

BULLETIN

SPECIAL FEATURE PG 09
AIR TRAVEL INSURANCE

by *MORGAN PERRILL*
Executive Vice President, IMS



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LETTER FROM THE EDITOR



Members,

A special thank you to all of the Delegates, Alternate Delegates, Trustees, and Past ISMA Presidents who took countless hours reading resolutions and participating in the ISMA Convention in September. We appreciate your efforts on behalf of physicians to improve our society, public health and the profession. We hope to recap convention in our next month's edition.

Thank you for taking the time to share your expertise with us.

Until next month,

Morgan Perrill
*Executive Vice
President*

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THE PRESIDENT'S PAGE

LINDA FEIWELL ABELS, MD



wearing masks have been so politicized. Hospitals and physicians are overburdened. Many systems are unable to handle non covid patients. Many are canceling elective procedures. Many are on diversion.

Current challenges involve multiple health issues including the overweight and obesity, substance abuse, injury, violence, mental health, environmental quality, immunizations, and access to care.

Obesity is associated with a variety of co-morbid conditions that include hypertension, diabetes, coronary artery disease, sleep apnea, arthritis, and several malignancies, such as breast, prostate, colon, and uterine cancer. All these conditions create a heavy burden for health care management. Obesity is an epidemic and a major contributor to health care expenses in the United States accounting for almost 9 % of total medical expenditures.

Physical inactivity, an inactive lifestyle, can obviously affect weight but can also result in loss of muscle strength and weakness as well as a decline in bone mineral content. It can also contribute to a sluggish metabolism with difficulty breaking down fats and sugars and can affect the immune system. It, too, can contribute to the development of many chronic diseases including hypertension, hyperlipidemia, prediabetes and diabetes, osteoporosis, anxiety and depression, and can increase the risk of some cancers. Staying physically active can prevent or delay some of these disorders and can reduce anxiety and depressive symptoms.

Continued tobacco abuse adds to health care expenditures contributing to the risk of heart disease, stroke, diabetes, lung disease, and several cancers. It can also increase the risk of the development of tuberculosis, some eye disorders, and can compromise the immune system.

Substance abuse produces a large burden on the healthcare system. Patients with substance abuse disorders are criminalized, incarcerated, and placed in drug detention centers. This is a negative consequence of the war on drugs that has a direct effect on the poor and ethnic minorities. The federal government spent about 9.6% of its budget on

How would you describe healthcare in the 21st century? Who is responsible for the delivery of healthcare? Doctors? Mid-levels? Healthcare executives? Insurance companies? The government? What drives healthcare? Patients? Money? Insurance companies? The government? Who decides what medications or procedures are appropriate? Science/ scientific data? Physicians? Insurance companies? Currently, we are seeing corporations take over the practice of medicine. Their regulations control physician decision making. We are seeing mid-levels practice medicine. What is the most effective way to provide healthcare?

American healthcare is at a crossroads. We have witnessed rapidly advancing technological changes. We have seen scientific improvements in vaccine preventable diseases and infectious diseases. We have witnessed a reduction in deaths from some chronic diseases and injuries from motor vehicle accidents. But there are serious quality of care issues, overuse, underuse, and misuse that add to the rising costs of care. We also see inefficiency, escalating costs, uneven quality, disparities in health care, and increasing numbers of uninsured.

We are in the middle of a pandemic where politics and misinformation have contributed to patient harm and even death. Simple measures such as

THE PRESIDENT'S PAGE

LINDA FEIWELL ABELS, MD

substance abuse and addiction.

Injury and violence not only have an immediate health care consequence leading to premature death but also add to health care costs with short- and long-term disability.

Environmental quality can also affect health care. The environment can directly play a role in the quality of life, length of life, and health care disparities. Poor air quality can be associated with early death and long-term damage to the heart and lungs and contribute to some cancers. Climate change can add to the risk of natural disasters. Low income and racial and ethnic minorities face increased risk.

