



Volume XCVV • Number 3
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Bulletin

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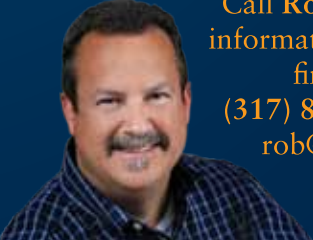
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Associate Editor, *The IMS Bulletin*
Marcia K. Hadley

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ATTENTION SOCIETY MEMBERS

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, bhurt@imsonline.org.

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.

Remember the *Indianapolis Medical Society Foundation* when planning your will. (Contribution form included in this issue.) Unless otherwise specified, your contribution will be directed toward medical scholarships.

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about our cover



On our cover:
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This Is Where the Conversation Starts

It's no secret that membership in organized medicine advocacy groups has been declining in recent years. In the early 1950s, about 75% of US physicians were members of the American Medical Association (AMA).⁽¹⁾ Compare that to 2011, when just 15% of practicing US doctors were active members of the AMA.⁽²⁾ At a local level, we have seen challenges as well, particularly within the Indianapolis Medical Society. Physician satisfaction with the direction of medicine has been declining as a whole, and there is a genuine feeling among some physicians that they are losing control of their own destiny and have a smaller influence over medicine in general.

So how can physicians regain control? Is a national advocacy group the best vehicle for change? Despite the drop in membership, the AMA is still the most vocal and well-funded organization representing the medical profession. It boasts one of the largest political lobbying budgets of any organization in the United States. The AMA ranks second in the nation, with more than \$264 million spent on lobbying between 1998 and 2011. Only the U.S. Chamber of Commerce spent more; with more than \$800 million going toward lobbying in that time frame.⁽³⁾

While the AMA may be the most visible organization representing medical professionals, it's not the only one. I believe true change begins at the local level.

For example, at our most recent Indianapolis Medical Society board meeting, Dr. Bernie Emkes was appointed to lead an effort to better inform the public and the press regarding issues facing physicians today. This group will be meeting soon and, with Dr. Emkes in charge, I expect we will see productive efforts to offer common sense solutions to these challenges. This will allow local groups to generate better traction with the media and to create a more informed public.

Efforts of Indianapolis Medical Society members also make an impact at the state level. Each year, the IMS nominates and then elects representatives for our state convention. Executive Vice President, Beverly Hurt, and her staff do a tremendous job of recruiting, electing and educating physicians to get them ready for this event. It provides an excellent opportunity for delegates to make their voices heard while representing and advocating for the positions of our local members. At this year's state convention in September, delegates selected through the IMS showed up in force and passed several important proposals. Two are of particular note:

One was initiated by local neurologist and soccer coach, Dr. Robert Flint and Dr. Tom Vidic from Elkhart. Due to an increased awareness of concussions and head trauma in sports, "heading" in soccer has become a legitimate concern, especially in young children. With input and support from a variety of specialists, including one of the state's few pediatric neurosurgeons, guidelines were initiated regarding when and how to instruct on safe heading. Because of its passage at the convention, the Indiana State Medical Association (ISMA) will

now work to educate parents, coaches, school officials and the public on safe practices for youth soccer.

As you might expect, the Affordable Care Act (Obamacare) was another prominent topic of discussion at the state-wide convention. With strong support from an overwhelming majority of the assembly, the ISMA and national delegates were instructed to redirect the AMA toward a more common-sense approach toward reform. That approach included an insistence on tort reform, an issue Indiana has already tackled head-on.⁽⁴⁾ Indiana placed caps on damages stemming from medical malpractice lawsuits back in 1975, joining California as the first two states in the nation to do so.

This recent effort is another shining example of how local efforts can be used to amplify the voices of members and initiate change on a much broader scale.

The ISMA defends Indiana's medical professionals every day through legislative advocacy, interventions with federal and state agencies, or negotiations with commercial payers and other entities attempting to negatively influence health care.⁽⁵⁾ The AMA wouldn't be able to advocate for physicians without input from the ISMA, which in turn wouldn't be able to represent Hoosier doctors without the input from local organizations like the Indianapolis Medical Society and its active membership.

While the number of physicians belonging to advocacy groups is down over the past few decades, the trend is beginning to show some signs of reversing. Local engagement has been driving a recent increase in new membership in medical advocacy groups across the country, especially among ranks of younger medical professionals. The AMA attracted nearly 7,000 new members in 2012. Nearly two-thirds of those were either students or residents, reports revealed. Overall in 2012, AMA membership ticked upward by 3.2% to 224,503 by the end of last year.⁽⁶⁾

As recognized leaders in medicine, physicians should be the ones steering healthcare into the future. The direction for that I believe is best determined through organized medicine starting right here at the local level with your Indianapolis Medical Society.

References

1. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC117867/pdf/20020820s00036p386.pdf>
2. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3153537/>
3. <http://www.nybooks.com/articles/archives/2012/mar/22/our-corrupt-politics-its-not-all-money/>
4. <http://www.ama-assn.org/resources/doc/arc/capsdamages.pdf>
5. <http://www.ismanet.org/convention/info.htm>
6. <http://www.medpagetoday.com/MeetingCoverage/AMA/39906>



William H. Dick, MD

Speaker: James A. Glass, Ph.D. – Historic Preservation in Indianapolis

What would Indianapolis look like without Union Station; or the Indiana Theatre, which houses the IRT; or the Circle Theatre, home of the Indianapolis Symphony Orchestra since 1980?

Fortunately, historic preservation is big in Indiana! In fact, the largest statewide chapter of Historic Landmarks in the U.S.A. belongs to the Hoosier State. There are eight



Circle Theatre

regional offices in Indiana. It was founded in 1960 by Mr. Eli Lilly as the Historic Landmarks Foundation of Indiana and is now known as Indiana Landmarks.

Dr. James

A. Glass, retired director of the Graduate Program in Historic Preservation at Ball State University, spoke to the group about preservation of special places in the City of Indianapolis. Dr. Glass was also the Vice Chair of the Board of Directors for the Historic Landmarks Foundation of Indiana.

