? What are other people saying about me? Regardless of the time and energy I provide to my child, are my efforts in parenting going to be in vain?

It is reassuring, however, to now know that stigma regarding mental illness is decreasing, public acceptance of mental illness as an illness is being recognized, parity with other illnesses is becoming more a reality, and public recognition of mental illness as being treatable is becoming standard knowledge. Psychiatry has actually advanced to the point that research capabilities in identifying, treating, and even preventing some mental illnesses are outpacing the capacities of the treatment system the nation has in place to deliver mental health care. Such could not have been stated as recently as a decade or so ago!

IMS

In Summary

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Advertisers' Index

Advantage/Acumen	16
Center for Pain Management	10
Central Indiana Cancer Centers	16
Diamond Capital Management	17
Goodman Campbell Brain & Spine	13
ISMA Agency	21
Justus Homes	6
JWM Neurology.....	4
Kindred Healthcare.....	9
Lillibrige Healthcare Services, Inc.....	23
The Marina Limited Partnership.....	3
Methodist Sports Medicine.....	19
Midwest Pain & Spine	15
The National Bank of Indianapolis	12
Northwest Radiology Network.....	24
Practice Billing.....	20
St. Francis Heart Center.....	2
Superior Linen Service.....	22
Urology of Indiana	17

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