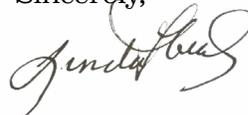
Lack of immunizations can directly add to health care burdens. Flu and pneumonia are among the top 10 causes of death for older adults. Misinformation, disinformation and contribute to lack of immunizations while anti-vaxers put themselves and others at risk for serious illness and even death.

We are faced with many challenges as we look forward. We must be flexible as we look to the future with complex challenges. Change is needed

in both the organization and delivery of health-care. We need to redesign delivery systems and payment models. We must do more with less and strive for better outcomes. We need to prevent underuse, overuse, and misuse. We need to look at information and technology so electronic systems interface. We must care for the aging, discuss healthcare with climate changes, and readdress how we take care of substance abuse and mental illness.

We need physicians to be the leaders of health-care. We need corporations and business entities whose primary focus is not the care of the patient to listen to the input of physicians. We need to be guided by scientific data and facts. We need to improve our communication skills and encourage our patients to become active participants. This is our challenge to save the practice of medicine!

Sincerely,



Linda Feiwell Abels
President
Indianapolis Medical Society



There's An App For That



In the Fight Against Opioid Abuse

*Q&A with JANETTE HELM
ISMA director of education and professional development*



For the treatment of patients suffering from opioid use disorder (OUD), physicians have until Oct. 31, 2021, to obtain or renew a Controlled Substances Registration (CSR). All medical practitioners, including physicians, must hold a CSR to prescribe, administer, store, dispense or otherwise handle controlled substances in the state of Indiana.

The Indiana State Medical Association is once again offering Indiana's only CME series on opioid prescribing and abuse that can be accessed through an easy-to-use mobile app. The Bulletin turned to Janette Helm, ISMA director of education and professional development, for a Q&A about the course offerings available through this innovative tool.

Tell us about the Opioid CME Series that ISMA is offering.

In 2018, thanks to a grant from the Richard M. Fairbanks Foundation (RMFF), ISMA launched a comprehensive program to educate medical professionals about opioid prescribing and addiction. A year later, we added a series of online courses and a mobile app that physicians can use to access the courses wherever and whenever they want. And it was wildly successful, with 4,000 physicians downloading the ISMA Online™ mobile learning app and more than 13,000 CME credit hours awarded.

Now, two years later, it's time again for physicians to renew their CSR, and ISMA has even more CME courses to offer that will help busy physicians complete this requirement before the state's deadline of Oct. 31.

What's different this year compared with 2019?

When ISMA first rolled out the app, CME courses were free of charge for all Indiana physicians. This year, the courses are only free for ISMA members. Nonmembers can still access the courses, but for a fee, paying either \$75 per webinar or \$400 for the entire series. So, it's really a better deal financially to join ISMA and enjoy all the benefits of membership in addition to our educational offerings, which they get immediately at no extra cost.

Also new for 2021, we began adding half-hour courses in addition to our 60-minute webinars.

The shorter courses are only available on the mobile app and are designated for a maximum of 0.5 AMA PRA Category 1 Credits™ toward the 2.0 credits required for a CSR. Meanwhile,

our traditional hour long webinars are designated for a maximum of 1.0 AMA PRA Category 1 Credits™ and can be viewed live on the second Thursday of every month on your desktop computer or mobile device. After the live date, the webinars are archived and made available on demand through the app.

Finally, we also have opened up our CME courses to nonphysicians. ISMA members can share the promo code CME75OFF with midlevel providers on their teams and direct them to ISMA.net.org/ISMAOnlineSubscription to register. They will need to sign in or create a new account, then enter the promo code at checkout and select "Apply."

How does ISMA's Opioid CME Series compare with other CME out there?