In 1949, the U.S. National Trust for Historic Preservation developed a specific set of goals for preservation. Preservation of House Museums had been done for some time, according to Jim Glass. A good example is Mount Vernon or Monticello, both in Virginia. In Indianapolis examples of House Museums are the Benjamin Harrison Home and the James Whitcomb Riley Home in Lockerbie Square.

In the 1960's, historic preservation became a large component of the planning profession. The National Historic Preservation Act was signed into law on 15 October 1966. Indianapolis demonstrated a love for preservation by renovating the Morris-Butler Home (built in 1864-65) on N. Park Ave. H. Roll McLaughlin was the architect on the project and his wife, Linda, was in charge of the renovation of the furnishings. Indeed, the team of Roll McLaughlin, Eli Lilly and Reid Williamson of Historic Landmarks together share a great deal of the credit for leading the preservation movement in the City and in the State.

Many fine old buildings were lost: The English Opera House on Monument Circle, Second Presbyterian Church, First Baptist Church and the Marion County Courthouse. In 1963, Roll McLaughlin wrote an article urging historic preservation. Mr. McLaughlin, a renowned architect, designed many places for Mr. Eli Lilly, including the Connor Prairie Museum. The Waiting Room at Crown Hill Cemetery was renovated as were a few homes in Lockerbie Square. In 1970, a few brave souls bought and repaired old houses in Lockerbie, which became an Historic District in 1978. Many residents of Lockerbie have lived in their renovated homes for over 40 years.

The Old Northside on Delaware Street saw many homes renovated. Sally Rowland located her business in that area, as did the Davis bothers, both MDs. A plan for preservation of the Old Northside was completed in 1979. Other projects followed, including the City Market in 1974-76. It benefitted

Continued on page 24.

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From left to right: Sandra Dolny, PA-C; Jocelyn Bush, MD; Edward Kowlowitz, MD; John Fitzgerald, MD; Alina M. Clavijo-Passik, PhD
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Bulletin Board

Michael H. Fritsch, MD, Professor, gave a peer-reviewed, invited, one hour lecture on “Salivary Endoscopy for Ductal Obstructions” at the American Academy of Otolaryngology National meeting in September.

Steven F. Isenberg, MD, received a standing ovation and the International Jerome C. Goldstein, MD, Public Service Award from the American Academy of Otolaryngology-Head and Neck Surgery Foundation at the 117th Annual Meeting in Vancouver, BC, Canada on September 29, 2013, for his work with Medals4Mettle (M4M). The \$1000 honorarium will purchase more medals. Dr. Isenberg founded M4M in 2005. M4M has awarded over 30,000 earned and donated endurance finishers’ medals to children and adults around the world. M4M currently has over 65 chapters globally.

Medical students recently founded a Medals4Mettle (www.medals4mettle.org) chapter at the Indiana University School of Medicine. Dr. Isenberg will serve as the faculty advisor. The M4M will be the official program of the Office of Medical Service Learning at the IU School of Medicine. Medical Students will donate time to spend with child life coordinators at Riley Children’s Hospital and then run for a child and donate their medal to that child.

Rick C. Sasso, MD, Indiana Spine Group, worked with others on the landmark article, “Efficacy and Safety of Surgical Decompression in Patients with Cervical Spondylotic Myelopathy – Results of the AOSpine North America Prospective Multi-Center Study,” published in the peer-reviewed *Journal of Bone and Joint Surgery*.

He also published an article in the August 2013 issue of the *Journal of Neurosurgery*, “Does smoking have an impact on fusion rate in single-level anterior cervical discectomy and fusion with allograft and rigid plate fixation.”

News from Department of Radiology and Imaging Sciences ...

Udaykamal H. Barad, MD, fellow in Head and Neck Radiology, has four abstracts that were accepted for the 2013 Annual Meeting of Radiological Society of North America (RSNA). Three abstracts are educational exhibits and one is a scientific paper presentation. He is also presenting an educational poster at the 2013 Annual Meeting of The American Society of Head and Neck Radiology. Mentors for these presentations included among others Kumararesan Sandrasegaran, MD.

Kumararesan Sandrasegaran, MD, Associate Professor of Radiology, recently received the 2013 Radiological Society of North America Honored Educator Award, which recognizes achievements in educational content for the RSNA.

Dean D.T. Maglinte, MD, and **Kumararesan Sandrasegaran, MD**, recently published a paper, “Comparison between dynamic cystocolpography and dynamic pelvic floor MRI: pros and cons: Which is the ‘functional’ examination for anorectal and pelvic floor dysfunction?” This paper is featured in the October 2013 issue of *Abdominal Imaging*.

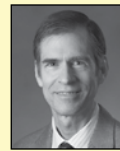
News from Franciscan St. Francis Health ...

John W. Moore, III, MD, led a course on treatment options for atrial fibrillation for the public at the Heart Center in October.

Harry C. Genovely, MD, discussed syncope during a class at



Udaykamal H. Barad, MD



Michael H. Fritsch, MD



Harry C. Genovely, MD



Steven F. Isenberg, MD



Dean D.T. Maglinte, MD



Jonathan A. Mandelbaum, MD



John W. Moore, III, MD



Kumararesan Sandrasegaran, MD



Rick C. Sasso, MD

the Heart Center in late October. He also led a class on heart failure and its impact on patients and families at the center.

Jonathan A. Mandelbaum, MD, surgical director of the bariatric program at Southside Surgical, worked with a news team from the Danish Broadcasting Corporation on a documentary about the bariatric program. The documentary will be aired in Denmark and adjacent nations this month.

Correction:

In the *October IMS Bulletin*, Dr. David Diaz, Surgery, and Dr. David R. Diaz, Psychiatry were incorrectly identified. We sincerely regret the error.