Nationally, there are very few organizations that offer CME on opioid use disorder through a mobile app. And ISMA remains the only provider in Indiana to do so. Users can literally start, stop and resume a course as they go, making it convenient and easy. This is one of the many ways that ISMA is driving greater innovation so physicians can devote more time to their patients.

What specific courses does ISMA offer on OUD?

All our courses feature expert presenters who discuss best practices on caring for patients at risk for OUD in a variety of settings. Hourlong and half-hour courses in the series include what's new in pain and addiction treatment, buprenorphine, palliative care, hospice care, treating pregnant women, OUD management via telehealth, pain control in surgical patients, and sports medicine. In September, we'll add neonatal abstinence syndrome.

Even after the Oct. 31 CSR deadline, we will continue to add more courses on additional CME topics, so physicians are encouraged to check back often.

How can a physician access the Opioid CME Series?

Physicians interested in learning more should visit ISMA.net.org/2021OpioidCME for all the details and links to our online courses, how to download the mobile app and other resources on opioid prescribing.

If you know of anyone who might be interested in our CME but isn't a member, there is also a link to join ISMA and get immediate access to the series at no extra charge.



Indiana's most innovative continuing medical education series on opioid prescribing and abuse is available to all Hoosier physicians who need 2.0 hours of CME to obtain or renew their Controlled Substance Registration (CSR) by Oct. 31, 2021.

Half-hour courses and hourlong webinars are available now online or through an easy-to-use mobile app on your smart device. Start, stop and resume a course whenever and wherever you want.

www.ismanet.org/2021OpioidCME



For more resources on opioid use disorder and prescribing controlled substances, visit www.ismanet.org/OpioidResources



AIR TRAVEL GROUP INSURANCE

The Indianapolis Medical Society offers its members a continuing FREE benefit in the form of air travel insurance. Simply fill out the form included on page 10 in this issue of the Bulletin (or download the form from our website) and send it in to our offices. All members are eligible, regardless of employment situation.

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By action of the Indianapolis Medical Society Board of Directors, members are being given FREE coverage by an air travel group insurance plan. The policy will pay \$100,000 to your estate or beneficiaries in the event of your death in an airplane crash; or pay \$100,000 to you in the event of serious personal injury resulting in the complete loss of both hands, or both feet, or the entire sight in both eyes; or will pay \$50,000 to you in the event of personal injury involving the loss of one foot, or one hand, or the entire sight in one eye with a maximum overall benefit of \$500,000 aggregate per accident, subject to terms of the policy. The benefit will cover all society members, regardless of employment situation.

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Signature of person insured

Printed Full Name

Date of Signature

World without Vaccinations



by RICHARD D. FELDMAN, MD

IMS Board Member, MHM Board Member and Past President, Former Indiana State Health Commissioner

In the throes of the COVID-19 pandemic in 2020, it seemed like most everyone eagerly awaited the development and approval of a vaccine that would end the nightmare. The miracle happened with the creation of a highly efficacious and safe vaccine in record time. I hoped that finally there would be a renewed appreciation for immunizations. But for the 40 percent of eligible Americans who remain unvaccinated for COVID-19, attitudes didn't largely change. I'm astonished with the widespread vaccine resistance and misguided beliefs present in the midst of rampant COVID hospitalizations and deaths. The outrageous disinformation from anti-vaccine activists and conspiracy theorists, the strange politicization of COVID vaccines (and masking), the unconscionable behavior of some politicians, the distrust of public health experts, and the lack of concern for the common good are truly incredible. The seriousness of this pandemic leaves no question about the need for immunization.

The development of vaccines was one of the greatest miracles in medical history. They changed the world forever. No longer do young and healthy people, and to a large extent older and more vulnerable individuals, commonly die of acute vaccine-preventable infections that are rare or nonexistent today.

Let's take a look at America today without immunizations. I calculated the following general estimates utilizing available public health data documenting the prevalence of various diseases before the development of their respective vaccines and adjusted for population growth.

Without immunizations, each year in the U.S. there would be:

- 3,900 cases of tetanus. There are now only about 30 cases.
- 353,000 cases of mumps. There were 142 cases reported in 2020.
- 374,000 cases of hepatitis B. There are now about 3,000 cases.
- 618,000 cases of diphtheria and 3,500 deaths. Diphtheria has been virtually eliminated in the U.S. In 2020, there were 3 cases and 2 deaths reported.
- 437,000 cases of reported pertussis (whooping cough). About 18,000 cases were reported in 2019.
- 33,000 cases of paralytic polio. Polio is virtually nonexistent in the Western Hemisphere. Since 1979 there have been no cases of polio originating in the U.S.
- 77,000 cases of rubella. There are now less than 10 cases. Before the rubella vaccine, infants were born with congenital rubella syndrome resulting in blindness, deafness, and intellectual handicaps.
- 4 million cases of chickenpox and 11,000 hospitalizations. The vaccine was developed in 1995. Since then, chicken pox cases have decreased about 90 percent.
- 851,000 cases of measles. Although some years have more cases from out

“The COVID crisis will continue with new more virulent variants until we achieve “herd immunity” with 85 to 90 percent immunization rates. Normalcy will not return until then.”

breaks in certain communities due to low immunization rates, in 2020 there were only 13 U.S. cases reported.

- 20,000 cases of life-threatening invasive *Hemophilus influenzae* bacterial infection in children less than five years of age, mostly meningitis. There were only 14 cases in 2019.

- 90,000 cases of smallpox. Because of vaccination, smallpox was completely eradicated from the world in 1977.

The implications of the above are obvious for the current COVID crisis. It's tragic that thousands of people are dying unnecessarily from our newest vaccine-preventable disease.

The COVID crisis will continue with new more virulent variants until we achieve "herd immunity" with 85 to 90 percent immunization rates. Normalcy will not return until then.

Vaccination in America saved millions of lives over the past century. Appreciate the miracle of vaccinations by remembering the devastating diseases they prevent.

The unvaccinated should act intelligently and rationally. They should get a COVID vaccine to protect themselves, their families and their communities.

NOTE FROM THE EDITOR:

Editorial articles are the opinions of one of our members. These articles are published with the intent to encourage discussion and do not represent the views of the IMS board. If you have an opposing viewpoint, please send it to us. We would be happy to publish it in next month's edition. Additionally, if you have an editorial you would like to share, please submit it. You can reach us at mperrill@indymedicalsociety.org.



Colleague Corner: The 10 Question Interview

We don't know about you but we are truly enjoying learning about our fellow members. Our Editor however hates twisting arms for willing volunteers. So why don't you volunteer? It doesn't take long. Just send a quick email Morgan (mperrill@indymedicalsociety.org) or even a text (317-450-0342) that you're interested and you could be next.

*We have a special treat for you this month. Our participant is an active IMS board member and member of the Past President's Council, **Dr. Christopher Bojrab**. We hope you enjoy this article as much as we did.*

1. Tell our readers little bit about yourself, your family life, background including medical school and specialty and where you work now.

I was born in Fort Wayne, did my undergraduate work at Wabash College and then med school and my residency in general psychiatry at the IU School of Medicine. I am the president of Indiana Health Group which is one of the largest behavioral healthcare practices in the country and I am incredibly lucky to have the opportunity to work with an amazing group of clinical and support staff in a practice that feels like a family.

2. What attracted you to medicine and your specialty in particular?

I was always interested in science from a very young age, I loved the idea of a profession focused on helping others, and I was always fascinated by brain science, how this 3-pound lump of tissue inside our skull could possibly do everything that it does to make us, us.

3. Was there someone who inspired your jour-

ney toward medicine or someone who inspires you daily? What would you say to them if you could?