David Diaz, MD



David R. Diaz, MD

Free IMS’ Members Events November 6, 13, 20

- 6 ICD-10: The Financial Impact on Your Practice
6:00-7:15 PM, snacks
- 13 Employee Benefits and Practice Risk Management
6:00-7:15 PM, snacks
- 20 Roundtable Discussion with Q&A
6:00-7:15 PM, snacks

IMS Conference Center
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New Members **IMS to Cease Publication of The IMS Pictorial Roster**

Altman, Daniel J., MD
Fellowship – IU School of Medicine
Diagnostic Radiology, 2013
Neuroradiology
Indiana University, 2008

Ame, Sewit, MD
American Health Network
300 E. Boyd Ave., #110
Greenfield, 46140-2832
Ofc – 462-5252, Ext. 283
Fax – 462-8013
12188B N. Meridian St., #330
Carmel, 46032-4900
Ofc – 462-5252, Ext. 283
Fax – 208-3891
Plastic Surgery, 2011
Surgery, 2007
University of Illinois, 2002

Emhardt, John D., MD
Anesthesiology, 1987, 2008
Pediatric Anesthesiology
Indiana University, 1981

Hrisomalos, Frank N., MD
Resident – IU School of Medicine
Ophthalmology
Indiana University, 2011

Patel, Amrita D., MD
Franciscan Physician Network
Pain Specialists
8051 S. Emerson Ave., #360
46237-8630
Ofc – 528-7774
Fax – 528-7118
Physical Medicine & Rehabilitation
Pain Medicine (PM)
Indiana University, 2009

Sherrill, Michael A., MD
Resident – IU School of Medicine
Anesthesiology
St. George's University, Grenada, 2010

Wagers, Brian E., MD
IU Health Physicians Emergency Med.
1701 N. Senate Blvd., #DG 412
46202-1239
Ofc – 962-3886
Fax – 963-5492
Pediatrics, 2009
Pediatric Emergency Medicine (PD)
University of Cincinnati, 2006

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@[http://imsonline.org/
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In a NEWS RELEASE dated September 20, 2013:

Indianapolis Medical Society to Cease Publication of The IMS Pictorial Roster

Plans to enhance digital communication channels for physicians

Indianapolis – The Indianapolis Medical Society announced today that it will stop publishing The IMS Pictorial Roster effective immediately. IMS President, Mark M. Hamilton, MD, cited the decline of the business model for Members, including declining advertising revenues and the ongoing migration of readers to online and digital platforms as driving forces behind the decision. This difficult decision was made after consultation with Members and advertisers. The Indianapolis Medical Society Board of Directors made the final decision September 17, 2013 at a regularly-scheduled IMS Board Meeting.

“For at least 64 years, the IMS has published this oft-referenced tome, known to nurses in the area as the ‘Funny Book.’ The Pictorial Roster was an extremely effective referral tool for IMS Members, area hospitals, pharmaceutical representatives, and the Public. Despite the editorial excellence the Roster consistently provides, it is not immune to the changes in the market, and we reached a point where we cannot continue down a path that is not sustainable from a business perspective.”

IMS Members and the general public currently have two viable alternatives for the information contained in the Roster. The Physician Finder on the IMS website (imsonline.org) is an easy, online research tool for physician information. If they prefer, Members and the public may phone the IMS Office at 639-3406 during business hours for personal assistance. IMS Members also have available a FREE Members’ Benefit, smart device application, DocBookMD. The HIPAA-compliant application works on the iPhone, iPad, iPod and Android platforms and contains additional information for Members.

Dr. Hamilton noted that the Indianapolis Medical Society will continue to enhance its current in-house communication vehicles to ensure physicians and the public continue to receive the latest Membership information. One immediate benefit of switching to digital formats is that both the website and DocBookMD are updated weekly with new members, address, phone and contacts changes.

The Board may review this decision and the communication enhancements chosen each year. Concerned Members may email ims@imsonline.org or phone 639-3406 to speak with the IMS Staff.

We need your help!

We’re Lost Track of a Few Members:

If you have contact information for these members, please contact Tyna McCauley, Membership Secretary tmccauley@imsonline.org, 639-3406

Last known addresses:

Richard B. Rich, MD, 3015 Tiffany Ct., Carmel, IN 46033-3278
J. Thomas Vieira, MD, 434 Creek Forest Ln., Indianapolis, IN 46227-7321
David Lozow, MD, 301 Fairway Ct., #3, Southern Pines, NC 28387-2639
Henry E. Montoya, MD, 1437 Blue Jay Cir., Weston, FL 33327-2012

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Jeffrey Crecelius, MD
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Daniel Fulkerson, MD
Randy Gehring, MD
Peter Gianaris, MD
Eric Horn, MD, PhD
Steven James, MD
Saad Khairi, MD
Thomas Leipzig, MD
Shannon McCanna, MD
James Miller, MD
Jean-Pierre Mobasser, MD
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Joel Boaz, MD
Daniel Fulkerson, MD
Jodi Smith, PhD, MD
Michael Turner, MD
Ronald L. Young, II, MD

Interventional Neuroradiology

Andrew DeNardo, MD
Daniel Hsu, MD
John Scott, MD

Physical Medicine and Rehabilitation

Amy Leland, MD
Nancy Lipson, MD

Interventional Pain Management

Christopher Doran, MD
Jose Vitto, MD
Derron Wilson, MD

Neuropsychology

Donald Layton, PhD

Recruit-a-Colleague

Help strengthen the voice of medicine in Central Indiana -- recommend Indianapolis Medical Society Membership to your colleagues! Visit IMSONLINE.ORG for Recruiting and Membership applications.

The need for a strong voice to speak on behalf of medicine and, in particular, physicians has never been greater than it is today. It is critically important that we unify to address the specific needs of medicine in the greater Indianapolis area. There are advocacy efforts to champion, practice management issues to simplify, collegiality to build, and a time-honored profession to foster. There is strength in numbers. Together, we can make a positive change for medicine in Central Indiana.

Ask your colleagues to join IMS today. To thank you for your time and effort, we offer the following recruitment program:

Between July 1 and December 15, 2013, if you recruit one colleague you will receive 1/2 off your 2014 IMS annual dues.

Plus for every Member recruited by you within the promotional period, you will receive an entry in a grand-prize drawing for an iPad or iPhone ... just for you.

New recruits will be entered into a drawing for an iPad ... just for them, with your compliments!

To be considered a “recruited” Member, your colleague must:

- Be a nonmember who is eligible for the “full” IMS Member category and pay \$100 or more in dues.
- Submit a Membership application, along with his or her dues payment, between July 1, 2013 and December 15, 2013.
- Write **your name** in the **recruiter box** on the top of the Membership application.**

Send a recruitment email (copy on reverse side) to a colleague today, or link them to the online Membership application at imsonline.org to personally deliver your invitation.

You may also request a Membership Inquiry Kit from the IMS Membership Secretary 317-639-3406, (M-F 9 a.m. - 4 p.m. ET).

It is the collective effort that makes a difference. Call on the support of your colleagues today.

This program is only valid for IMS members whose dues are paid for the current fiscal year.

*Please note that total dues credits earned in one yearly period cannot be greater than the amount of any recruiter’s IMS annual dues.

** You can also receive credit for recruiting former Members and Fellows. If a former Member or Fellow calls the Membership Department to apply, be sure to ask them to mention you as the recruiter.



League Program

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I'm writing to encourage you to consider becoming a member of the Indianapolis Medical Society

With 1,800 members, IMS is the largest county medical society in Indiana, dedicated to improving medicine for patients and supporting those who practice it.

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Personalize your message in the space provided online. For instance, tell your colleague about a specific IMS membership benefit you enjoy.



Recruit-a-Colleague email copy and online application available at: imsonline.org

Recruit-a-Colleague: Recommend IMS Membership

Note: Fields marked with * are required.

* Your Name: _____

* From (Your email address): _____

Subject line: Consider IMS Membership

* Your colleague's name: First: _____ Last: _____

*To (Your colleague's email address): _____

I'm an IMS Member because: _____

*IMS Recruiter _____

ims@imsonline.org





Project Health



Carrie Jackson Logsdon, Director

There is HOPE.

There is HOPE.

What a summer Project Health has had – eight new cancer cases, a hip replacement, and one complete renal failure. Where would these patients be without our incredibly generous and kind volunteer physicians, hospitals, and labs?

It breaks our hearts that the cancer cases all come to Project Health in late stages, already metastasized, and in such young people. Two of the cancer cases are brain cancers. One is a medulloblastoma affecting a 29 year old drywall construction worker who just never went to the doctor about his headaches until he had trouble walking and hearing.

The woman who had the hip replacement kept working 80-hour weeks through the pain, loading heavy boxes in a retail store. In May, when she could no longer walk or perform her job duties, her employer laid her off. She was living paycheck to paycheck until there was no more. She receives a small widow’s pension and has good friends and neighbors helping her with utility bills and gas for her car, and her house is paid off. But, she had to apply for food stamps and she has been selling plasma to make ends meet, hoping that she will be able to get short-term disability until she can walk and work again.

One patient with a college education and tremendous job skills lost her husband and his health insurance and then gradually became blind because of cataracts that she couldn’t afford to get fixed. Unable to drive or work, she was homeless and moved to Indianapolis to live with her daughter who works in a day care center. She will soon have the cataract surgery. She needs to bounce back, but it will be a hard climb.

While our patients may not be poor enough to qualify for Medicaid, most of them are just hanging on by a thread.

You Give Them Hope!



Hope is personified in a one woman dynamo who absolutely breathes life into everyone she meets. She is our patient, Shirley Dykes. She works as an LPN in a nursing home. She has Type 1 Diabetes, Arthritis, Asthma and lost her health insurance through a divorce. She had what she thought was a little lipoma on her left rear thigh. She didn’t think much of it until it grew to the size of a walnut. Soon it was the size of her fist. It hurt so much she couldn’t sit down. Her sister had to drive her to work while she lay in the car seat and she stood up all day at work.



Finally, her daughter-in-law Googled “charity surgeries” and found Project Health. A biopsy revealed it was a sarcoma. It was removed. She’s completed 30 rounds of radiation. When they were over, she threw a “radiated ass” party complete with a very realistic and hysterically-funny cake. Recent CT scans

show the sarcoma has spread to her lung so they are now doing chemo to shrink the tumor and remove just that section of the lung. She has already shaved her head in anticipation and has started collecting bandanas with bangs. She’s still working two days a week and has the best attitude and greatest sense of humor ever. She is so very, very grateful to all of her doctors and therapists at I.U. Health. She says they really take their time with her; she never feels rushed; and that makes all the difference to her. And she adds that without her hair, people look closer at her smiling face.

Giving Tuesday, December 3rd

Our hospital officials say they fully realize that not everyone is going to run out and sign up for Obamacare, plus the undocumented Hispanic population is not eligible for it, so we will need to stick around to help fill the gaps just as we’ve done the last 10 years. Fortunately Project Health continues to receive financial support from the Richard M. Fairbanks Foundation, I.U. Health, St. Vincent Health, and the Marion County Health Department. But that accounts for only half of the budget. We count on membership fees and *physician donations* to make up the rest.

This month we have a day for giving thanks, then 3 days for getting deals, followed by National Giving Tuesday on December 3rd. Won’t you consider making a donation to Project Health on Giving Tuesday? We don’t get easy cases. Your donation will make it possible for us to help these seriously ill patients with very complex problems. For them, any help is a miracle!

Checks should be made out to the IMS Foundation/Project Health or you can give online by going to www.imsonline.org and clicking on Project Health and the “Donate Now” button.

It cannot be repeated too often: Thank you, Thank you, Thank you for answering the needs of so many patients these past 10 years. Let their gratitude fill your hearts, for you are the reason they are able to keep hope alive. Hope, combined with your healing touch are very powerful indeed.