I would say that my uncle, Steve Bojrab MD was a big influence and role model. He was a wonderful person with a great sense of humor, a kind and caring physician, a fantastic psychiatrist and along with two other partners started Indiana Health Group in 1987. He was my father's youngest brother, and was only about 12 years older than me, so I always felt a special connection with him growing up. Interestingly, in addition to both being psychiatrists, we both married our high school sweethearts who are both nurses and who both worked at the same restaurant when we started dating them. Tragically, Steve died in 2004 due to multiple myeloma, but we did get to work together for a handful of years prior to his illness and death. If I could say something to him now, it would be to tell him "thank you" for helping me become the kind of physician I am today and teaching me the importance of gratitude.

4. What is the best and worst thing that has happened to you since becoming a physician?

The best thing to happen to me since becoming a physician has been the feeling you get when you know you have really helped someone, when you run into a patient outside of the office and they come up and tell your family or your friends that you have changed or saved their life, there is not much better than that. The worse thing that has happened to me is probably the sacrifices we all make that impact our family, the missed trips, school functions, games, meals, etc. Being a physician means making a decision to steal part of that precious time with the people we love and to share it with people who are strangers to them.

5. What is the biggest challenge you believe we

face as physicians today?

I think there are myriad challenges that we face today as physicians, but one of the challenges that troubles me the most is the diminution of the respect for expertise. We live in a world increasingly harmed by pseudoscience, where people think that a 15 minute google search somehow equates to “research”, and in which the general public and policy makers sometimes listen to the people shouting the loudest rather than to people who have spend a career in careful scientific study of a field.

6. Would you encourage another young person into a career in medicine?

I would, but perhaps a little less enthusiastically than I would have 20 years ago. I still believe that it is the best and most important job in the world, but it exacts an incredible cost at times. Perhaps today’s physicians coming out of training are doing a better job than we did at striking a healthier work/life balance, at least that is my hope.

7. What has been the most unique medical case you have faced before (without breaking any HIPPA laws of course)?

That is a tough one, perhaps a case from early in my career with a patient who appeared to be delusional and paranoid that her husband was trying to kill her and as she eventually started to manifest a number of neurological symptoms and a heavy metal screen showed extraordinarily high levels of cadmium, mercury, and nickel. Ultimately, her husband (who worked a plant that manufactured batteries) was charged with attempted murder as it appeared that he had been intentionally poisoning her over time.

8. If you could not be a doctor, what would you be?

Hmmm, I have a couple of pretty disparate thoughts.... If I had the math chops I think I would have enjoyed cosmology/astrophysics. Otherwise, I would have loved to have been a comedian.

9. What is your favorite inspirational quote?

I am a lover of quotes, so I will share two.

“Beware the irrational, however seductive. Shun the ‘transcendent’ and all who invite you to subordinate or annihilate yourself. Distrust compassion; prefer dignity for yourself and others. Don’t be



afraid to be thought arrogant or selfish. Picture all experts as if they were mammals. Never be a spectator of unfairness or stupidity. Seek out argument and disputation for their own sake; the grave will supply plenty of time for silence. Suspect your own motives, and all excuses. Do not live for others any more than you would expect others to live for you.”

- Christopher Hitchens

“Nothing in this world can take the place of persistence. Talent will not; nothing is more common than unsuccessful men with talent. Genius will not; unrewarded genius is almost a proverb. Education will not; the world is full of educated derelicts. Persistence and determination alone are omnipotent. The slogan Press On! has solved and always will solve the problems of the human race.”

- Calvin Coolidge

10. At the end of your career, how would you like to be described?

As the oldest living psychiatrist :)

A very special thank you for Dr. Bojrab for completing these questions on short notice! You are a true hero!

ANY member can participate, from student to retiree. And you already know what questions we are going to ask. If you would like to be our next feature, we would love to hear from you. Please reach out to our Editor and Executive Vice President, Morgan Perrill at 317-450-0342 or via email at mperrill@indymedicalsociety.org.

WELCOME NEW MEMBERS

ACTIVE MEMBERS

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Diagnostic Radiology
Indiana U Sch Med, 1999

TRACEY WILKINSON, MD

410 W 10th St Ste 2000
Indianapolis, IN 46202-3012
Pediatrics
Vanderbilt University School of Medicine, 2006

RESIDENT MEMBER

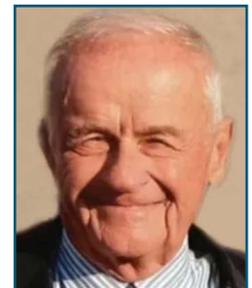
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Rheumatology
Indiana U Sch Med - 2017

IN MEMORIAM

FRANCIS E. MCAREE, JR., MD

Dr. Francis E. McAree, Jr., of Fishers, Indiana, died Wednesday, August 18, 2021. He will be interred at Oaklawn Memorial Gardens during a private service for family. Fran was born July 20, 1930 in Indianapolis, the only child of Francis E. McAree, Sr. and Bernadine Towles McAree Shumaker. He graduated from Howe High School in 1948 and graduated from Indiana University (IU) and its Medical School in 1955. While at IU, Fran was a member of Phi Kappa Psi fraternity, a choral quartet, and a letter-winning member of its legendary swim team. He also enjoyed musical performances by many stars at the time, including his idol, Louis Armstrong. Following medical school, Fran performed his internship at Philadelphia General Hospital, where he met a beautiful nursing student from Philly, Judy Mischler. Upon completion of his internship, Fran entered the U.S. Air Force and was assigned to serve as a medical officer at Fuchu Air Base, in Fuchu, Japan. Fran and Judy married and began their life adventure together in Japan, welcoming their son, Kevin, there and offering Fran the opportunity to travel throughout Indonesia, the Philippines, and India. Fran served in the U.S. Air Force on active duty from 1956-1958, attaining the rank of Captain, and on reserve duty until 1972.



Back in Indianapolis in late 1958, Fran began his residency in Obstetrics and Gynecology at Methodist Hospital. He then opened a private practice in association with Community Hospital East, where he practiced for nearly 50 years. Fran was passionate about the field of medicine, reading journals on a daily basis into his 90th year. He was equally passionate about his patients, delivering well over 10,000 babies and caring with a rare expertise and devotion to his thousands of patients, including many multi-generational family members. A Volunteer Clinical Associate Professor at IU Medical School, Fran received the Distinguished Physician Award from Community Hospital in recognition of his contributions to the institution and his community of patients. Prior to and following retirement in the late 2000s, Fran continued to serve as a volunteer physician at the Volunteers in Medicine clinic in Hilton Head, South Carolina—the first free and charitable clinic of its kind. He and Judy also served as medical volunteers to low-resource communities through multiple mission trips to Belize and Ecuador. IMS Member since 1956.



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RICK SASSO, MD

Rick C. Sasso MD, Indiana Spine Group, gave 4 invited lectures at the annual meeting of the American Academy of Orthopaedic Surgeons which was held in San Diego September 1-4, 2021. All of Dr. Sasso's requested presentations were surrounding the topic of Cervical Spine disorders.



STEPHEN W. PERKINS, MD

Stephen W. Perkins, MD, of Meridian Plastic Surgeons, was an invited faculty member at the Multi-Specialty Aesthetic Symposium in Newport Beach, CA. He presented a lecture titled "The Use of Multiple Modalities For Skin Resurfacing In One Treatment For Maximum Results".

TO SUBMIT ANNOUNCEMENTS FOR THE BULLETIN BOARD, simply **email** your item to our editor and Executive Vice President, Morgan Perrill, at Mperrill@indymedicalsociety.org. Any announcement, conference/speaking engagement, award, press release, book, birth, celebration that includes an IMS member submitted before the 5th of that month will be printed in the Bulletin Board as long as space allows.