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Bruce M. Goens Immediate Past President

David R. Diaz..... President-Elect
David H. Moore..... Secretary/Treasurer

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Heidi M. Dunniway
Jon D. Marhenke

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Richard D. Feldman (2016)
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Ronda A. Hamaker (2016)
Stephen R. Klapper (2016)
Mary Ian McAteer (2016)
John P. McGoff (2016)
Maria C. Poor (2016)
Richard H. Rhodes (2016)
Barbara K. Siwy (2016)
Michael T. Stack (2016)
John J. Wernert (2016)

Delegates to the State Convention, September 2014

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

Mary D. Bush (2014)
David R. Diaz (2014)
Gary R. Fisch (2014)
Jonathan A. Fisch (2014)
Bruce M. Goens (2014)
Ann Marie Hake (2014)
Robert M. Hurwitz (2014)
Paul D. Isenberg (2014)
David A. Josephson (2014)
Marc R. Kappelman (2014)
Randall A. Lee (2014)
Mary Ian McAteer (2014)
Clement J. McDonald III (2014)
Richard H. Rhodes (2014)
Jodi L. Smith (2014)

Linda Feiwell Abels (2015)
Christopher D. Bojrab (2015)
Charles W. Coats (2015)
John C. Ellis (2015)
Robert J. Goulet, Jr. (2015)
C. William Hanke (2015)
Gerald T. Keener, Jr. (2015)
David H. Moore (2015)
Robert B. Pauszek, Jr. (2015)
J. Scott Pittman (2015)
John F. Schaefer, Jr. (2015)
Caryn M. Vogel (2015)

David S. Batt (2016)
Daniel J. Beckman (2016)
Carolyn A. Cunningham (2016)
Margaret M. Gaffney (2016)
David C. Hall (2016)
Ronda A. Hamaker (2016)
Mark M. Hamilton (2016)
Jeffrey J. Kellams (2016)
Stephen R. Klapper (2016)
Frank P. Lloyd, Jr. (2016)
Susan K. Maisel (2016)
David M. Mandelbaum (2016)
John P. McGoff (2016)
Dale A. Rouch (2016)
Jason K. Sprunger (2016)

Alternate Delegates to the State Convention, September 2014

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

William C. Buffie (2014)
Brian D. Clarke (2014)
Robert E. Dicks (2014)
Doris M. Hardacker (2014)
Douglas J. Horton (2014)
Daniel E. Lehman (2014)
Ramana S. Moorthy (2014)
Maria C. Poor (2014)
Philip W. Pryor (2014)
Jason E. Rieser (2014)
Steven M. Samuels (2014)
Kenneth N. Wiesert (2014)

James P. Bastnagel (2015)
John H. Ditslear, III (2015)
Robert S. Flint (2015)
Tod C. Huntley (2015)
Norman Mindrebo (2015)
Robert Michael Pearce (2015)
David M. Ratzman (2015)
Michael A. Rothbaum (2015)
Jeffrey M. Rothenberg (2015)
Richard M. Storm (2015)
Jeremy T. Sullivan (2015)
H. Jeffery Whitaker (2015)
Allison E. Williams (2015)
Steven L. Wise (2015)

Robert J. Alonso (2016)
Ann M. Collins (2016)
Andrew J. Corsaro (2016)
Stephen B. Freeman (2016)
John Douglas Graham, III (2016)
Andrew A. Johnstone (2016)
Andrew L. Morrison (2016)
Mercy O. Obeime (2016)
Ingrida I. Ozols (2016)
David L. Patterson (2016)
Michael A. Rothbaum (2016)
Kenny E. Stall (2016)
Samuel T. Thompson (2016)
Ronald L. Young, II (2016)

Indiana State Medical Association Past Presidents

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

Indiana State Medical Association President-Elect

John J. Wernert (2013-2014)

House of Delegate Speaker, ISMA

Heidi M. Dunniway (2013-2014)

Vice-Speaker, ISMA

Heidi M. Dunniway (2012-2013)

Seventh District Medical Society Trustees

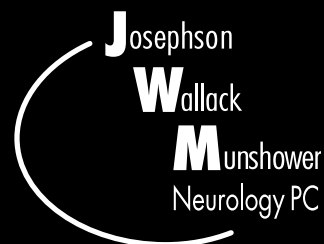
Vicki M. Roe (2014)
John P. McGoff (2015)
Marc E. Duerden (2016)

Alternate Trustees

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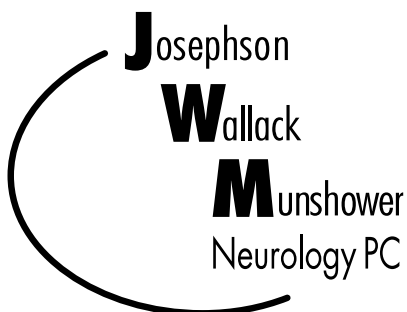
Dizziness and vertigo are incapacitating to patients and are often difficult to diagnose. The physicians at JWM Neurology specialize in the diagnosis of balance disorders and conduct testing and evaluations, including videonystagmography — a technology utilizing an infrared camera.

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.....
jwmneuro.com jwmneuro.blogspot.com

CME & Conferences

Community Health Network

Community Hospital East

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

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

Community Hospital North

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

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

Every Other
Thursday Psychiatry Grand rounds
7250 Clearvista Dr.
begin 1/24/13 Multi-Service Rms. 1 & 2 7:30 - 8:30 a.m.

Community Heart & Vascular/ Indiana Heart Hospital

First
Wednesday Imaging Conference:
rotates Cath & Echo Case Presentations
CHVH MCV Boardroom Videoconference to
HVC Anderson Office, HVC East Office BR (Ste. 420)
HVC South Office CR (Suite 2400)
7:00 - 8:00 a.m.

Third
Wednesday Ken Stanley CV Conference
CHVH MCV Boardroom Videoconference to
HVC Anderson Office, HVC East Office BR (Ste. 420)
HVC South Office CR (Suite 2400)
7:00 - 8:00 a.m.

Fourth
Wednesday Disease Management Conference:
rotates CHF & EP Case Presentations
CHVH MCV Boardroom Videoconference to
HVC Anderson Office, HVC East Office BR (Ste. 420)
HVC South Office CR (Suite 2400)
7:00 - 8:00 a.m.

Cancer Conferences

Community Hospital East:

Third
Thursday East General Cancer Conference
Medical Staff Conf. Room
12:00 to 1:00 p.m.

Fourth
Tuesday East Multidisciplinary Breast Cancer Conference
Medical Staff Conference Room
7:00 to 8:00 a.m.