INDIANAPOLIS MEDICAL SOCIETY FOUNDATION

MONTHLY DONATIONS

Dr. David Diaz
Dr. Linda Abels

Dr. Abels makes her donation to thank the following physicians for their wonderful care:

Dr. Laurie Akerman
Dr. Ryan Fitzgerald
Dr. Brian Leland
Dr. Robert Burns
Dr. Charline Buente
Dr. Benjamin Campbell
Dr. Brandon Christopher Lane
Dr. Erik Streib

Thank you

CME & CONFERENCES

MONTHLY EVENTS

	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
1st Week of the Month	Community North: Breast Cancer Conf. 7-8 am	Community East: CHE Admin Conf. 12-1 pm Community North: Psychiatry GR 12:30-1:30 pm Community North: Chest Cancer Conf. 7-8 am Community Heart & Vascular: Imaging Conf. 7-8 am		Community North: Forum 7-8 am Community South: South Case Presentations 12-1 pm
2nd Week of the Month	Community East: Medical GR 1-2 pm Community South General CHS 12-1 pm	Community North: GI/Oncology Conf. 7-8 am Community Heart & Vascular: M&M Conf. 7-8 am Community South: Breast Cancer Conf. 8-9 am St. Vincent Simulation Center: Pediatric GR 12-1 pm St. Vincent Womens: Neonatology GR 12-1 pm	St. Vincent: Electrocardiograph Conf. 7-8 am	Community North: Gynecological/Oncology Conf. 7-8 am
3rd Week of the Month	Community North: Breast Cancer Conf. 7-8 am Community South: South Thoracic 8-9 am Community South: South Molecular 5-6 pm	Community North: Psychiatry GR 12:30-1:30 pm Community North: Melanoma 7:30-8:30 am Community Heart & Vascular: CV Conf. 7-8 am	St. Vincent Heart Center: Cardiac, Medical, Surgery 7-8 am	Community North: GU Conf. 7-8 am Community South: South Case Presentations 12-1 pm
4th Week of the Month	Community East: Breast Cancer Conf. 7-8 am	Community North: GI/Oncology Conf. 7-8 am Community Heart & Vascular: Disease Manage Conf. 7-8 am St. Vincent Womens: Perinatal Case 7-8 am		
Annual		St. Vincent Womens: St. Vincent Simulation Center: St. Vincent Simulation Center:	MFM Ultra Sound Series Sim Debriefing Essentials PMCH Crisis Management	Quarterly 1-4 pm 12x/Year 12x/Year

WEEKLY EVENTS

Day of the Week	Event
Monday	St. Vincent: General Cardiology 7-8 am
Tuesday	St. Vincent: Trauma Case 12-1 pm St. Vincent Womens: Neonatology Journal Club (every other month) 12-1 pm
Wednesday	St. Vincent: CCEP 7-8 am St. Vincent Heart Center: Intervention Cardiology 7-8 am St. Vincent: Advanced Heart Failure 7-8 am St. Vincent: Surgery Didactics 7:30-8:30 am St. Vincent: Surgery M&M 6:30-7:30 am
Thursday	St. Vincent PMCH: Pediatric Cardiothoracic Surgery & Cardiology Conf. 12-1 pm St. Vincent OrthoIndy: Fractures 8-9 am

ONLINE EVENTS

Indiana School of Medicine

Indiana University School of Medicine is committed to providing valuable educational opportunities. Many of our educational activities usually offered as face-to-face meetings, have now transitioned to a virtual format in an effort to keep healthcare teams connected and engaged during the COVID-19 pandemic.

Online activities, visit: <https://iu.cloud-cme.com>

SEPTEMBER

19 - 24 106th Annual Course on Anatomy & Histopathology of the Head, Neck & Temporal Bone

DECEMBER

13-16 IU Radiology Imaging Update at Disney World

Please visit <https://iu.cloud-cme.com> for a list of Regularly Scheduled Series (RSS) activities.