Community Hospital North

First & Third
Tuesdays North Multidisciplinary Breast Conference
8040 Clearvista Parkway, Suite 550
7:00 - 8:00 a.m.

Every Other
Friday N. General Cancer Conference
8040 Clearvista Parkway, Suite 550
begin 1/18/13 7:00 - 8:00 a.m.

First
Wednesday North Chest Cancer Conference
8040 Clearvista Parkway, Suite 550
7:00 - 8:00 a.m.

Third
Wednesday Melanoma Cancer Conference
8040 Clearvista Parkway, Suite 550
7:30 - 8:30 a.m.

Community Hospital South

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

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

Indiana University School of Medicine/ Indiana University Health

IU – Methodist – Riley

Nov. 1 12th Annual Lingeman Lectureship
Riley Outpatient Center, Indianapolis

Nov. 1 1st Annual IU Health/Methodist Hospital
Trauma Orthopedic Symposium
Hyatt Regency, Indianapolis

Nov. 7 IU Health Symposium on Aortic Surgery
IU Health Neuroscience Center, Indianapolis

Nov. 12 Radiology for the Advanced Provider
Riley Outpatient Center, Indianapolis

Nov. 14-15 Pain symposium: Acute Pain Management with
Existing Chronic Pain
Latitudes 39, Indianapolis

Nov. 19-21 Biostatistics for Health Care Researchers:
A Short Course
HITS Building, Indianapolis

Dec. 7 Neurology Update III
IU Health Neuroscience Center, Indianapolis

2014
Jan. 25 Breast Cancer: Year in Review
Indiana History Center

March 7 Let's Talk Palliative Care: Improving Care for
Seriously Ill Patients and their Families
Ritz Charles Banquet Facility, Carmel

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

The Indiana University School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

We have more than 100 recurring meetings available. For a listing or more information, please visit <http://cme.medicine.iu.edu> or call 317-274-0104.

PHA Academy

December 3-4, 2013
Indianapolis Indiana

The PHA Academy is hosted by Purdue Healthcare Advisors. The program will educate providers and practice managers as well as hospital administrators, nurses, quality and IT staff on today's most pressing healthcare themes. Participants have the option of attending the entire two-day training seminar or choosing up to four of the following eight workshop offerings: Stage 2 Meaningful Use for Physicians; Stage 2 Meaningful Use for Hospitals; Responsibly Mobile™: How to keep ePHI secure on the go (for the non-IT professional); The High-Performing Practice; PCMH Made Simple: The Factor Path™; The Engaged Patient is Here; High-Consequence Care; and Building Blocks for a Lean Quality Transformation. The cost of each half-day workshop plus lunch is \$295. Purdue Healthcare Advisors is a not-for-profit initiative from Purdue University that specializes in affordable assistance to healthcare organizations and providers. Questions contact: Sheila Kelty, Purdue Healthcare Advisor, (574) 276-9942. Register at <http://pha.purdue.edu/events>

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639-3406 for your supply now!**

CME & Conferences

Indianapolis Medical Society

November

- 6 IMS Members' Event (Free),
ICD-10: The Financial Impact on Your Practice
6:00-7:15 PM, snacks, IMS Conference Center
- 10 IMS Advisory Breakfast, 7:30 AM
prior to ISMA BOT @ 9:00 AM, State Hdqtrs.
- 13 IMS Members' Event (Free),
Employee Benefits and Practice Risk Management
6:00-7:15 PM, snacks, IMS Conference Center
- 16-19 AMA House of Delegates, National Harbor, MD
- 19 IMS Board, Society, 6:00 PM, Social; 6:30 PM, Dnr/Mtg
- 20 IMS Members' Event (Free),
Roundtable Discussion with Q&A
6:00-7:15 PM, snacks, IMS Conference Center

December

- 11 Senior/Inactive Luncheon Meeting, 11:30 AM, Society.
Mr. Rob Green, "The Sex Life of Bees"
- 17 Executive Committee Holiday Dinner, with Spouses/Guests

2014

January

- 21 IMS Board, Society, 6:00 PM, Social; 6:30 PM, Dnr/Mtg.,
Speaker TBA

February

- 16-19 AMA Presidents' Forum, Sun., 4-6:30 PM; continues Mon.,
from 7:30 AM-1 PM, Grand Hyatt, Wash., D.C.
- 17-19 National Advocacy Conference (NAC), Monday afternoon
and Tuesday.
- 18 Executive Committee, Society, 6:00 PM, Sandwiches.
Nominating Committee appointed.

March

- 2 IMS Advisory Breakfast (Le Peep's), 7:30 AM ... prior to
ISMA BOT 9:00 AM, ISMA
- ? 7th District Organizational Dinner, Dr. Robert Malinzak
chairs. 6:30 PM, Eddie Merlot's
- 12 Senior/Inactive Luncheon, Society, 11:30 AM. Speaker TBA
- 18 IMS Board, Society, 6:00 PM, Social; 6:30 PM, Dnr/Mtg.,
Speaker TBA
- 30 HAPPY DOCTOR'S DAY!
- TBD IMS Nominating Cmte., Hale Room, Society Headquarters,
6:30 PM, Light Dinner.

April

- 15 Executive Committee, Society, 6:00 PM, Sandwiches
- 24 Administrative Professional's Day (aka Secretaries' Day)
- TBD IMS Women in Medicine, 7:00 – 10:00 pm.

May

- 20 IMS Board, Society, 6:00 PM, Social; 6:30 PM, Dnr/Mtg
- TBD MSE Board Meeting, Society, 6:15 PM, Sandwiches

June

- 7-11 AMA House of Delegates Annual Meeting, Chicago, IL
- 11 Senior/Inactive Luncheon Meeting, 11:30 AM, Society
- 17 Executive Committee, Society, 6:00 PM, Sandwiches
- 22 IMS Advisory Breakfast (Le Peep's), 7:30 AM ... prior to
ISMA BOT, 9:00 AM, ISMA
- TBD Project Health Board Meeting, Society, 6:00 PM, Light Meal

July

- 15 IMS Board, Society, 6:00 PM, Social; 6:30 PM, Dnr/Mtg

August

- 19 Executive Committee, Society, 6:00 PM, Sandwiches

September

- 5 ISMA BOT, Indianapolis Westin., Indpls., 46204. 1:00 PM
- 10 Senior/Inactive Luncheon Meeting, 11:30 AM, Society,
Speaker TBA



Get the facts Know the signs

(Prescription drug abuse has reached epidemic levels.)