IMS is not responsible for the events listed. We recommend that before attending any CME/Conference events that you check with the provider to confirm the program is still available.

To submit articles, Bulletin Board items, CME & events, opinions or information, email ims@imsoline.org. Deadline is the first of the month preceding publication.

INDIANAPOLIS MEDICAL SOCIETY

125 West Market Street, Suite 300, Indianapolis, IN 46204
ph: 317-639-3406 | www.IndyMedicalSociety.org

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BOARD OF DIRECTORS 2021

Terms End with Year in Parentheses

Mercy O. Obeime, Chair and Ann C. Collins, Vice Chair

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Richard D. Feldman (2022)	Mercy Hylton (2022)	Ramana S. Moorthy (2023)	Maureen Watson (2022)
Ronda A. Hamaker (2023)	Penny Kallmyer (2021)	Thomas R. Mote (2022)	Joseph Webster, Jr. (2022)

PAST PRESIDENTS' COUNCIL 2021

** Indicates Voting Board Members, Term Ends with Year in Parentheses*

Christopher D. Bojrab* (2023)	John C. Ellis	Jon D. Marhenke
Carolyn A. Cunningham	Bernard J. Emkes	Mary Ian McAteer* (2022)
David R. Diaz	Bruce M. Goens	John P. McGoff
Marc E. Duerden	Paula A. Hall	Stephen W. Perkins

ADVISORY BOARD MEMBERS 2021

Caitlin J. Harmon, Resident	Salman S. Qureshi, Marian Student	Maham Nadeem, IU Student
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DELEGATES

Delegates to the Annual State Convention

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

Linda Feiwell Abels (2021)	Marc E. Duerden (2023)	Mark M. Hamilton (2022)	Mercy O. Obeime (2023)	Eric E. Tibesar (2023)
Christopher D. Bojrab (2021)	Richard D. Feldman (2021)	C. William Hanke (2021)	Ingrida I. Ozols (2023)	Maureen Watson (2022)
Ann C. Collins (2023)	Robert S. Flint (2021)	Penny W. Kallmyer (2023)	Robert M. Pascuzzi (2023)	Steven L. Wise (2021)
Carolyn Cunningham (2022)	Bruce M. Goens (2022)	John E. Krol (2023)	J. Scott Pittman (2022)	Crystal Zhang (2022)
Julie A. Daftari (2023)	Ann Marie Hake (2022)	Mary Ian McAteer (2023)	David M. Ratzman (2021)	
John H. Ditsler (2021)	Ronda A. Hamaker (2022)	Thomas R. Mote (2021)	Jodi L. Smith (2022)	

ALTERNATE DELEGATES

Delegates to the Annual State Convention

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

Ranai Abbasi (2021)	Kathryn Kelley (2023)	Glenn A. Tuckman (2021)
Laurie L. Ackerman (2022)	James Leland (2022)	
Jeffrey L. Amodeo (2021)	Christopher Mernitz (2021)	
Doris Hardacker (2021)	Martina F. Mutone (2021)	
Caitlin J. Harmon (2023)	Scott E. Phillips (2022)	
David A. Josephson (2023)	Richard M. Storm (2021)	

INDIANA STATE MEDICAL ASSOCIATION

Past Presidents

**Indicates deceased*

John P. McGoff 2017-2018	Peter L. Winters 1997-1998	John D. MacDougall* 1987-1988
Jon D. Marhenke 2007-2008	William H. Beeson 1992-1993	George T. Lukemeyer* 1983-1984
Bernard J. Emkes 2000-2001	George H. Rawls* 1989-1990	Alvin J. Haley 1980-1981

SEVENTH DISTRICT

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David R. Diaz

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Robert Flint (2024)

Alternate Trustees

Mercy Hylton (2022)
*2nd, void due to ISMA bylaws

President

Mercy Hylton (2022)

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