Every 25 minutes someone dies from a prescription drug overdose.

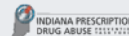
More people abuse prescription drugs than cocaine, heroin, hallucinogens, and inhalants combined.

One in 20 people have used prescription pain killers for non-medical reasons.

Middle-aged adults are the most likely to overdose from prescription painkillers.

One in five Indiana teens have admitted to abusing prescription drugs.

The Indiana Prescription Drug Abuse Task Force wants Hoosiers to learn more about the dangers of prescription drug abuse and misuse, how to prevent it and how to talk to others about it at BitterPill.IN.gov. Because this is one bitter pill we don't have to swallow.



BitterPill.IN.gov

Paid for by the Indiana Attorney General Consumer Protection settlement fund.

In Summary

Five Inadvertent HIPAA Violations by Physicians

By Tracey Haas, DO, MPH and Co-Founder, DocbookMD

Doctors do not plan ahead to violate HIPAA, but in this digital age, they may be doing it because they did *not* plan ahead. The recent final rule of the HITECH Act outlines that even if the physician is unaware of the violation, they may be fined a civil penalty of \$100 - \$50,000 per violation. It is time for even the most resistant doctors to pay attention to how they handle protected health information (PHI). Here, we will outline five common ways physicians are breaking HIPAA/HITECH privacy and security rules, and may not even know it.

1.) Texting PHI to members of your care team. It's a simple scenario: you've just left the office, and your nurse texts you that Mr. Smith is having a reaction to the medication you've just prescribed. She has included his name and phone number in the text. You may know that texting PHI is not legal, but feel justified because it is a serious medical issue. Perhaps you even believe that deleting the text right away will protect you – and Mr. Smith.

In reality, this text message with PHI has just passed from your nurse's phone, through her phone carrier, to your phone carrier, and then to you – four vulnerable points where this unencrypted message could either be intercepted or breached. In a secure messaging app, this type of message must be encrypted as it passes through all four points of contact. Ideally, both sender and recipient should be verified and have signed a business associate agreement (BAA).

2.) Taking a photo of a patient on your mobile phone. To some this will sound silly, to others, it is as common as verifying a rash with a colleague or following the margins of a cellulitis day by day. Simple enough, but if these photos are viewed by eyes they are not intended for, you may be in violation of your patient's privacy. It's important to be aware of where and how patient information and images are stored. Apps that allow you to take a secure photo are just as important as sending the message securely. DocbookMD allows photos to be taken within the secure messaging app itself – never stored on your phone or within your phone's photo album. Always use this type of feature when taking any photo of a patient or patient information.

3.) Receiving text messages from your answering service. Many physicians believe if they receive a text message from a third party, like an answering service, they are not responsible for any violation of HIPAA – this is simply not true. Many services do send a patient's name, phone number and chief complaint via SMS text. The answering service may verify it is encrypted on their end, but if PHI pops onto the physician's screen, it is certainly not secure on their end – and this is where the physician's responsibility lies. Talk with your answering service today to see how they are protecting you at both ends of the communication.

4.) Allowing your child to borrow your phone that contains PHI. Many folks allow their kids to play with their phones – maybe play games on apps while in the car. If your phone has an app that can access PHI, then you may be guilty of a HIPAA breach if the information is viewed by or sent to someone it is not intended for. The simple fix is to utilize the pin-lock feature on your messaging app – and for double-protection, always password protect your phone!

5.) Not reporting a lost or stolen device that contains PHI. Losing your smartphone or tablet is a pain for many reasons, but did you know that if you have patient information on that

device, you could be held responsible for a HIPAA breach if you do not report the loss right away. The ability to remotely disable an app that contains or handles PHI is an absolute must for technology that handles communications in the medical space. Be sure to ask for this feature from any company claiming to help you be HIPAA-compliant in the mobile world.

Remember: Being HIPAA-compliant is an active process. A device can claim to be HIPAA secure, but it is a person who must ensure compliance.

DocbookMD partners with your Indianapolis Medical Society to bring you a free, HIPAA-secure messaging app, that uniquely provides you extra security to avoid each of these potential pitfalls. Do not hesitate to reach out to us today for more information! www.docbookmd.com 1-888-930-2048

References:

The ONC's official site for mobile devices and HIPAA: <http://www.healthit.gov/providersprofessionals/your-mobile-device-and-health-information-privacy-andsecurity?gclid=CLvawcuVt7cCFStp7AodZGQAUg>

AMA Releases New Study of Physician Practice Arrangements: Private practice medicine remains strong despite increase in hospital employment

The American Medical Association (AMA) released new data in late September on physician practice arrangements showing that private practice medicine remains strong despite an increase in hospital employment. This is the first nationally representative study of physician practice arrangements in five years.

“To paraphrase Mark Twain, the reports of the death of private practice medicine have been greatly exaggerated,” said AMA President Ardis Dee Hoven, MD. “This new data shows that while there has been an increase in hospital employment, more than half of physicians (53.2 percent) were self-employed in 2012, and 60 percent worked in practices wholly owned by physicians. Needed innovation in payment and delivery reform must recognize the wide range of practice types and sizes that exist today so all physicians can participate in the move to a more patient-centered system that rewards high-quality care and reduces costs.”

While this new study shows 60 percent of physicians in physician-owned practices, there has been a trend toward more hospital employment during the last 5 years. In 2012, 29 percent of physicians worked either directly for a hospital (5.6 percent) or for a practice that was at least partially owned by a hospital (23.4 percent). A 2007/2008 AMA survey did not distinguish between direct hospital employment and employment in a hospital-owned practice, but found that 16.3 percent of physicians worked in one of the two settings.

Other important findings include:

- The percentage of physicians who were practice owners in 2012 decreased 8 percentage points from 2007/2008.
- Eighteen percent of physicians were in solo practice, down 6 percentage points over 5 years.
- Single specialty practice was the most common practice type in 2012, accounting for 45.5 percent of physicians.

This study is part of the AMA's Policy Research Perspective (PRP) series, which is available online at <http://www.ama-assn.org/ama/pub/advocacy/health-policy/policy-research.page>.

Published courtesy of the AMA.

IMS



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Union Station

from a grant made by Eli Lilly, and once again, the architect was Roll McLaughlin.

The Indiana Theatre, a remarkable building, was rescued in 1976-78; it became the home for the Indiana Repertory Theatre. Union Station, with its Romanesque Revival architecture, is the

oldest station still standing in the U.S. Bob Borns aided the renovation, which went on from 1973-1985. It now includes the Crown Plaza Hotel. The Hammond block on Massachusetts Avenue was restored, as was the Morrison Opera Palace in 1982.

In 1981, President Ronald Reagan signed the Economic Recovery Tax Credit into law. A Tax Credit Seminar was held by Reid Williamson and a large crowd signed up. A 25% tax credit was given for historic preservation buildings. As a result, many more places in Indy were restored: the Indiana Glove Co., Circle Theatre, Marrott Hotel, the Hotel Atkinson and the Sears Building.

Dr. Glass provided photos of many other areas of restoration: Fletcher Place, Chatham Arch, Herron Morton Place in 1986, Woodruff Place (built in 1870), Fountain Square, Irvington,



Old Marion County Courthouse



English Opera House

and the Wholesale District. But the crown jewel was the Circle Center Mall completed in 1995. It featured the saved facades of many historic buildings. It remains a vibrant part of the city's culture and shopping to this day.

The Madam C.J. Walker Theatre was begun in 1919 and was completed in 1927 by Mme. Walker's daughter. It was named a Historic Landmark in 1991. Madam Walker, maker of hair care products, was the first female self-made millionaire in America.

Indiana Landmarks is now headquartered in the old Central Avenue Methodist Church, at 12th St. and Central Avenue. The restoration was funded by Bill and Gayle Cook. The 2013 National Preservation Conference was held in Indianapolis from 29 October to 2 November. There were lectures by experts and demonstration projects in restoration. According to Marsh Davis, CEO of Historic Landmarks, Roll McLaughlin, now in his nineties, will be at the Conference to receive an award from the American Institute of Architects. **IMS**

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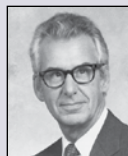
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In Memoriam



David Joe Smith, MD
1917 - 2013

David Joe Smith, MD, passed away August 31, 2013 in Regency Oaks, Sylvan Healthcare in Clearwater, Florida. after a short illness. He was born September 8, 1917 in Fort Branch, Indiana.

Dr. Smith was a graduate of Culver Military Academy and the Indiana University School of Medicine. He interned at Methodist Hospital, Indianapolis.

Dr. Smith was decorated for his service with the 314th Medical Battalion, 89th Infantry Division in Europe during WWII, retiring from service as a Major in 1946.

Dr. Smith was a specialist in surgery and preventive medicine. Practicing in Indianapolis, he pioneered specialization in occupational health and industrial medicine. He retired as Medical Director of U.S. Steel.

Malcom D. Long, MD
1937 - 2013

Malcolm D. Long, MD, 84, of Indianapolis, passed away at St. Vincent Hospice on October 4, 2013. Born in Plymouth, Indiana he spent his early life in Northern Indiana. After graduation from Purdue University, Dr. Long joined the U.S. Air Force and was a fighter pilot in ADC. Following active duty, he started medical school at IUMC, but remained active for several years in the Air Force reserves. Following graduation from medical school, he maintained a practice in family medicine in the northern suburbs of Indianapolis, and after five years in family practice returned to St. Vincent hospitals for residency in Radiology, and became board certified in Radiology, practicing this specialty in Central Indiana for the next 30 years.

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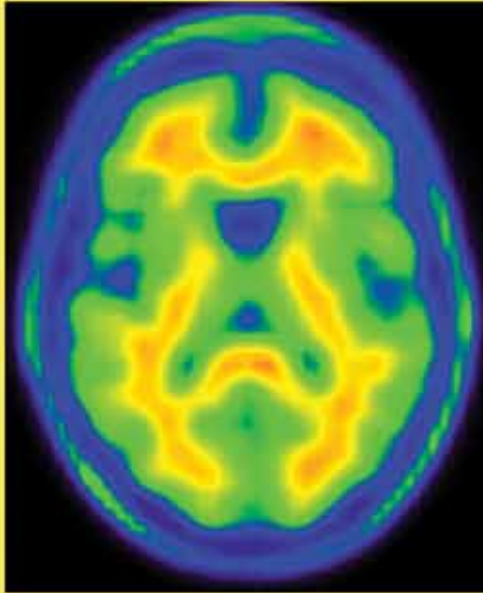
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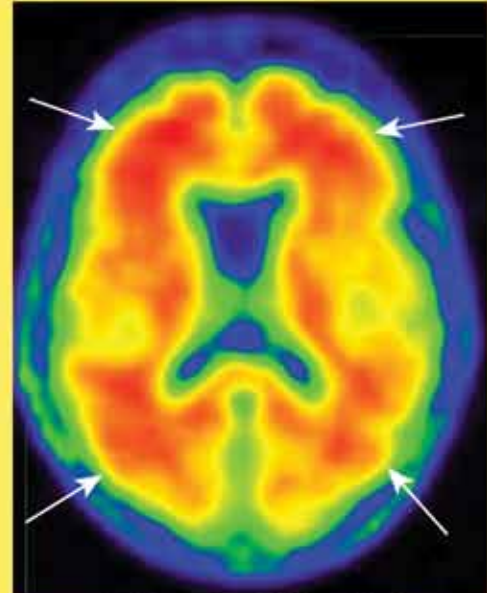
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